



NEWS RELEASE

ALABAMA DEPARTMENT OF PUBLIC HEALTH

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Infant mortality rate in Alabama increases in 2012

FOR IMMEDIATE RELEASE

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The Alabama Department of Public Health announces that the infant mortality rate of 8.9 deaths per 1,000 live births in 2012 is the highest in the past four years. This represents the deaths of 519 infants who did not reach 1 year of age. There were 58,381 live births in 2012. In 2011, Alabama recorded its lowest infant mortality rate ever, 8.1.

Dr. Donald Williamson, state health officer, said, "We must focus on what needs to be done about this challenging public health concern. While we are seeing positive trends such as the lowest rate of teenage births and less smoking among pregnant teens, we must explore and initiate additional strategies to reduce infant mortality."

The percent of births to teenagers in 2012 was the lowest ever recorded, 10.7 (6,236). Infant mortality among babies of teen mothers was higher (11.1 per thousand live births) than among adult mothers (8.6).

Low birth weight infants, defined as those weighing less than 5 pounds, 8 ounces, are more than 20 times more likely to die than infants of normal weight. Ten percent of births in 2012 were of low weight, the same as in 2011.

The lifestyle of the mother, such as smoking, has an impact upon the unborn child. The rate of teen women smoking during pregnancy declined from 10.8 percent of teen mothers in 2011 to 10.5 percent in 2012. Smoking among adult women ticked up slightly to 10.7 from 10.6 in 2011. Infants of mothers who smoke have a 51 percent higher infant mortality rate than nonsmoking mothers. The infant mortality rate of mothers who did not smoke was 8.3; for smokers the rate was 12.5.

Disparities by race persist in pregnancy outcomes. The 2012 infant mortality rate for black mothers was 14.4, an increase over the 2011 infant mortality rate of 13.0 per 1,000 live births. For white mothers, infant mortality also increased from a rate of 6.1 to 6.6.

By method of payment, women without insurance coverage experienced far higher infant mortality. The rates are as follows: private insurance, 6.8; Medicaid, 9.7; and self pay, 22.7 per thousand live births.

Additional strategies to further reduce infant mortality are being considered. Initiatives include efforts to reduce the number of preterm births and limiting elective deliveries when gestation is less than 39 weeks and there is no medical indication for delivery.

Graphs and detailed charts are available at the Alabama Department of Public Health website at adph.org.

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