

# REFERENCE NOTES

March 2017

MONTGOMERY CITY-COUNTY  
PUBLIC LIBRARY

Volume 1, Issue 3

## Healthy Start Approaches to Reducing #infantmortality

- Improve Women Health
- Promote Quality Services
- Strengthen Family Resilience
- Increase Accountability through Quality Improvement, Performance Monitoring, and Evaluation

Source: [healthystartepic.org/healthy-start](http://healthystartepic.org/healthy-start)



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## Assessing Infant Mortality: Realities, Helpful Solutions, and Screening Options

Infant mortality refers to the death of children under the age of one. Currently, the leading causes of infant mortality include birth defects, preterm birth, pregnancy complications, and SIDS (sudden infant death syndrome). Income is also correlated to infant mortality.

Birth defects are typically identifiable at the third month of pregnancy. The causes of birth defects are largely unknown with the exception of fetal alcohol syndrome. However, there are several risk factors which healthcare professionals believe play a role. These factors include recreational use of drugs and alcohol, obesity, and certain medications. Additionally, research reveals that it is important for males and females to incorporate healthy habits prior to conception to combat infant mortality.

Preterm birth is birth that occurs before 37 weeks. According to the CDC, in 2015 preterm birth occurred in 1 out of 10 infants, which is down from previous years. Healthcare professionals speculate this is directly correlated to a

decrease in the number of pregnancies among young mothers and teenagers. Babies who are born early often deal with breathing problems, feeding difficulties, and other issues which can ultimately result in death.

Data reveals higher preterm birth rates for Black women. Research by Eichelberger, Doll, Ekpo, & Zerden (2016) reveals that 13.4% of Black women experienced preterm birth in comparison to 9.1% of Caucasian women. The same data revealed that Black women do not understand that genetic counseling is available. Additionally, the study proved that Black women are less likely to receive recommended influenza vaccinations during pregnancy.

Pregnancy complications which contribute to infant mortality include anemia, mental health issues, high blood pressure, and gestational diabetes. Anemia and hypertension can be assessed and managed prior to pregnancy. However, depression and gestational diabetes can occur randomly during pregnancy. It is very difficult for an individual to care for the

needs of an unborn child when they are depressed. Therefore, individuals in this predicament should consult a healthcare professional immediately.

Sudden infant death syndrome is currently the leading cause of infant death. SIDS occurs during infant sleep. It is unknown specifically what causes the syndrome. However, newborn parents are encouraged to place infants to sleep on their backs. Research also reveals that this condition occurs more often in boys and minorities.

Income and earning potential is directly related to infant mortality. The lower an individual's income the higher the chances that they will have a child affected by infant mortality. Individuals in lower income brackets often lack health literacy as it pertains to a healthy diet and other lifestyle factors. Additionally, this same income bracket experiences higher levels of maternal stress due to lack of resources.

Contrary to popular belief, maximizing the chances of a successful pregnancy is not solely on

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the woman. Chromosomal abnormalities often resulting in early miscarriages, and birth defects are speculated to have a direct connection to sperm quality. Therefore, prior to conceiving it is important for the male to work towards a healthy weight, incorporate a diet high in folic acid, refrain from smoking and drinking, limit consumption of

caffeine, and start an exercise regimen.

There is no single solution to combatting infant mortality. However, medical options provide helpful insight. Genetic counseling is a way to gauge genetic predisposition to specific conditions. Additionally, amniocentesis is a medical procedure performed during pregnancy to determine chromosomal abnormalities, gender, and

fetal infections. Ultimately, wise pregnancy planning entails being proactive physically and assessing if both parties are in a financially stable position.

### Sources

Eichelberger, Kacey Y., Kemi Doll, Geraldine E. Ekpo, and Matthew L. Zerden. "Black Lives Matter: Claiming a Space for Evidence-Based Outrage in

Obstetrics and Gynecology." *American Journal of Public Health* 106.10 (2016): 1771-772. Web.

"Preterm Birth." Centers for Disease Control and Prevention, 10 Nov. 2016. <https://www.cdc.gov/reproductivehealth/maternalinfanthealth/pretermbirth.htm>. Accessed 28 December 2016.

## Pathfinder: Infant Mortality

### Research Notes

Searching for information on infant mortality is easily achieved utilizing the databases available from the Montgomery City-County Public Library. A general search yields current statistical data and can be filtered by publication date. The most credible resources on infant mortality are likely to be found in academic journals with peer-reviewed articles. These articles have been reviewed by experts in the field. Pregnancy planning resources for individuals considering pregnancy can be found in a plethora of resources to include electronic and in print materials available in the Montgomery City-County Public Library. These resources provide information on various diagnostic tools, preparing your body prior to conception, and other preventative screening options that can assist in a healthy pregnancy.

### Databases available through Montgomery City-County Public Library

- Merck Manual (Available in professional and consumer platforms)
- EBSCO Host
- PubMed (Available through Alabama Virtual Library)

### Suggested Websites

[www.webmd.com](http://www.webmd.com)  
[www.census.gov](http://www.census.gov)  
[www.cdc.gov](http://www.cdc.gov)  
[www.nih.gov](http://www.nih.gov)  
[www.nationalhealthystart.org](http://www.nationalhealthystart.org)  
[www.cia.gov/index.html](http://www.cia.gov/index.html)

### Non-Fiction (EBSCO Public Library E-Book Subscription Collection)

Glade, Curtis and Judith Schuler. *Your Pregnancy After 35*. DaPrss, Pennsylvania: 2013.

Jones, Catherine. *Eating for Pregnancy: An Essential Nutrition Guide and Cookbook for Today's Mother-to-be*. Da Capo Press, Massachusetts: 2009.

Livoti, Carol. *The Stress-Free Pregnancy Guide: A Doctor Tells You What to Really Expect*. AMACOM, New York: 2009.

Steingraber, Sandra. *Having Faith: An Ecologist's Journey to Mother*. Da Capo Press, Massachusetts: 2001.

(Article and Pathfinder written by Khalilah Hayes, Librarian II, Juliette Hampton Morgan Memorial Library)

