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City of Milwaukee Health Department Releases Fetal Infant Mortality Review Report
*Detailed analysis of three years of Milwaukee stillbirths and infant deaths seeks to
inform and target prevention efforts*

MILWAUKEE – Improving women’s health and quality of care across the lifespan, improving comprehensive reproductive health services, and working to eliminate racism and improve the social, economic, educational and environmental determinants of health are key parts of the broad efforts needed to help reduce infant mortality rates in Milwaukee, according to a comprehensive report released today by the City of Milwaukee Health Department.

In its sixth analysis since 1993, The Fetal Infant Mortality Review (FIMR) Report summarizes what is known about the factors that contribute to Milwaukee’s high number of stillbirths and infant deaths in an effort to better inform and target collaborative approaches to prevention.

“As this comprehensive report reinforces, no one single program or effort will reduce our infant mortality rates alone,” said Mayor Tom Barrett. “In releasing this report, we hope to provide the community with the information needed to better inform and target programs and initiatives on all levels that can prevent stillbirths and infant deaths in our city.”

Among the findings in the report:

- In a three-year period from 2009 to 2011, there were 205 stillbirths and 318 infant deaths in Milwaukee.
- Complications of prematurity remains the leading cause of Milwaukee’s infant deaths, attributable to nearly 60% of all infant deaths in the city.
- African-American infants remain nearly three times more likely to die than White infants in Milwaukee, and infant deaths are especially concentrated in zip codes where levels of poverty and other social and economic challenges are also high.

“This detailed information is essential to the work to reduce Milwaukee’s infant mortality rates,” said Commissioner of Health Bevan K. Baker. “If we as an entire community are serious about improving infant mortality rates and reducing racial and ethnic disparities in infant mortality, we must simultaneously improve access to quality health care, improve healthy behaviors, and build stronger neighborhoods that create the conditions in which all city residents can be healthy themselves before giving birth and raising healthy families.”

For more information, visit www.milwaukee.gov/health.

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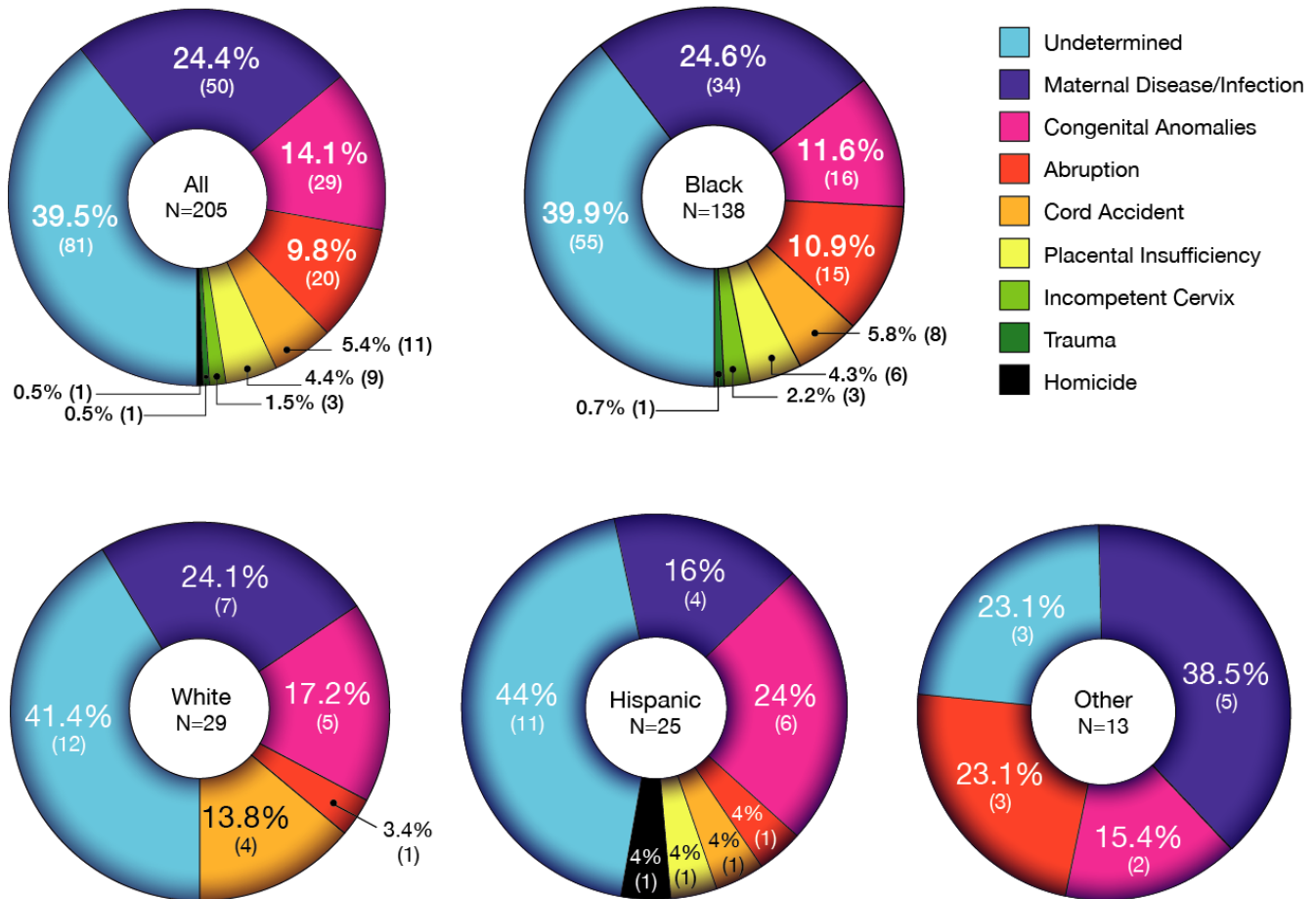
Think Health. Act Now!



2013 Milwaukee Fetal Infant Mortality Review Summary of Data

2009-2011 City of Milwaukee Stillbirth

In the three-year period from 2009 through 2011, the city of Milwaukee had 205 stillbirths. The State of Wisconsin defines stillbirths as those deaths where a baby dies before birth (has not taken a breath or does not have a heartbeat at birth) and the baby weighs 350g and/or is 20 weeks or more gestational age. The following summarizes the causes of death for those stillbirths.

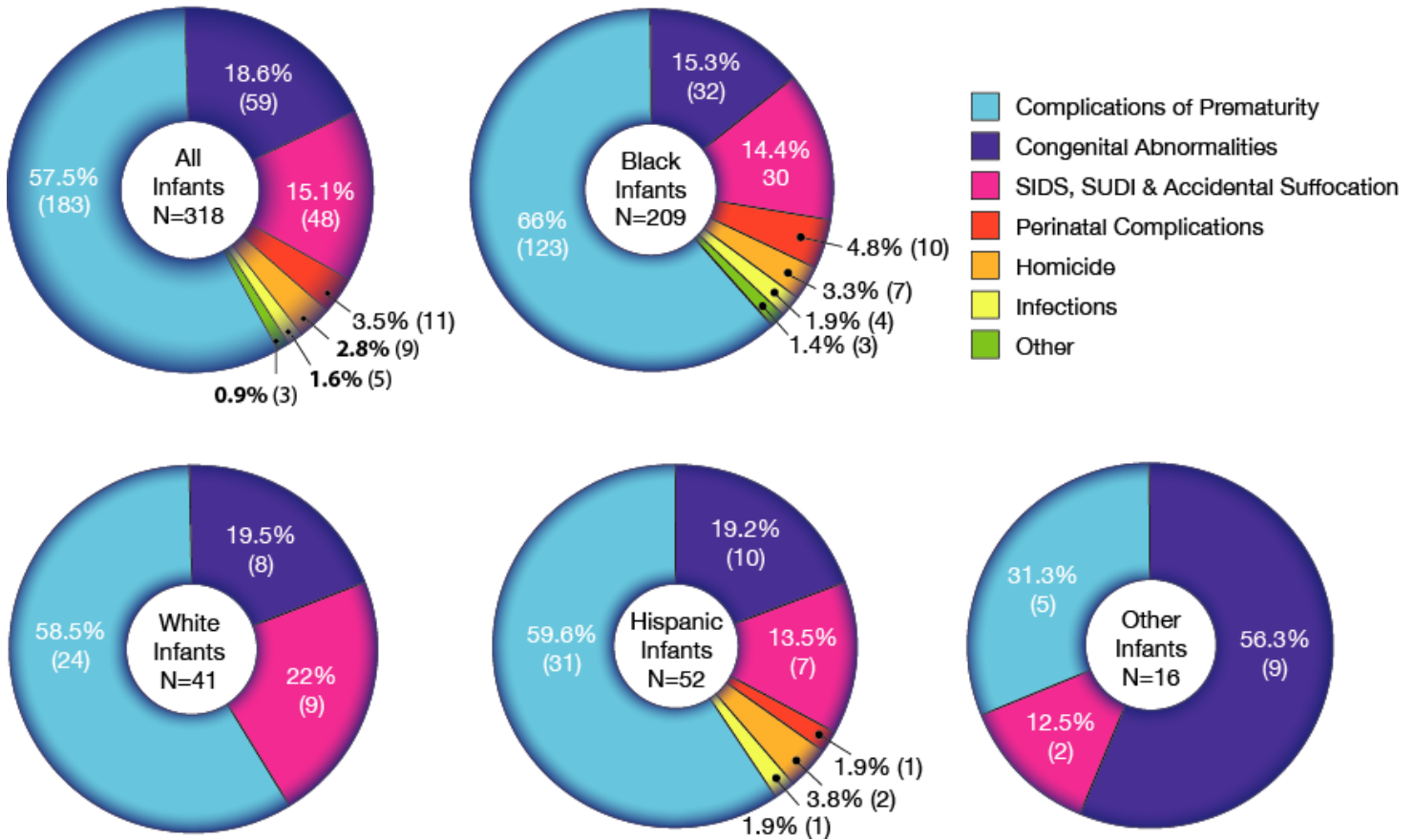


Credit: Ngui E, Michalski K, Mark E, Paine L, Stanley M, Gathirimu J, and Swain GR. 2013 Milwaukee Fetal Infant Mortality Review Report. City of Milwaukee Health Department, February 2014.

2013 Milwaukee Fetal Infant Mortality Review Summary of Data

2009-2011 City of Milwaukee Infant Deaths

During the three-year period from 2009 through 2011, the city of Milwaukee had 318 infant deaths. The State of Wisconsin defines an infant death as a death occurring before a child's first birthday, if the child was born alive, without regard to gestational age or weight. The following summarizes the causes of death for those infants.



Credit: Ngui E, Michalski K, Mark E, Paine L, Stanley M, Gathirimu J, and Swain GR. 2013 Milwaukee Fetal Infant Mortality Review Report. City of Milwaukee Health Department, February 2014.