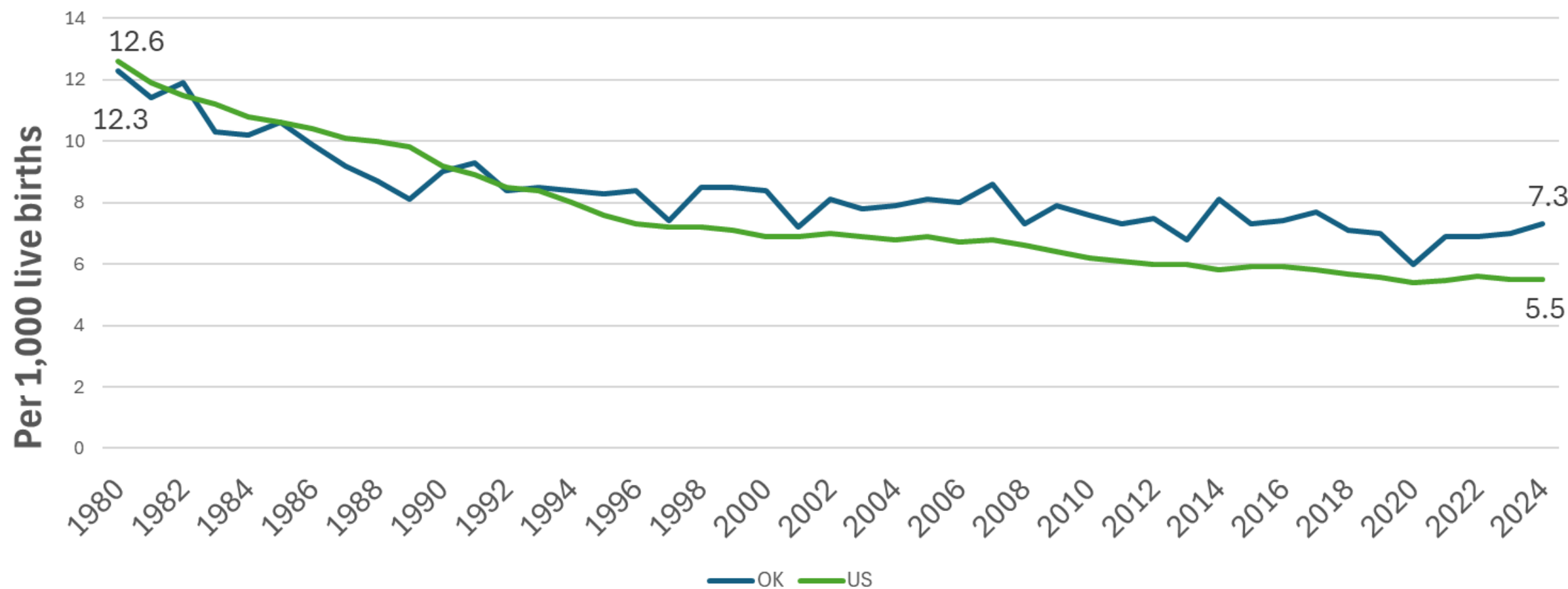


# Oklahoma Infant Mortality Update

## What is Infant Mortality?

Infant Mortality Rate is the number of infant deaths (under 1 year of age) per 1,000 live births. In Oklahoma, from 2022 to 2024, there has been a **5% increase** in total infant deaths.

Infant Mortality in the United States and Oklahoma 1980 - 2024



The Infant Mortality Rate as of 2024 in Oklahoma is 7.3, compared to the US Rate of 5.5

## Leading Causes of Infant Mortality Oklahoma 2024

- Preterm and low birth weight (23%)
- Birth defects (20%)
- SIDS (11%)
- Maternal complications (8%)
- Accidents (5%)

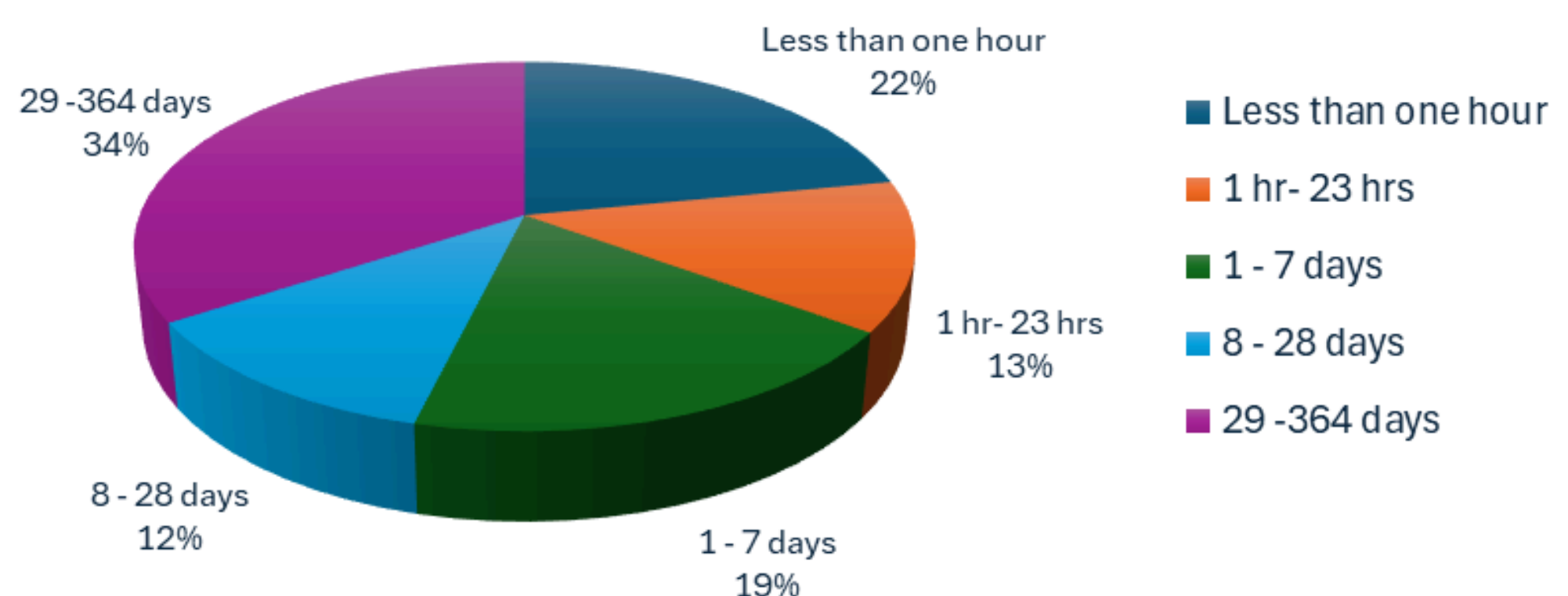
## Oklahoma Counties with the highest infant mortality rate 2022-2024

- Greer
- Tillman
- Osage
- Seminole
- Sequoyah



**Most infant deaths took place within 29-365 days of birth (34%) or less than one hour after birth (22%)**

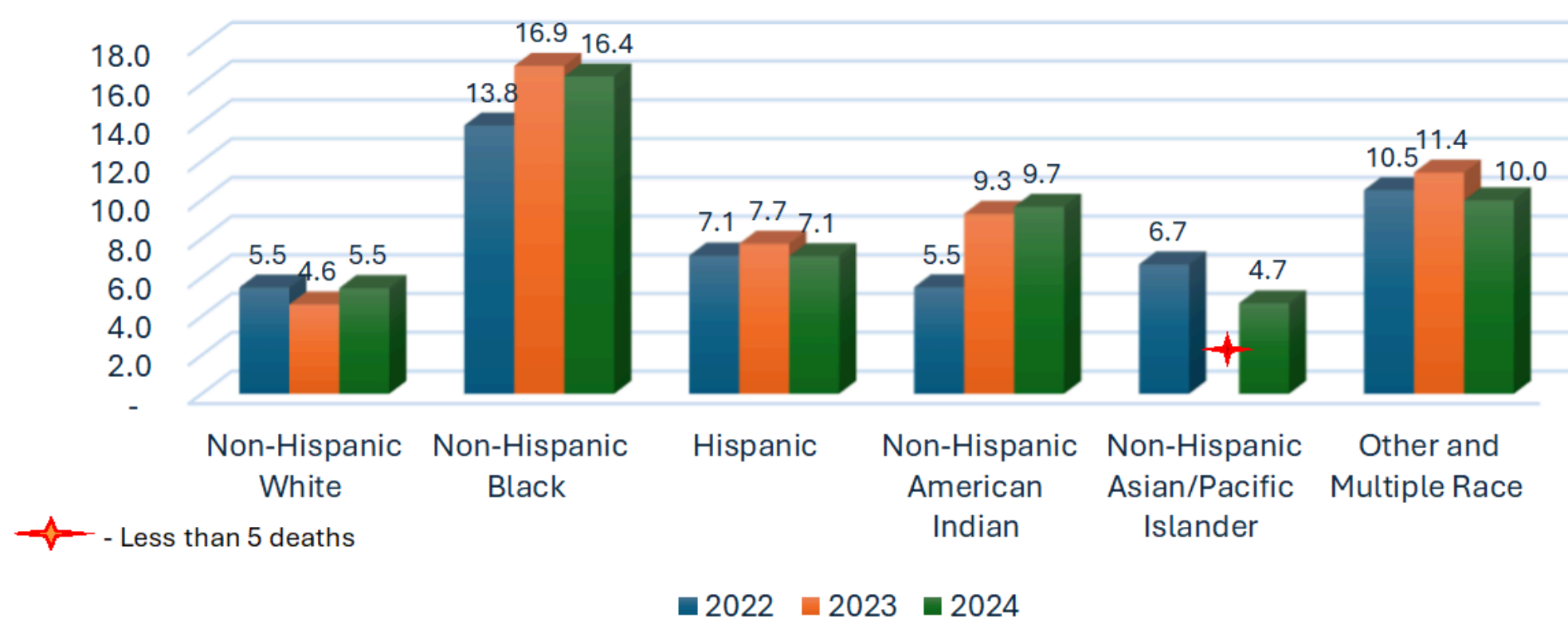
Share of Infant deaths by age at time of death - 2024



# Is Infant Mortality Different Between Races?

From 2022–2024, Non-Hispanic Black mothers experienced the highest infant mortality, at 16.4 per 1,000 live births. Non-Hispanic White mothers experienced the lowest rate of infant mortality, at 5.5 per 1,000 live births

## Infant Mortality by Race and Hispanic Origin - Oklahoma 2022 - 2024



## What is Oklahoma Doing to Improve Infant Mortality?

*Preparing for a Lifetime, It's Everyone's Responsibility* is the state-wide infant mortality initiative that aims to reduce the number of infant deaths by providing education, resources and support for issues related to maternal and infant health. The main goal of Preparing for a Lifetime (PFL) is to see improved birth outcomes by encouraging local communities to create solutions that work best for their families. Alongside PFL, the Oklahoma State Department of Health provides state and federal funds to support community-based organizations and evidence-based home visitation programs in providing access to health care services, concrete supports and resources, education, and family support services for pregnant women, women who believe they may become pregnant, and families with children up to five years of age. These programs and services help reduce infant mortality by focusing on key benchmarks that keep babies healthy and safe. These include improving maternal and newborn health through increasing healthy and full-term births, supporting breastfeeding, ensuring regular well-child visits, and screening for maternal depression; preventing childhood injuries and unnecessary emergency department visits; and connecting families to vital community resources and services.

### Community-Based Efforts:

**Choosing Childbirth (CCB):** In state fiscal year (SFY) 2025, CCB-funded organizations completed more than 736 social determinants of health screenings, which led to 288 referrals, 503 health screeners, and 86 mental health screeners.

**Family Resource Centers (FRCs):** In FY 2025 there were 20 FRCs serving 38 counties in the state connecting families to a range of prevention and support services and parent education. Over 2,207 families were served and 30% of families received concrete supports for physical well-being.

**Pregnancy Resource Navigator (PRN) program:** In 2024, the PRN program was available in 53 counties and provided services to 1,360 clients.

### Home-Based Programs:

**Children First (C1) program:** In SFY 2024, the C1 program served 1,357 families. Among those families, 403 clients gave birth and 92% initiated breastfeeding with their new infant.

**Parents as Teachers (PAT):** trained professionals provided education on health and nutrition, positive parenting skills, child development, and safety to 331 parents with children under the age of 1 in SFY 2024.

**SafeCare:** In SFY 2024, 76 families with children under the age of 1 that are at risk for and/or have a history of abuse and neglect, addiction, mental health, or domestic violence received the SafeCare program.