

Background: Considerable disparity exists between white and African American infant mortality in Mississippi and greatly affects the health of the state. This program is designed to accelerate the rate of change among African American populations and reduce significant disparity in infant mortality for African Americans related to low birthweight (LBW), preterm birth (PTB), and Sudden Infant Death Syndrome (SIDS).

Methods: A combination of medicinal, behavioral, educational, and service system enhancement risk reduction interventions are being implemented in two target areas of the state. The pilot communities are a five-county Delta area including Bolivar, Coahoma, Leflore, Sunflower, and Washington Counties and the three-county Jackson Metropolitan area including Hinds, Madison, and Rankin Counties. Interventions primarily target eliminating disparities by maximizing access to care and examining trends in fetal, infant, and maternal mortality.

Perinatal regionalization: Interventions primarily target service system enhancements and maximizing access to care. Fetal fibronectin equipment has been installed in three Delta hospitals to improve utilization of pregnancy services. Professional education is being provided to expand radiology technician capacity to conduct ultrasound cervical measurements. A written plan for perinatal regionalization is being written.

Data: According to an analysis of the 1996-2000 birth cohort linked with infant deaths, African American infants are nearly twice as likely as white infants to be born LBW and had a 70% higher risk for PTB. Significant disparities exist in SIDS deaths between African Americans and whites (RR=1.7).

2001 Vital Statistics	White	Nonwhite
Infant Deaths (n=443)	35.4%	64.6%
Low birthweight (n=4,513)	39.2%	60.8%
Premature birth (n=7,151)	45.2%	54.8%

2002 Vital Statistics	White	Nonwhite
Infant Deaths (n=428)	36.2%	63.8%
Low birthweight (n=4,644)	39.4%	60.6%
Premature births (n=6,919)	45.1%	54.9%

2003 Vital Statistics	White	Nonwhite
Infant Deaths (n=453)	34.9%	65.1%
Low birthweight (n=4,858)	39.4%	60.6%
Premature births (n=7,374)	45.1%	54.9%

SIDS: SIDS risk reduction measures include qualitative research in the form of focus groups to determine culturally appropriate messages for SIDS educational materials and interviews with mothers that experienced a SIDS loss. Coroner capacity expansion for accurate diagnosis of SIDS is also an intervention.

Mississippi Department of Health Reducing Disparities in Mississippi Infant Mortality: A Multi-Focal Approach

Juanita Carol Graham MSN RN - Health Services Chief Nurse
Vernesia Wilson MPH - Special Projects Officer IV

Supported in part by project U19MC03178 from the MCHB, HRSA, DHHS

Behavioral interventions: Community Health Workers are representatives to the community to find at-risk pregnant women and link them to health care providers in their residential areas. They are mothers on a welfare-to-work program (TANF) who are instrumental in keeping our focus for the Closing the Gap Grant. Their primary target is at risk pregnant women. They continuously search for community opportunities and contacts to find pregnant women. They survey areas in need via door-to-door canvassing. Other methods include school contacts, attending workshops, health fairs, and area meetings. The Community Health Workers are saving babies lives by linking pregnant women to healthcare and spreading the word in high risk communities.



Surveillance: The Maternal Infant Mortality Surveillance System (MIMSS) will address a range of indicators of maternal and infant health, those primarily affecting pregnant and post-partum women and those that affect infant health and survival. These include indicators of maternal illness and death, infant mortality rates, birth outcomes, prevention of birth defects, access to preventive care, and fetal, perinatal, and other infant deaths. The MIMSS will provide data on maternal and infant mortality and their causes, and is intended to answer questions about the scope and extent of maternal and infant mortality. According to MIMSS preliminary data, 119 Mississippi infant deaths occurred between July 1, 2004 and June 30, 2005 in the 8 target counties. Of those, nearly 20% are pending or unknown diagnosis or SIDS/SUID.

MISSISSIPPI DEPARTMENT OF HEALTH
www.HealthyMS.com
1-866-HLTHY4U (1-866-458-4948)