



2024 Project Impact



Infant Mortality in Northeast Florida

Despite advances in medical care, infant mortality remains a significant concern, with too many families affected by the loss of their babies each year. Infant mortality refers to the death of a child before his/her first birthday. It is typically expressed as a rate, which is the number of infant deaths per 1,000 live births in a given year. Infant mortality is an important indicator of the overall health of a population and reflects factors such as maternal health, access to health care, nutrition and socio-economic conditions.

In our five county service area (Baker, Clay, Duval, Nassau and St. Johns counties), the infant mortality rate for 2023 shows a 18.5¹ percent increase from the previous year with an estimated 141 infant deaths according to provisional data from the Florida Department of Health. In 2022, there were 119 infant deaths. However, when evaluating the infant mortality rate in Northeast Florida during the most current five-year period (2019-2023) vs. the previous five-years (2014-2018), fewer babies are dying (an 8.6 percent decrease) — although one baby is one too many.

The regional provisional infant mortality rate of 7.5 deaths per 1,000 live births is higher than the state rate of 6.0², driven largely by the growing number of babies born prematurely. Other leading causes of infant deaths include congenital anomalies and unsafe sleep conditions. However, 2023¹ statistics do show sleep-related deaths are on the decline, with a 44 percent decrease in our area over the past year thanks to concerted efforts by our Healthy Start teams, hospitals, health care providers, nonprofits and other community partners who work diligently in ensuring new parents and caregivers use safe sleep practices.

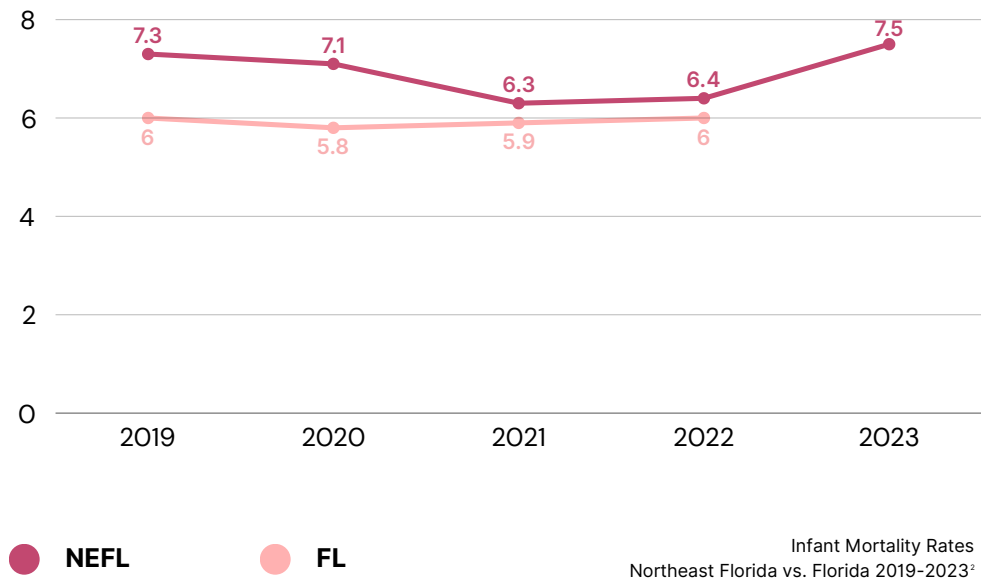


About Fetal and Infant Mortality Review

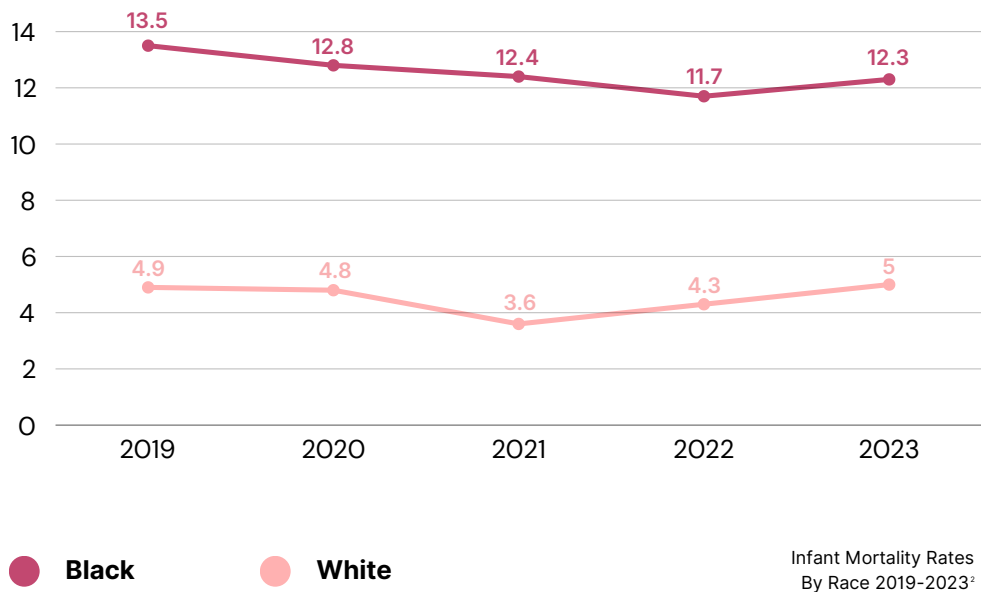
The Fetal and Infant Mortality Review (FIMR) aims to reduce infant mortality by gathering and reviewing detailed information to gain a better understanding of fetal and infant deaths in Northeast Florida. The FIMR team examines cases with the worst outcomes to identify gaps in maternal and infant services and to promote future improvements. The Northeast Florida Healthy Start Coalition (NEFHSC) began this effort in 1995 and has continued to carry it out with support from the Florida Department of Health.

Each month, fetal and infant death cases are elected for evaluation based on specific criteria, including type of death, residence and race. Utilizing an approach developed by the American College of Obstetrics and Gynecology, information is abstracted from birth, death, medical, hospital and autopsy records. Case summaries are developed and presented to the Case Review Team (CRT), a multidisciplinary group of community medical and social services professionals. The CRT examines each case to determine medical, social, financial and other issues that may have impacted the poor birth outcome. Recommendations are crafted by the CRT based on these review findings and then shared with NEFHSC's Community Action Group (CAG), a group of volunteers working with at-risk families and other partner agencies in the region to develop and implement grassroots activities.

Infant Mortality Rates



Northeast Florida Infant Mortality Rates By Race



FIMR Case Overview 2019-2023

By The Numbers

162

fetal & infant death
cases reviewed

125

infant deaths

37

fetal deaths

50%

black

44%

white

14-47


age of women

65%

unplanned
pregnancies

57%

used Medicaid



FIMR Case Overview 2019-2023

By The Numbers

49%

of mothers had at least
one chronic condition

48%

had stressors
during pregnancy

44%

birth spacing <18 mos

30%

used substances
during pregnancy

22%

late or no prenatal care

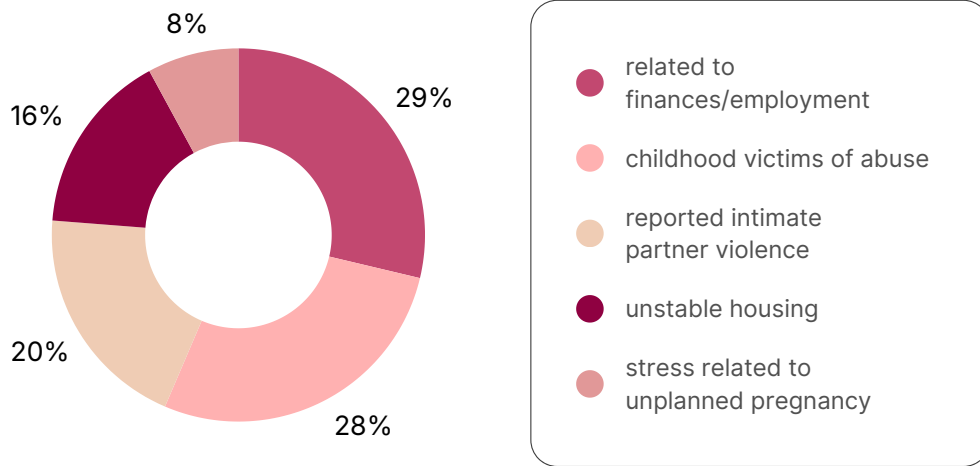
12%

of women experience
intimate partner violence

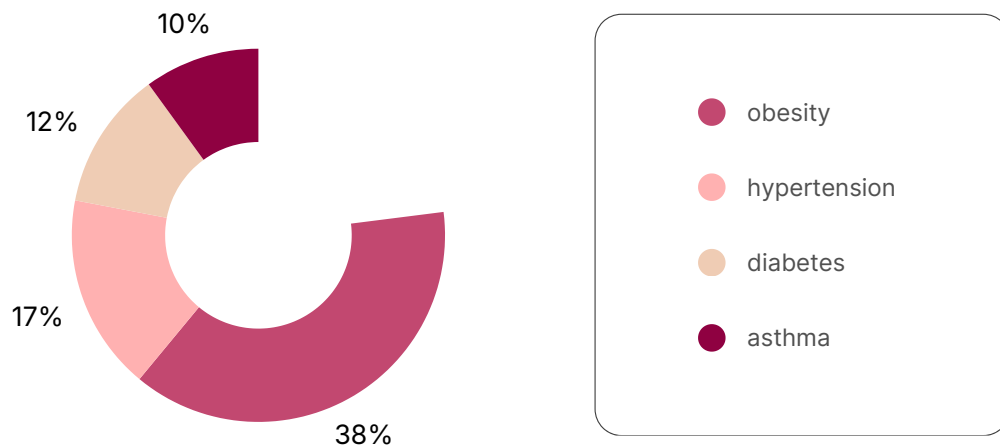
Fetal and Infant Mortality Review

Case Overview 2019-2023

Of the 48% of Women Who Reported Stressors During Pregnancy

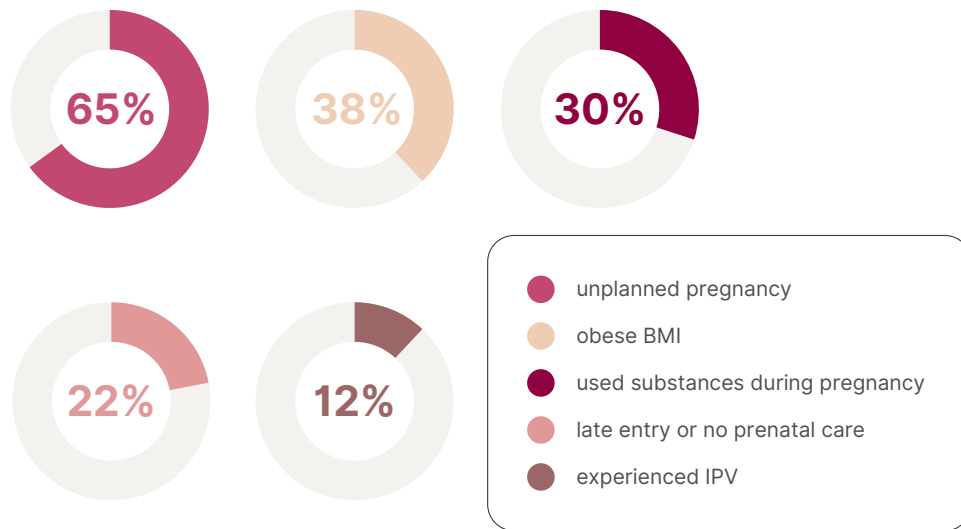


Of the 49% of Women With At Least One Chronic Condition

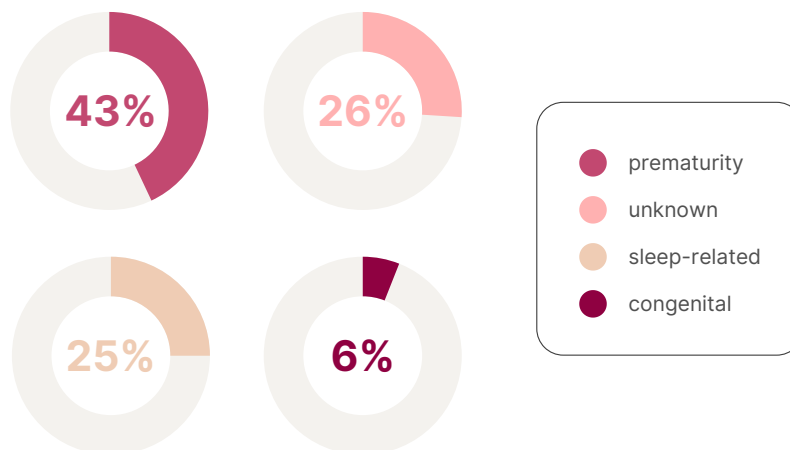


Infant Deaths

Maternal Factors in Cases Reviewed with Infant Deaths

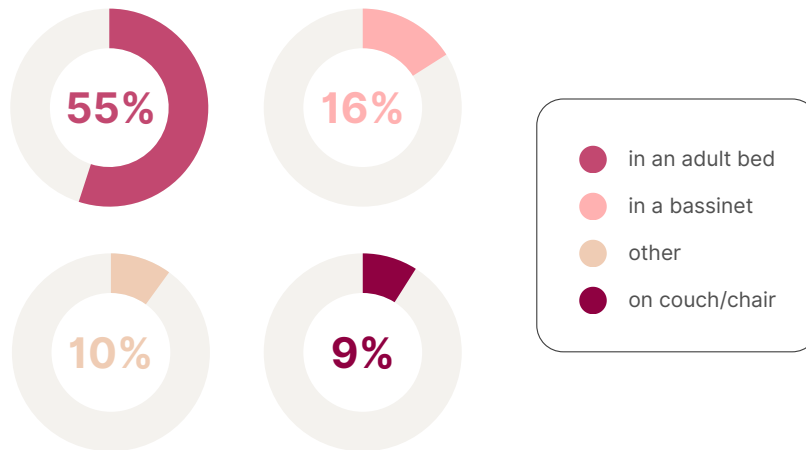


Cause of Infant Deaths

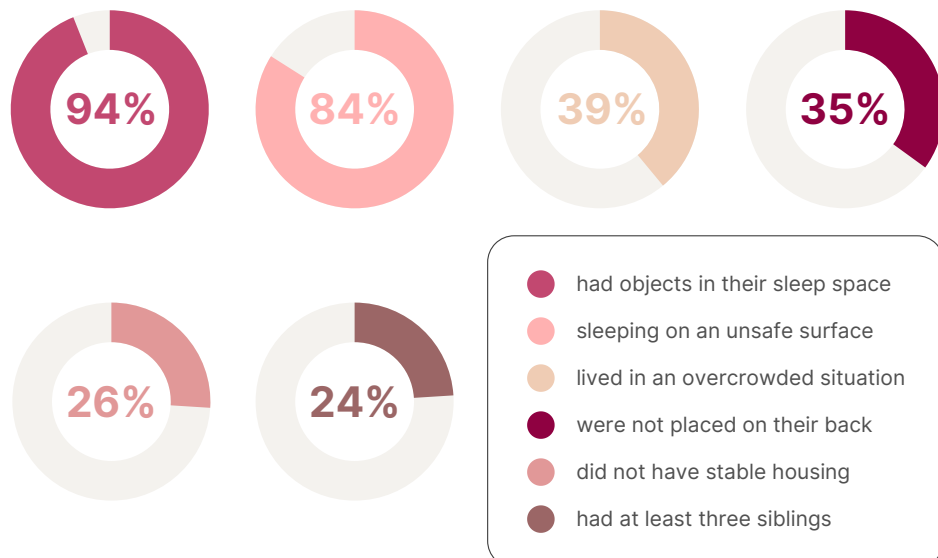


Infant Deaths

Sleep-Related Infant Deaths

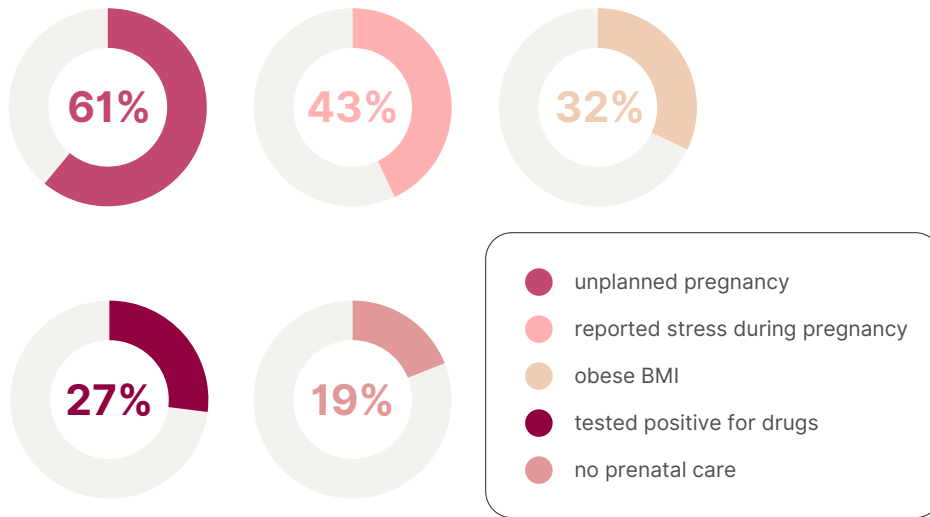


In cases reviewed that were sleep related, the following was evident:

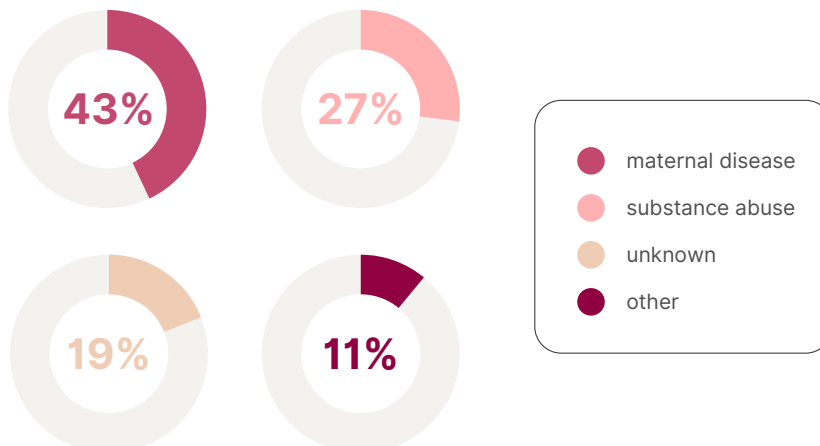


Fetal Deaths

Maternal Factors in Cases Reviewed with Fetal Deaths



Cause of Fetal Deaths



2023-2024

CRT Recommendations & CAG Activities

Recommendation #1

Improve participation in preconception and prenatal care for women (ages 15-44)

- Increase the number of women of reproductive age receiving preventive health care at least once per year
- Increase the number of women who receive early (prior to second trimester) and adequate prenatal care including postpartum follow-up visits
- Increase the number of Medicaid enrollment sites
- Seek an obstetrician who focuses on substance-using women
- Encourage substance treatment center to refer known pregnant women to Connect who can facilitate entry into prenatal cares



Activities

- Engaged policymakers through the Maternal & Child Health Policy & Research Center to advocate for expanding coverage of maternal services. NEFHSC submitted an application to become a provider of Presumptive Eligibility for Pregnant Women (PEPW); if approved, it will increase the number of temporary Medicaid eligibility sites in Duval County
- Developed a policy draft aimed to reduce preterm birth and low birth weight rates by helping to ensure women have access to comprehensive care early in their pregnancies
- Engaged decision-makers via the ZPIDLC to build consensus on critical policy goals, such as expanding OB provider participation in Medicaid programs
- Developed partnership with Gateway Community Services to increase referrals of substance-using women to NEFHSC via its Connect program

2023-2024

CRT Recommendations & CAG Activities

Recommendation #2

Improve awareness and utilization of community programs for pregnant women and their families

- Increase awareness of the value of home visitation services for parents and families as a prevention strategy to prevent poor birth outcomes, promote infant/child health and foster child development
- Ensure the home visitation referral process results in timely outreach, engagement and successful enrollment in services utilizing community health workers

Activities

- Designed and implemented the Hey, Mama social marketing campaign in Duval County ZIP Codes with the highest rates of infant mortality. The Hey, Mama campaign generated more than 9 million advertising impressions and increased referral and intake form completions by 34%
- Community health workers engaged the community, reconnected participants to home visitation services, provided needed resources and free at-home pregnancy tests, increasing linkages to services



2023-2024

CRT Recommendations & CAG Activities

Recommendation #3

Increase the awareness of the impact of social determinants of health, adverse childhood experiences and systemic racism on maternal health and birth outcomes

- Increase understanding of the contributing factors to toxic stress and the effects of such on poor birth outcomes

Activities

- Developed safe sleep training for motel/hotel personnel so they may provide information and resources to families staying in their establishments
- In alignment with the IHE action plan's focus on addressing housing insecurity and maternal health, the NEFHSC collaborated with the CAG safe sleep committee to develop a system of care policy for unhoused pregnant women living in hotels or homeless. This initiative aims to provide shelter and essential resources including safe sleep items to homeless pregnant women and their newborns



2024-2025 CRT Recommendations

Recommendation #1

Decrease sleep-related infant deaths in Northeast Florida by 10%

- Increase awareness of the causes of sleep-related deaths by dissemination of educational materials and training to hotel/motel personnel, daycare staff, homeless shelters, churches and nontraditional agencies to reach target audience
- Encourage fathers to engage in safe sleep and infant safety education programs

Recommendation #2

Improve the health of women of childbearing age (15-44 years) through the creation of medical home models that address social determinants of health, toxic stress, health and nutrition

- Address women's health through the life course (before, during and after pregnancy)
- Increase the awareness of the value of home visitation to parents, families and community members as a prevention strategy to reduce poor birth outcomes, promote infant/child health, and foster child development

Recommendation #3

Integrate at least three specific policies into local government to address social determinants of health that affect Black infant mortality

- Collaborate with the Department of Justice to implement a transition plan from their health system to Medicaid for pregnant women



Zero Preventable Infant Deaths Leadership Council

The ZPIDLC brings together community leaders to address infant mortality by monitoring and guiding the FIMR action plan and its implementation. The group also provides guidance to the Northeast Florida Maternal & Child Health Policy & Research Center.

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2023-2024 Case Review Team

The CRT is a multidisciplinary group that meets monthly to review FIMR cases and develop annual recommendations.

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2023-2024 Community Action Group

The Community Action Group (CAG) is a group of diverse volunteers who develop and implement community-based strategies and tactics aligned with the CRT's annual recommendations. The CAG is part of the FIMR division per Florida Statute 766.101 to help build improvements in service delivery systems based on CRT identification of case trends and barriers.

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¹Source: Florida CHARTS, Division of Public Health Statistics and Performance Management, Florida Department of Health; all 2023 data is provisional as of Oct. 1, 2024 and is not considered final until released by the Florida Department of Health

²Some provisional data for 2023 has not been released by the Florida Department of Health at the time of publication

A Special Thank You to Our Community Partners for their Support

