



Chapter 3 Maternal and Child Health

VARIABLES

Analysis	Data Source
1. Crude Birth Rate 2. Fertility Rate 3. Teen Birth Rate 4. Low Birth Weight 5. Premature Births	<ul style="list-style-type: none"> • Oklahoma State Department of Health 2016-2018 vital records. • Martin, J.A., Hamilton, B. E., Osterman, M. J. K., & Driscoll, A.K. (2019). BirthsL Final data for 2018. National Vital Statistics Reports, 68(13). National Center for Health Statistics..
6. Late or No Prenatal Care 7. Maternal Smoking during Pregnancy 8. Maternal Education less than High School Diploma	<ul style="list-style-type: none"> • Oklahoma State Department of Health 2016-2018 vital records. • United States Department of Health and Human Services (US DHHS), Centers for Disease Control and Prevention (CDC), National Center for Health Statistics (NCHS), Division of Vital Statistics, Natality public-use data 2016-2018, on CDC WONDER Online Database, September 2019. Accessed at http://wonder.cdc.gov/natality-expanded-current.html on Jan 13, 2020.
9. Infant Mortality Rate	<ul style="list-style-type: none"> • Oklahoma State Department of Health 2016-2018 vital records. • Xu, J. Q, Murphy, S. L., Kochanek, K. D., & Arias, E. (2020). Mortality in the United States. NCHS Data Brief No. 355. National Center for Health Statistics.
10. Single-mother Family Household	<ul style="list-style-type: none"> • U.S. Census ACS 2018, 1 & 5-year population estimates

CRUDE BIRTH RATE

Crude birth rate is one measure used to estimate fertility in a population. It is the number of live births to Oklahoma County residents per 1,000 persons over 2016-2018. This measure includes the total population regardless of age or gender.

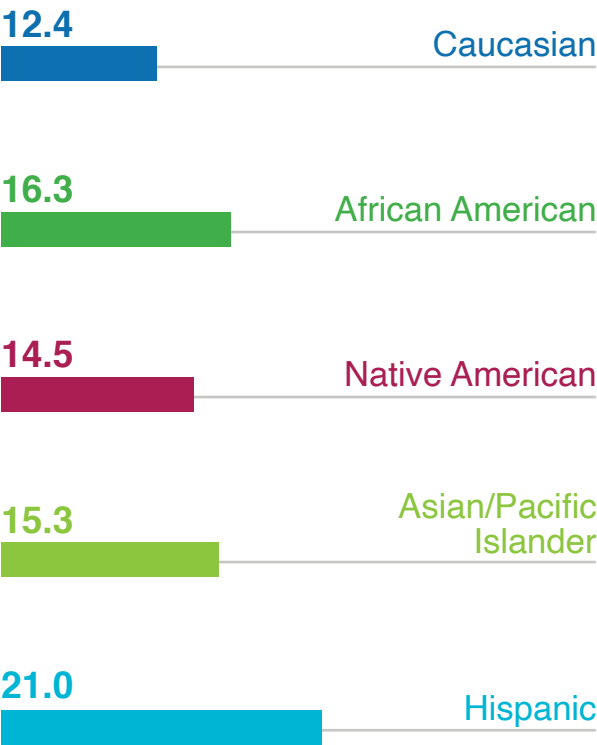
Why Is It Important?

Along with other population measures, crude birth rate can be used to measure population growth. Changes in population growth can impact public policy and economic development.

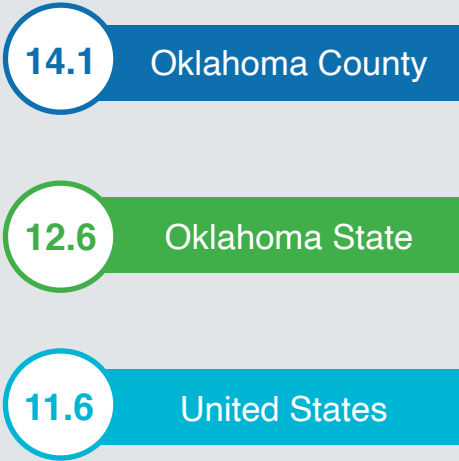
How Are We Doing?

The crude birth rate for Oklahoma County was 14.7 live births per 1,000 persons during 2016-2018—a 9.3 percent decline from 2013-2015. The county rate was higher than both the state and national rates in 2018. A total of 34,823 births were registered to Oklahoma County residents between 2016 and 2018. Fifty-one percent of total births were males and 49 percent were females. Hispanics recorded the highest birth rates, and Caucasians experienced the lowest birth rates compared to all other racial groups.

Crude Birth Rate by Maternal Race/Ethnicity
Oklahoma County, 2016-2018



Crude Birth Rate Comparison, 2018

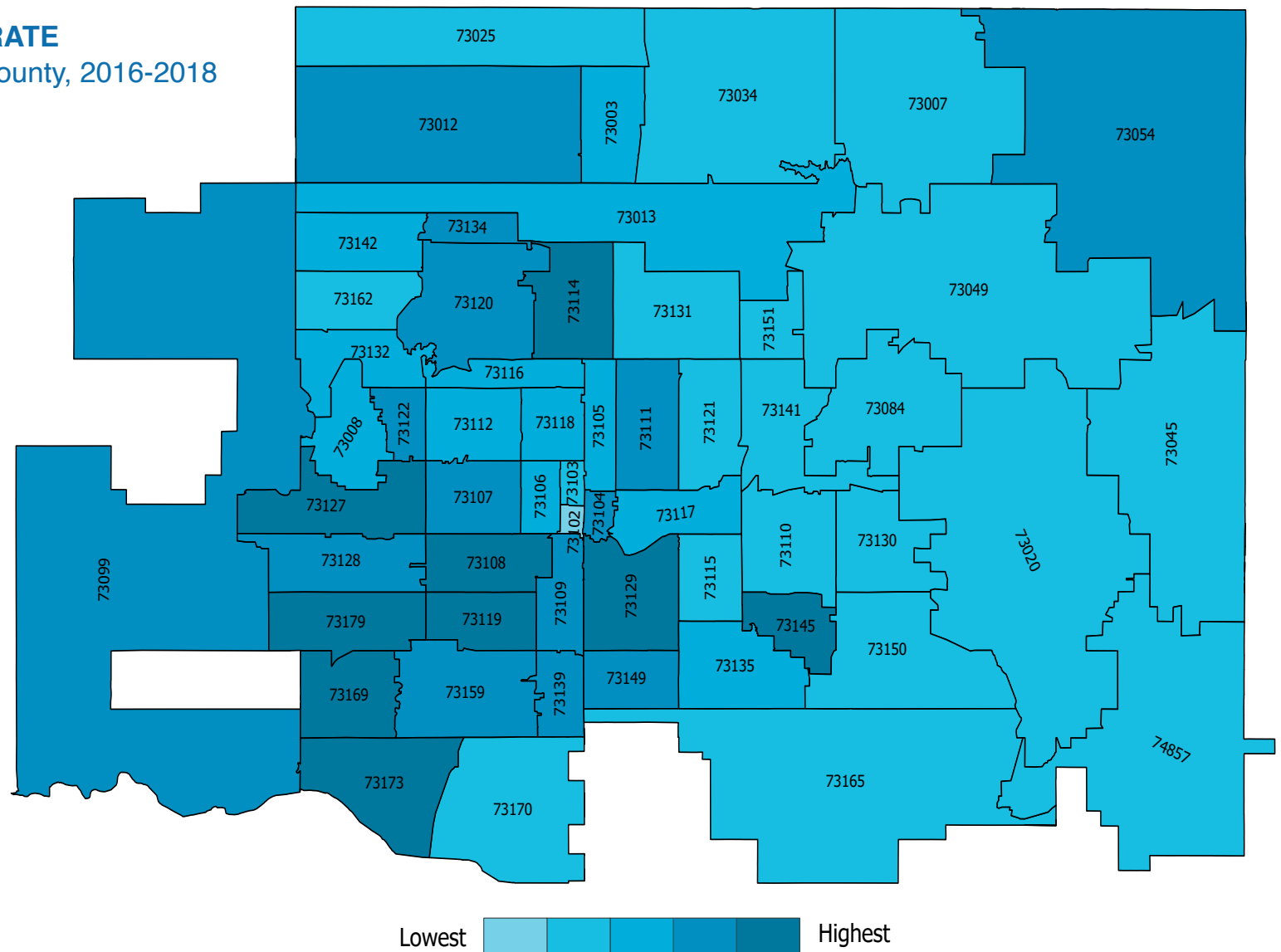


Data Source:

- Martin JA, Hamilton BE, Osterman MJK, Driscoll AK. Births: Final data for 2018. National Vital Statistics Reports; vol 68, no 13. Hyattsville, MD: National Center for Health Statistics. 2019.
- Oklahoma State Department of Health (OSDH), Center for Health Statistics, Health Care Information, Vital Statistics 2016 to 2018, on Oklahoma Statistics on Health Available for Everyone (OK2SHARE). Accessed at <http://www.health.ok.gov/ok2share>.

CRUDE BIRTH RATE

Oklahoma City-County, 2016-2018



73003	11.8	73054	15.3	73109	16.5	73119	18.5	73132	14.1	73151	10.4
73007	9.9	73084	10.7	73110	10	73120	15.1	73134	15.6	73159	14.8
73008	14.4	73099	16	73111	15.7	73121	8.2	73135	13.8	73162	9.3
73012	15.6	73102	2.8	73112	14.1	73122	15.1	73139	16.7	73165	10.1
73013	12.9	73103	10.1	73114	18.1	73127	18.7	73141	9	73169	18.7
73020	7.7	73104	17.4	73115	11.3	73128	15.8	73142	14.1	73170	10.8
73025	11.2	73105	12.7	73116	12.3	73129	19.3	73145	20.9	73173	22.4
73034	10.5	73106	12.6	73117	14.3	73130	8.6	73149	16.2	73179	18.4
73045	8.8	73107	17.1	73118	13.7	73131	9.1	73150	6.9	74857	9.9
73049	9.4	73108	20.6								

Rate per 1,000 population. Data Source: Oklahoma State Department of Health 2016-2018 vital records

GENERAL FERTILITY RATE

The general fertility rate is presented as the number of live births per 1,000 women aged 15-44 years from 2016-2018. This measure is often considered a more accurate measure of fertility than crude birth rate because it takes age and gender into account.

Why Is It Important?

Since general fertility rate incorporates the differences in age and gender distributions it can be used to compare fertility across different geographic boundaries and racial/ethnic populations.

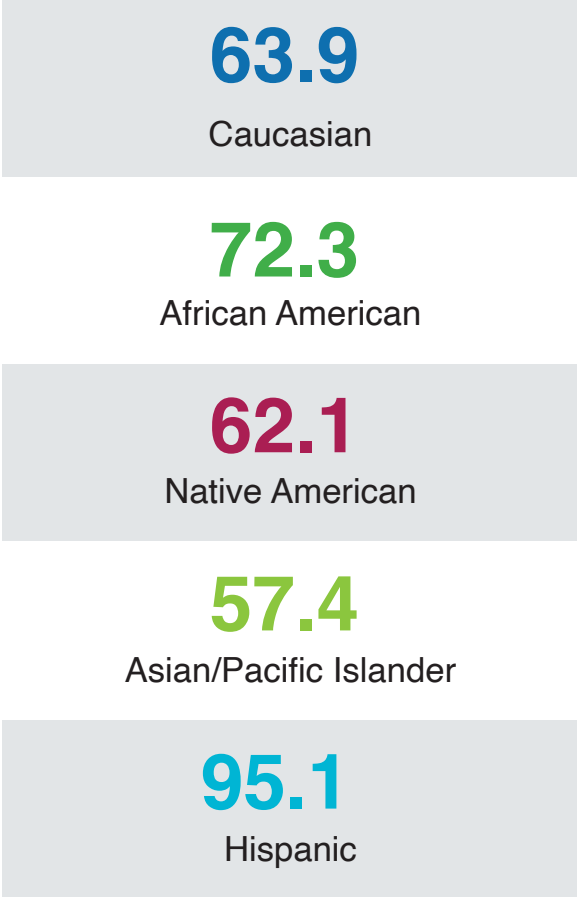
How Are We Doing?

The Oklahoma County fertility rate was 70.8 births per 1,000 women aged 15-44 during 2016-2018—an 8.6% decrease from 2013-2015. The Oklahoma County rate was higher than both the state and the United States 2018 average. During 2016-2018, Oklahoma County Hispanics recorded a fertility rate of 95.1 births per 1,000 women aged 15-44. This was 32 percent and 49 percent higher than the rates for Black/African American and Caucasian women, respectively. Asian/Pacific Islander women in Oklahoma County reported the lowest fertility rates.

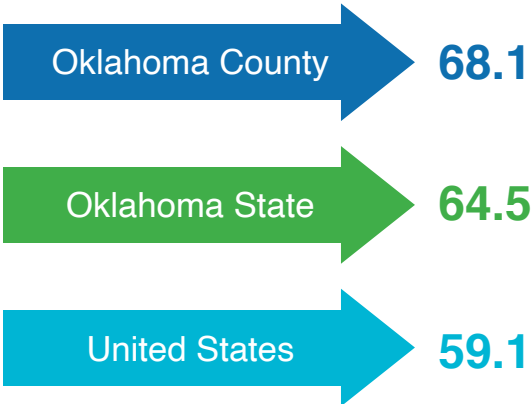
Data Source:

- Martin JA, Hamilton BE, Osterman MJK, Driscoll AK. Births: Final data for 2018. National Vital Statistics Reports; vol 68, no 13. Hyattsville, MD: National Center for Health Statistics. 2019.
- Oklahoma State Department of Health (OSDH), Center for Health Statistics, Health Care Information, Vital Statistics 2016 to 2018, on Oklahoma Statistics on Health Available for Everyone (OK2SHARE). Accessed at <http://www.health.ok.gov/ok2share>.

Fertility Rate by Race/Ethnicity Oklahoma County, 2016-2018

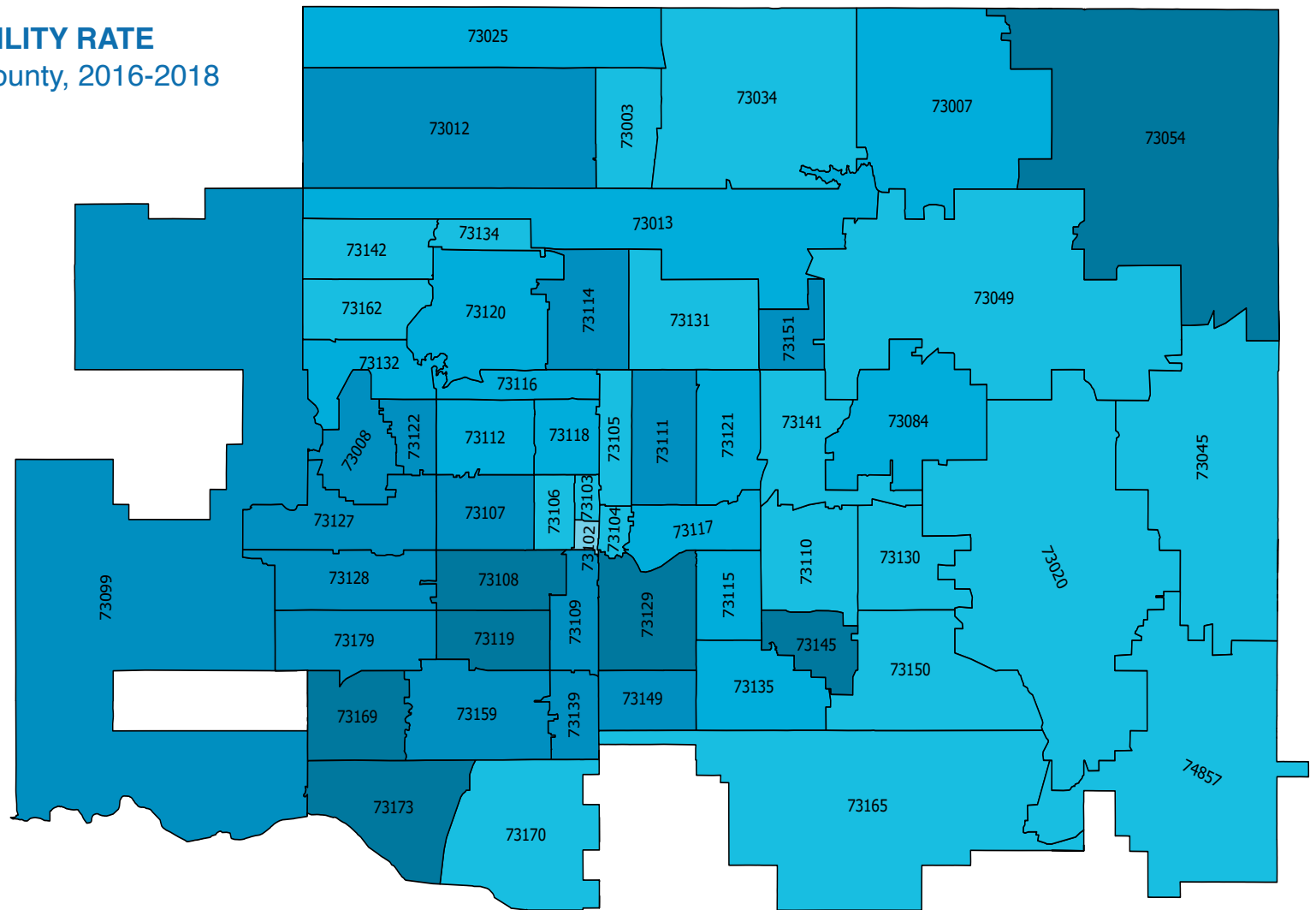


Fertility Rate Comparison, 2018



GENERAL FERTILITY RATE

Oklahoma City-County, 2016-2018



Lowest  Highest

73003	53.4	73054	94.6	73109	81.4	73119	88.7	73132	64.6	73151	76
73007	60.4	73084	68.3	73110	47.3	73120	63.6	73134	54	73159	73.3
73008	75.8	73099	76	73111	81.7	73121	65.3	73135	66.3	73162	50.4
73012	74.8	73102	15.7	73112	65.3	73122	73.6	73139	87.3	73165	57.3
73013	61.4	73104	57.1	73114	76.2	73127	81.5	73141	51.1	73169	92.3
73020	43.2	73105	51.2	73115	58.3	73128	80.4	73142	55.7	73170	54.8
73025	66.2	73106	46.8	73116	63.7	73129	99.4	73145	92.4	73173	114.4
73034	51.1	73107	78.9	73117	62.4	73130	47.5	73149	79.3	73179	81.1
73045	55.7	73108	99.2	73118	58.5	73131	55.1	73150	45.9	74857	55.1
73049	57										

Rate per 1,000 population. Data Source: Oklahoma State Department of Health 2016-2018 vital records

BIRTHS TO TEENS

Teen birth rate represents the number of live births to females ages 15-19 per 1,000 female population in this age group during 2016-2018.

Why Is It Important?

Teenage birth rate is a key indicator of population change and helps describe patterns of early family formation (CDC, 2017). Compared to older females, teenagers are less likely to seek timely prenatal care and have a greater risk for giving birth prematurely or having a baby with low birth weight. As a result, children of teenage mothers have a higher risk of adverse health outcomes. Teen pregnancy also contributes to school dropout which can result in long-term negative social and economic impacts (Perper et al., 2010). Community-level Programs, policies and services focusing on comprehensive education about the medical and social risks associated with teen pregnancy are critical to reducing teen births to females 19 and younger.

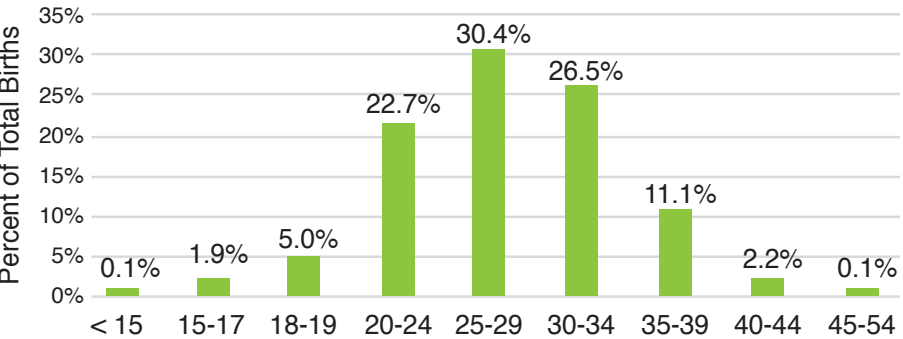
Teen Birth Rate by Race/Ethnicity

Oklahoma County, 2016-2018

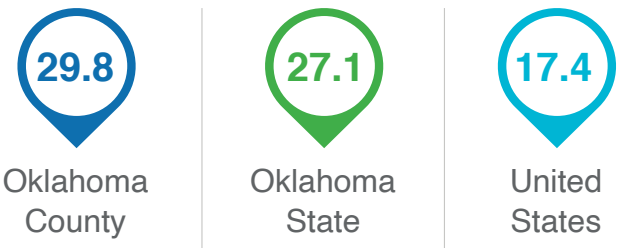


Birth Stratification by Maternal Age

Oklahoma County, 2016-2018



Teen Birth Rate Comparison, 2018



How Are We Doing: Teen Birth Rate (15-19 year-olds)

The average teen birth rate in Oklahoma County declined 25 percent from 44.2 in 2013-2015 to 33.0 in 2016-2018. However, the Oklahoma County teen birth rate was 71 percent higher than the national average, and 10 percent higher than the state rate in 2018. Between 2016 and 2018, 2,401 Oklahoma County teenage moms, ages 15-19 years, gave birth. Hispanics experienced the highest teen birth rate in Oklahoma County, and Asian/Pacific Islanders recorded the lowest teen birth rate compared to other racial or ethnic groups.

How Are We Doing: Births to Mothers Under Age 20

Mothers 19 years and younger represented 7 out of every 100 births in Oklahoma County between 2016 and 2018. Hispanics had the highest percent of births to mothers 19 and younger with 11 percent of live births.

Data source

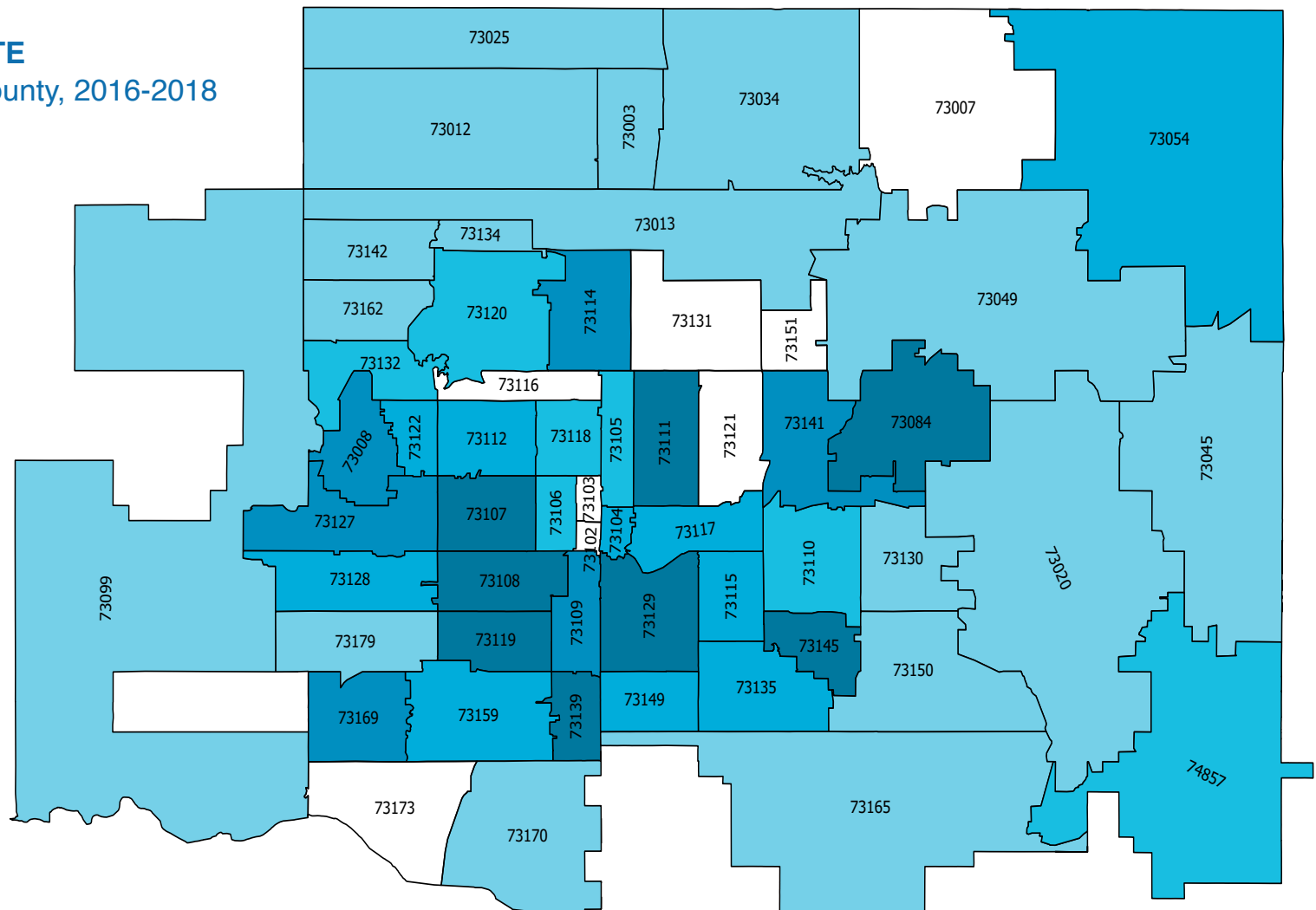
- Martin JA, Hamilton BE, Osterman MJK, Driscoll AK. Births: Final data for 2018. National Vital Statistics Reports; vol 68, no 13. Hyattsville, MD: National Center for Health Statistics. 2019.
- Oklahoma State Department of Health (OSDH), Center for Health Statistics, Health Care Information, Vital Statistics 2016 to 2018, on Oklahoma Statistics on Health Available for Everyone (OK2SHARE). <http://www.health.ok.gov/ok2share>.

Reference

- Centers for Disease Control and Prevention. (2017). National vital statistics system; NCHS fact sheet. https://www.cdc.gov/nchs/data/factsheets/nvss_fact_sheet.pdf.
- Perper, K., Peterson, K. & Manlove, J. (2010). Diploma attainment among teen mothers. Child Trends, Fact Sheet Publication #2010-01: Washington, DC: Child Trends.

TEEN BIRTH RATE

Oklahoma City-County, 2016-2018



**Data too low to count/compare

Lowest  Highest  N/A

73003	8.3	73054	41.5	73109	46.4	73119	64.7	73132	29.3	73151	**
73007	**	73084	71	73110	22	73120	26.7	73134	13.1	73159	35.3
73008	46.7	73099	17.5	73111	69	73121	**	73135	32.8	73162	10.1
73012	5	73102	**	73112	34.2	73122	39	73139	65.1	73165	9.3
73013	8.5	73103	**	73114	56.1	73127	51.7	73141	54.5	73169	45.5
73020	10.6	73104	35	73115	39.4	73128	35.7	73142	14.6	73170	11.6
73025	3.4	73105	31.5	73116	**	73129	62.9	73145	63.3	73173	**
73034	8.1	73106	23	73117	38.2	73130	15.4	73149	38.7	73179	14
73045	14	73107	78.4	73118	28	73131	**	73150	16.2	74857	28.9
73049	18.5	73108	86.8								

Rate per 1,000 female population ages 15-19 years. Data Source: Oklahoma State Department of Health 2016-2018 vital records

LOW BIRTH WEIGHT

Low birth weight is defined as babies who are born weighing less than 2,500 grams or five pounds, eight ounces, regardless of gestational age. The indicator is expressed as the percent of all live births to Oklahoma County mothers over 2016-2018 who are born below 2,500 grams.

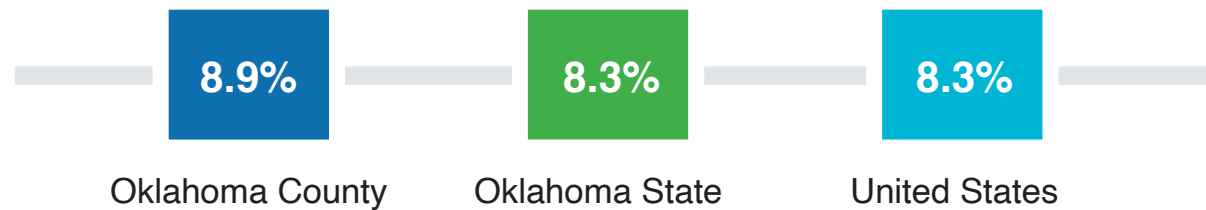
Why Is It Important?

Infants of low birth weight are at a greater risk of developing many health problems. These issues could include infections in the first few days of life or long-term developmental issues. Low birthweight could be a result of several environmental, social, and economic factors (CDC, 2016). Early and regular prenatal care helps identify conditions and behaviors that can result in low-birth weight infants (CDC, 2016).

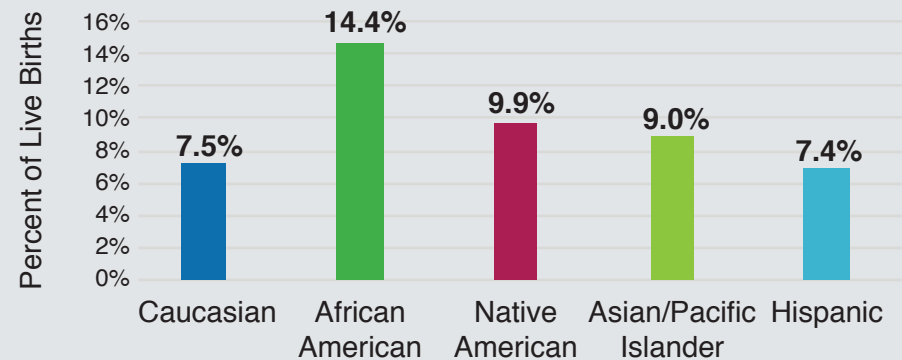
How Are We Doing?

Nearly nine (8.9%) in every 100 births in the county were low birth weight during 2016-2018. This represents a five percent increase from 2013-2015. The county rate was 0.6 percent higher than the state and the national average in 2018. More than 14 percent of births to Black/African American women between 2016 and 2018 were low birth weight, almost twice the rate of Caucasians. The rate of low birth weight among Hispanic infants was 7.4 percent. Native American and Asian/Pacific Islander rates were 9.9 and 9 percent, respectively.

Low Birth Weight Comparison, 2018



Low Birth Weight Infants by Race/Ethnicity Oklahoma County, 2016-2018



Data source

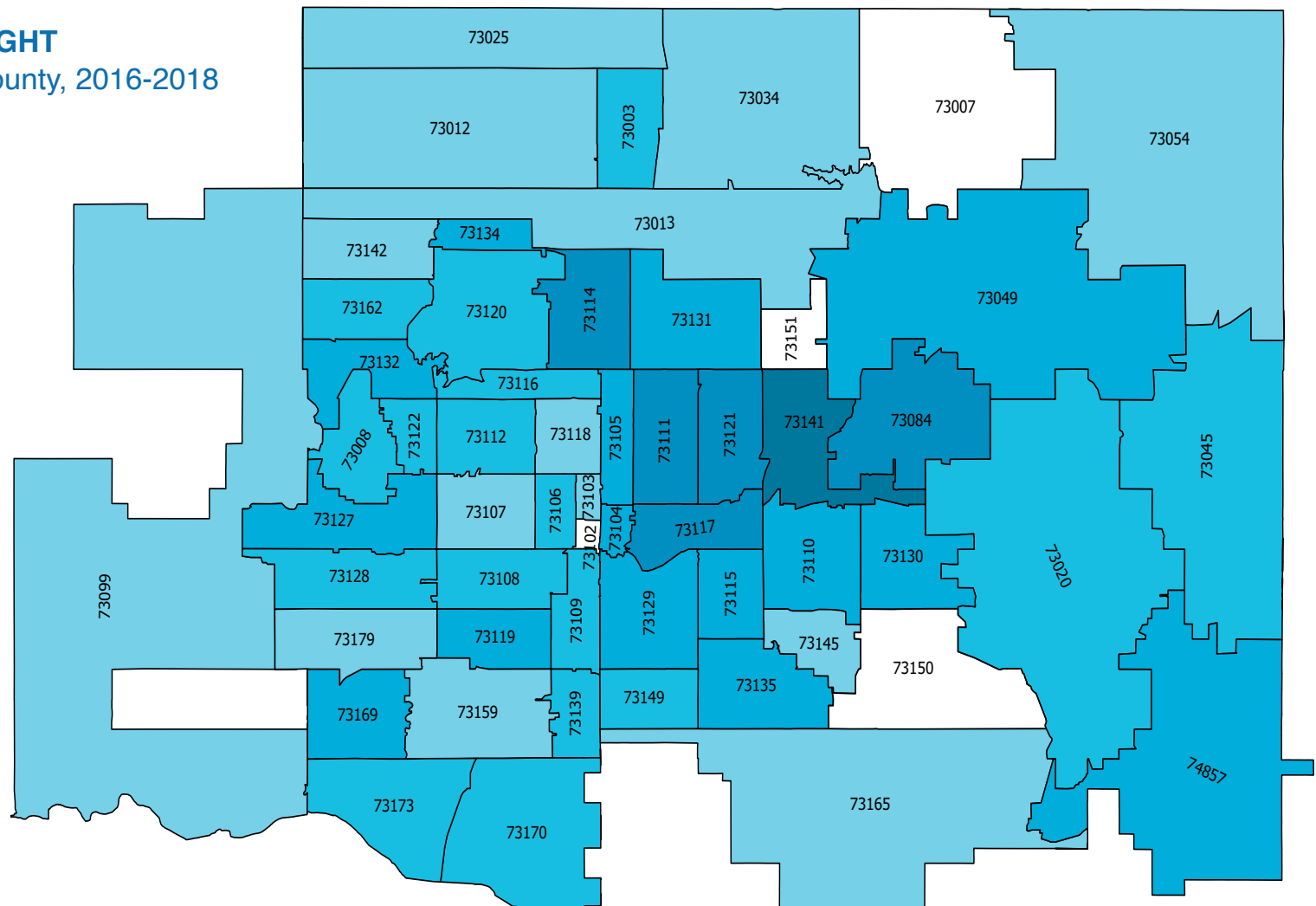
- Martin JA, Hamilton BE, Osterman MJK, Driscoll AK. Births: Final data for 2018. National Vital Statistics Reports; vol 68, no 13. Hyattsville, MD: National Center for Health Statistics. 2019.
- Oklahoma State Department of Health (OSDH), Center for Health Statistics, Health Care Information, Vital Statistics 2016 to 2018, on Oklahoma Statistics on Health Available for Everyone (OK2SHARE). Accessed at <http://www.health.ok.gov/ok2share>.

Reference

- Centers for Disease Control and Prevention. (2016). Reproductive and Birth Outcomes. Retrieved from <https://ephtracking.cdc.gov/showRbLBWGrowthRetardationEnv>

LOW BIRTH WEIGHT

Oklahoma City-County, 2016-2018



**Data too low to count/compare

Lowest  Highest  N/A

73003	8.1%	73054	5.9%	73109	9.2%	73119	9.7%	73132	9.7%	73151	**
73007	**	73084	14.2%	73110	11.8%	73120	8.8%	73134	11.2%	73159	7.1%
73008	8.3%	73099	6.7%	73111	13.3%	73121	14.3%	73135	10.8%	73162	8.0%
73012	7.3%	73102	**	73112	8.1%	73122	8.1%	73139	9.4%	73165	6.5%
73013	6.7%	73103	6.8%	73114	12.3%	73127	10.9%	73141	22.9%	73169	10.5%
73020	9.4%	73104	11.8%	73115	11.5%	73128	9.6%	73142	5.7%	73170	9.3%
73025	6.5%	73105	10.4%	73116	8.7%	73129	10.7%	73145	5.1%	73173	8.3%
73034	6.8%	73106	8.6%	73117	15.3%	73130	10.4%	73149	8.5%	73179	7.0%
73045	9.2%	73107	6.9%	73118	6.6%	73131	11.2%	73150	**	74857	9.7%
73049	9.7%	73108	8.3%								

Data Source: Oklahoma State Department of Health 2016-2018 vital records

PREMATURE BIRTHS

Preterm birth is defined as births that occur before the 37th gestational week of pregnancy. These data are presented as a percent of total births to Oklahoma County mothers, over the years 2016-2018.

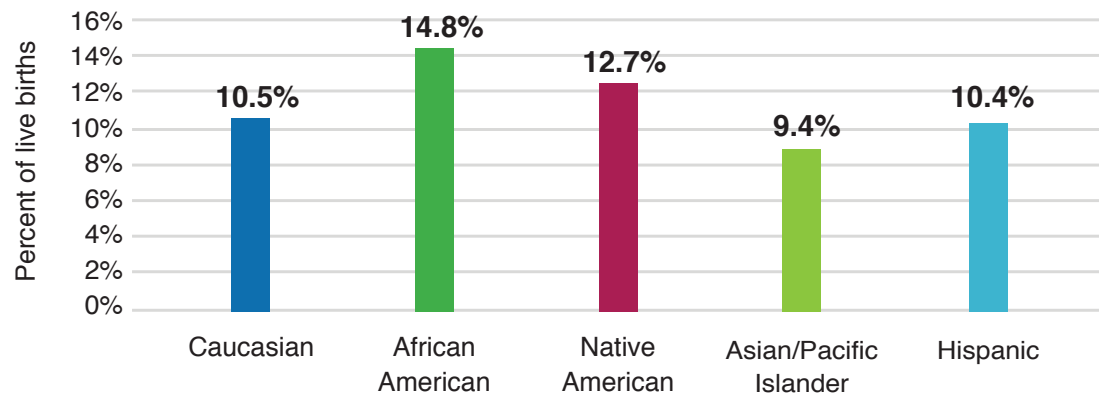
Why Is It Important?

In the final weeks of pregnancy, a baby goes through important developmental processes for the brain, lungs, and liver (CDC, 2019). Preterm babies experience an increased risk of cerebral palsy, developmental delay, vision problems or hearing impairment (CDC, 2019). Factors that can increase the risk of premature birth include smoking cigarettes or using illicit drugs while pregnant, poor nutrition, having a previous premature birth, multiple gestations and inadequate birth spacing (CDC, 2019).

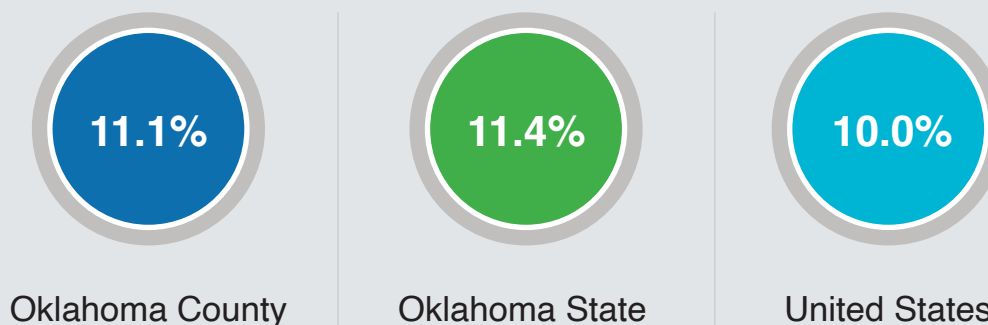
How Are We Doing?

More than eleven percent (11.3%) of babies born to Oklahoma County women during 2016-2018 were premature. Oklahoma County saw an 11 percent increase in the premature birth rate between 2013-2015 and 2016-2018. The rate of preterm birth among Black/African American women, 14.8 percent, was 4.3 percent higher than the rate of preterm birth among Caucasian women, 10.5 percent. The rate among Asian/Pacific Islanders births was lower than all other groups.

Premature Births by Race/Ethnicity
Oklahoma County, 2016-2018



Premature Birth Comparison, 2018



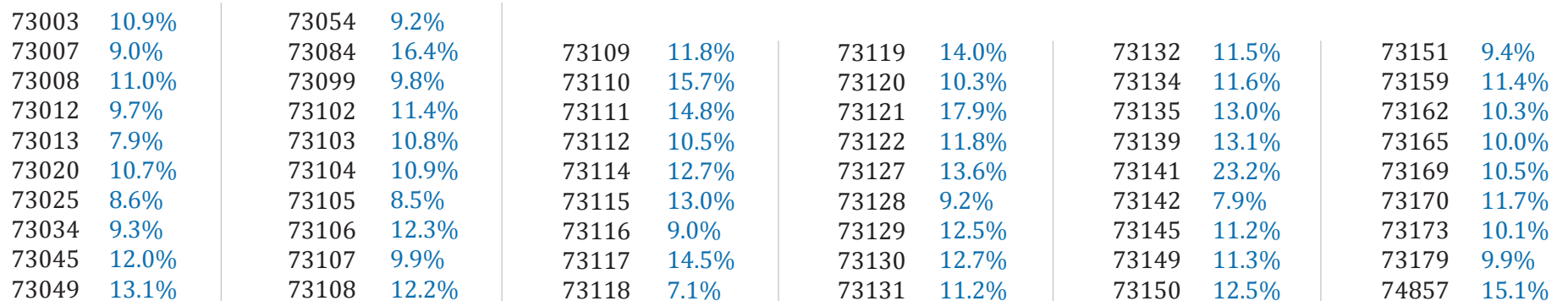
Data source

- Martin JA, Hamilton BE, Osterman MJK, Driscoll AK. Births: Final data for 2018. National Vital Statistics Reports; vol 68, no 13. Hyattsville, MD: National Center for Health Statistics. 2019.
- Oklahoma State Department of Health (OSDH), Center for Health Statistics, Health Care Information, Vital Statistics 2016 to 2018, on Oklahoma Statistics on Health Available for Everyone (OK2SHARE). Accessed at <http://www.health.ok.gov/ok2share>.

Reference

- Centers for Disease Control and Prevention. (2019). Preterm Birth. Retrieved from <https://www.cdc.gov/reproductivehealth/maternalinfanthealth/pretermbirth.htm>

Oklahoma City-County, 2016-2018

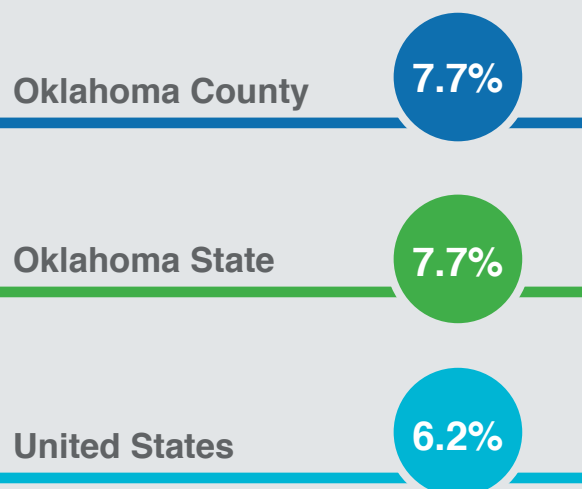


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LATE OR NO PRENATAL CARE

Late or no prenatal care describes the proportion of births from 2016-2018 to mothers who received prenatal care only in the third trimester of their pregnancy or mothers who received no prenatal care.

Comparison, 2018



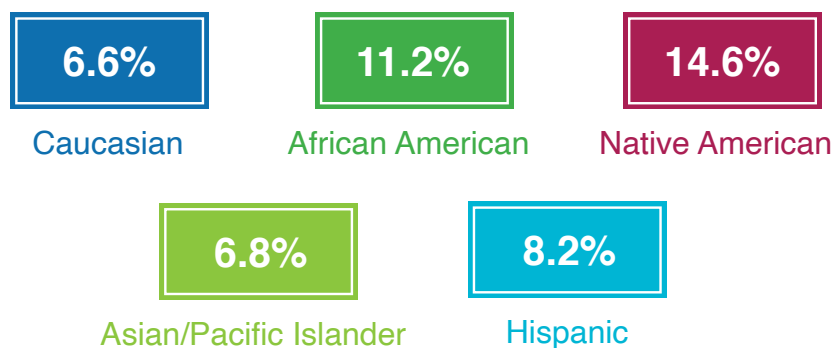
Why Is It Important?

Quality prenatal care is a strong predictor of healthy birth outcomes. Early and adequate prenatal care can prevent complications and helps women learn important information required to protect their infant (NIH, 2017). Mothers who receive late or no prenatal care during pregnancy are more likely to give birth to babies with health problems that include low birth weight and increased risk of infant death (HHS, 2009).

How Are We Doing?

Women who received late or no prenatal care accounted for 8.1 percent of total Oklahoma County births between 2016 and 2018, which is down 9 percent from 2013-2015 rate. The county rate was the same as the state's rate but was still higher than the national average in 2018. Those most likely to receive late or have no prenatal care were 14.6 percent of Native American women, followed by 11.2 percent of Black/African American women, 8.2 percent of Hispanic women, 7 percent of Asian/Pacific Islander women, and 6.6 percent of Caucasian women.

Late/No Prenatal Care by Race/Ethnicity Oklahoma County, 2016-2018



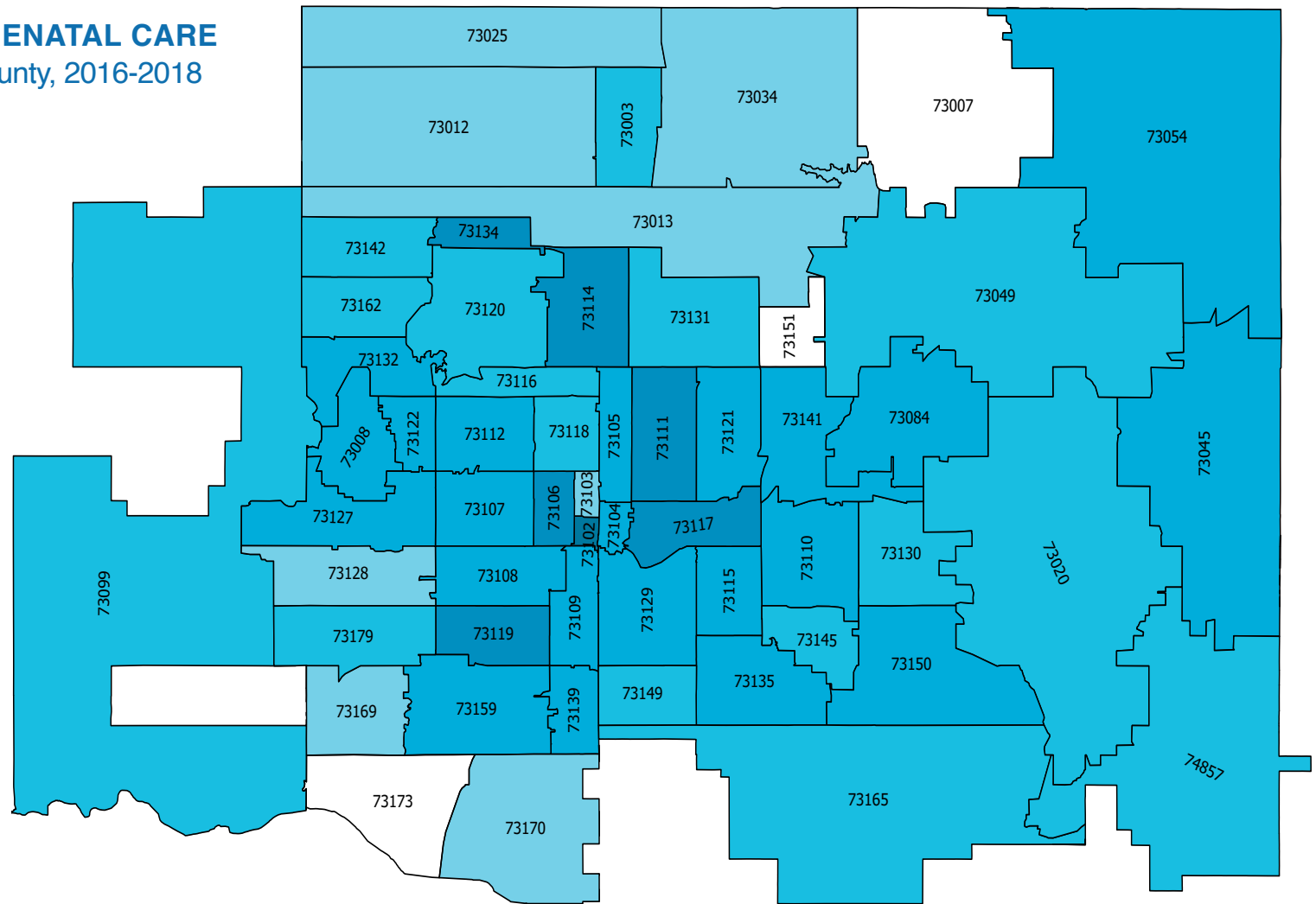
Data Source

- United States Department of Health and Human Services (US DHHS), Centers for Disease Control and Prevention (CDC), National Center for Health Statistics (NCHS), Division of Vital Statistics, Natality public-use data 2016-2018, on CDC WONDER Online Database, September 2019. <http://wonder.cdc.gov/natality-expanded-current.html>
- Oklahoma State Department of Health (OSDH), Center for Health Statistics, Health Care Information, Vital Statistics 2016 to 2018, on Oklahoma Statistics on Health Available for Everyone (OK2SHARE). Accessed at <http://www.health.ok.gov/ok2share>.

Reference

- Eunice Kennedy Shriver National Institute of Child Health and Human Development. (2017). What is prenatal care and why is it important? <https://www.nichd.nih.gov/health/topics/pregnancy/conditioninfo/prenatal-care>
- Womenshealth.gov. (2009). Publications: Prenatal care fact sheet. <http://www.womenshealth.gov/publications/our-publications/fact-sheet/prenatal-care.html>

LATE OR NO PRENATAL CARE Oklahoma City-County, 2016-2018



**Data too low to count/compare

Lowest  Highest  N/A

73003	4.5%	73054	7.1%	73109	6.2%	73119	8.5%	73132	7.2%	73151	**
73007	**	73084	6.4%	73110	6.2%	73120	4.1%	73134	9.2%	73159	5.9%
73008	6.6%	73099	4.1%	73111	8.8%	73121	7.3%	73135	6.6%	73162	5.4%
73012	2.3%	73102	14.3%	73112	6.0%	73122	7.6%	73139	7.2%	73165	4.5%
73013	3.3%	73103	3.4%	73114	8.6%	73127	7.9%	73141	7.2%	73169	3.9%
73020	4.5%	73104	7.6%	73115	6.9%	73128	3.2%	73142	4.3%	73170	3.7%
73025	2.9%	73105	6.3%	73116	4.1%	73129	6.5%	73145	4.6%	73173	**
73034	3.7%	73106	10.1%	73117	10.4%	73130	5.6%	73149	4.9%	73179	4.1%
73045	6.7%	73107	6.2%	73118	4.1%	73131	5.3%	73150	7.4%	74857	4.7%
73049	4.6%	73108	6.4%								

Data Source: Oklahoma State Department of Health 2016-2018 vital records

MATERNAL SMOKING DURING PREGNANCY

Maternal smoking is defined as a pregnant woman who smokes cigarettes during pregnancy. It is expressed as the percent of total births to Oklahoma County women who smoked while pregnant during 2016-2018.

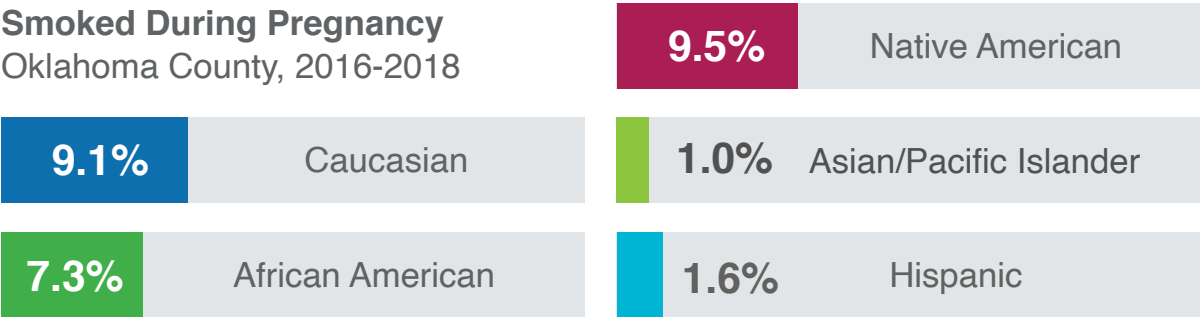
Why Is It Important?

Babies born to mothers who smoke have a greater risk of low birth rate, sudden infant death syndrome (SIDS) and premature birth (CDC, 2018). Mothers who are exposed to secondhand smoke also are at risk of delivering babies with medical concerns (CDC, 2018). Prenatal visits are an excellent opportunity to provide one-on-one counseling and technical assistance to mothers who smoke during pregnancy. Additionally, programs, policies and services that target smoking cessation opportunities toward maternal-tobacco use should be identified in the high-risk areas by the community and local public health system.

How Are We Doing?

Approximately seven percent of births in Oklahoma County during 2016-2018 were to mothers who smoked while pregnant, a reduction of 21 percent from 2013-2015. In 2018, the Oklahoma County maternal smoking rate was 4.6 percent lower than the state rate and 0.5 percent lower than the national average. In Oklahoma County, 9.5 percent of Native American women smoked while pregnant during 2016-2018. In contrast, 1 percent of Asian/Pacific Islander and 1.6 percent of Hispanic women smoked while pregnant. Smoking rates for Caucasian and Black/African American women were 9.1 percent and 7.3 percent, respectively.

Births to Mothers Who Smoked During Pregnancy Oklahoma County, 2016-2018



Maternal Smoking During Pregnancy Comparison, 2018

Oklahoma County 6.0%

Oklahoma State 10.6%

United States 6.5%

Data Source

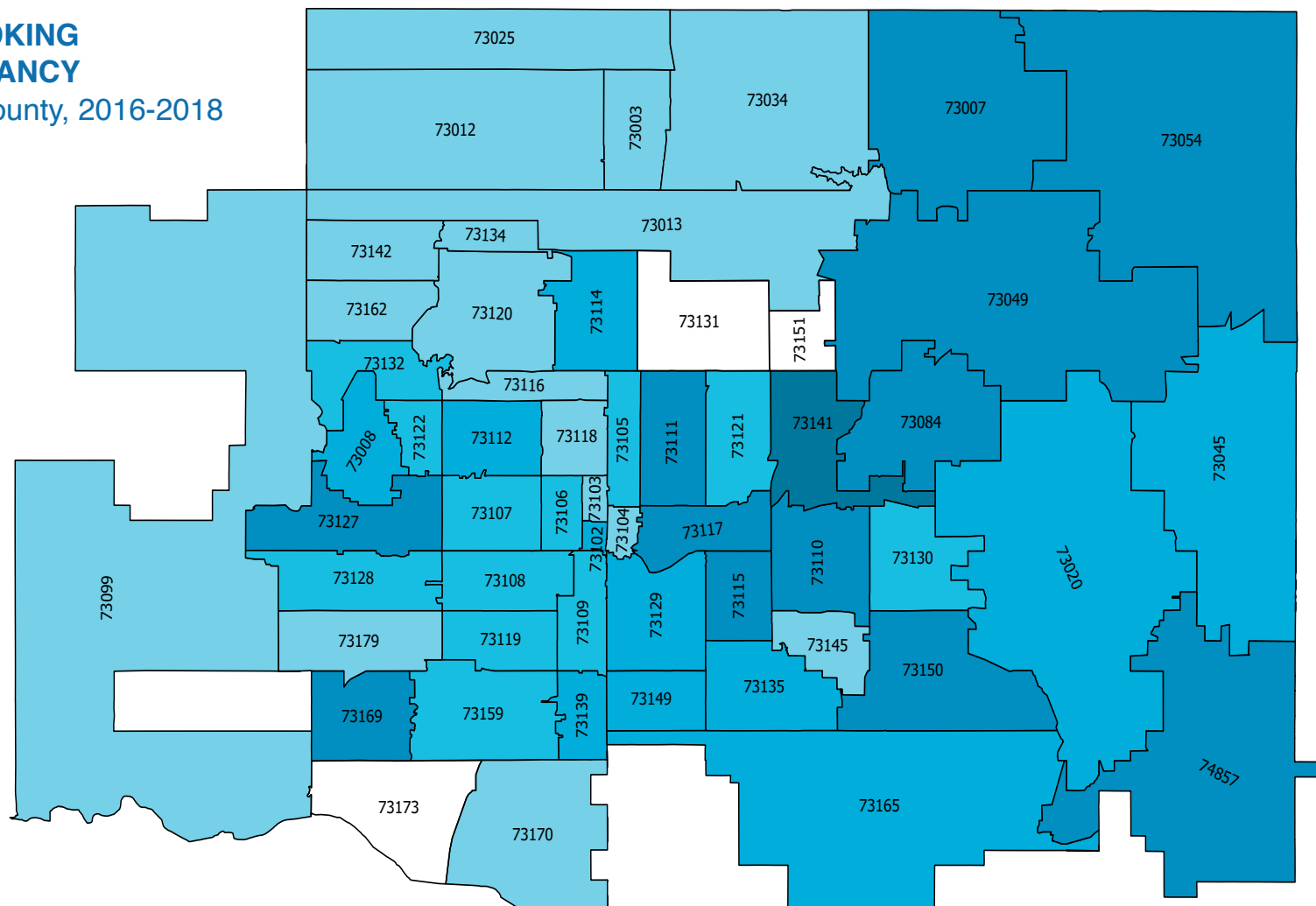
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Reference

- Centers for Disease Control and Prevention. (2018). Smoking during pregnancy. https://www.cdc.gov/tobacco/basic_information/health_effects/pregnancy/

MATERNAL SMOKING DURING PREGNANCY

Oklahoma City-County, 2016-2018



**Data too low to count/compare

Lowest  Highest  N/A

73003	6.5%	73054	13.1%	73109	7.4%	73119	8.1%	73132	8.6%	73151	**
73007	13.4%	73084	14.3%	73110	13.3%	73120	6.6%	73134	2.6%	73159	8.7%
73008	10.8%	73099	6.4%	73111	14.3%	73121	8.3%	73135	11.0%	73162	5.5%
73012	1.8%	73102	11.9%	73112	9.8%	73122	8.2%	73139	9.9%	73165	9.5%
73013	3.0%	73103	6.8%	73114	10.2%	73127	12.2%	73141	21.7%	73169	12.9%
73020	9.8%	73104	5.9%	73115	14.5%	73128	7.6%	73142	4.3%	73170	5.6%
73025	3.1%	73105	8.2%	73116	4.6%	73129	9.7%	73145	5.1%	73173	**
73034	5.9%	73106	8.1%	73117	14.6%	73130	8.8%	73149	10.2%	73179	5.5%
73045	10.6%	73107	7.9%	73118	6.7%	73131	**	73150	15.8%	74857	14.1%
73049	12.5%	73108	9.0%								

Data Source: Oklahoma State Department of Health 2016-2018 vital records

MATERNAL EDUCATION

Maternal education refers to the percentage of Oklahoma County births to women with an education level less than a high school diploma, over the years 2016-2018.

Why Is It Important?

Education plays a central role in achieving positive birth outcomes. The measure of maternal education can be an indicator of economic insecurity, family structure, and a child's cognitive development (Jackson et al., 2017). Improving maternal education levels tends to improve economic productivity, reduces poverty, lowers infant and maternal mortality, and helps improve nutritional status and health (Veneman, 2007).

How Are We Doing?

The rate of Oklahoma County women who gave birth and had less than a high school diploma was 17.8 percent during 2016-2018. The Oklahoma County rate is higher than the state and national averages in 2018. Thirty-eight percent of Hispanic birth mothers did not have a high school diploma in Oklahoma County during 2016-2018. Native American mothers recorded the second highest rate at 18.4 percent, compared with 14.1 percent of Black/African American and 12.8 percent of Asian/Pacific Islander mothers. Nearly one in ten Caucasian mothers did not have a high school diploma.

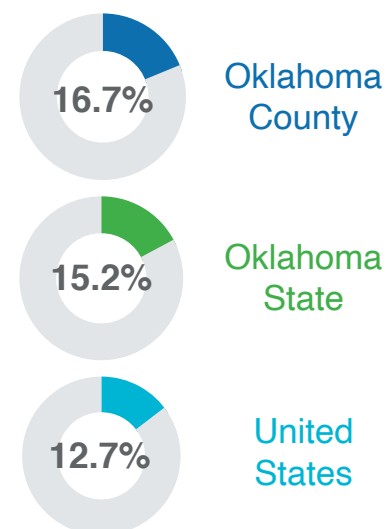
Data Source

- United States Department of Health and Human Services (US DHHS), Centers for Disease Control and Prevention (CDC), National Center for Health Statistics (NCHS), Division of Vital Statistics, Natality public-use data 2016-2018, on CDC WONDER Online Database, September 2019. <http://wonder.cdc.gov/natality-expanded-current.html>
- Oklahoma State Department of Health (OSDH), Center for Health Statistics, Health Care Information, Vital Statistics 2016 to 2018, on Oklahoma Statistics on Health Available for Everyone (OK2SHARE). <http://www.health.ok.gov/ok2share>.

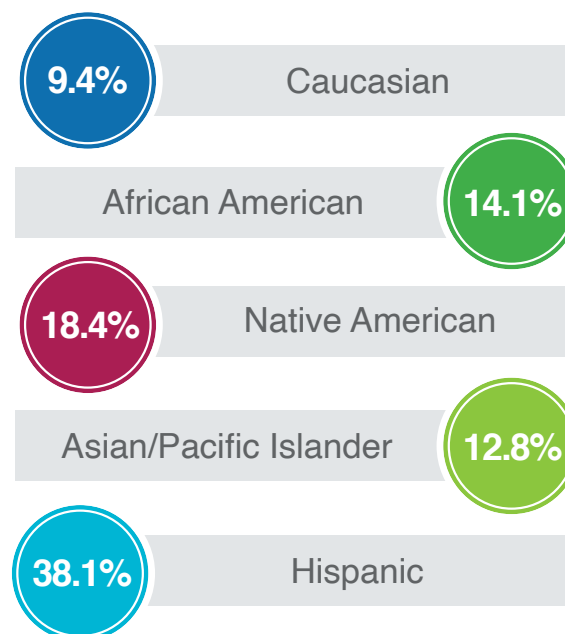
Reference

- Jackson, M., Kiernan, K., & McLanahan, S. (2017). Maternal education, changing family circumstances, and children's skill development in the United States and UK. *Annals of American Academy of Political Social Science*, 674(1), 59-84. doi:10.1177/0002716217729471
- Veneman, M. A. (2007). Education is key to reducing child mortality: The link between maternal health and education. *UN Chronicle*. <https://unchronicle.un.org/article/education-key-reducing-child-mortality-link-between-maternal-health-and-education>

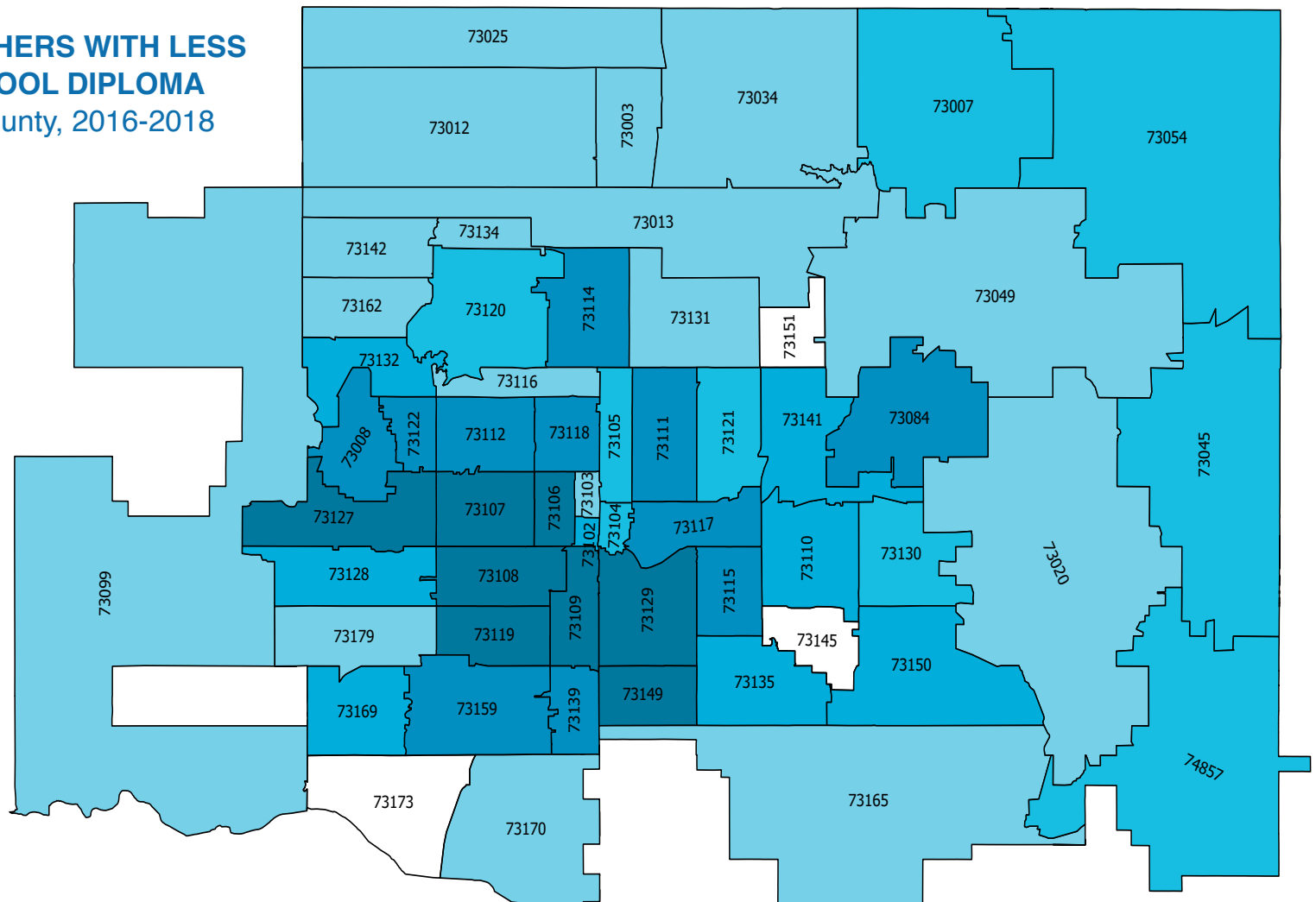
Maternal Education Less Than High School Diploma Comparison, 2018



Maternal Education Less Than High School Diploma Oklahoma County, 2016-2018



BIRTHS TO MOTHERS WITH LESS THAN HIGH SCHOOL DIPLOMA Oklahoma City-County, 2016-2018



*No data available

**Data too low to count/compare

Lowest  Highest  N/A

73003	4.0%	73054	8.6%	73109	37.7%	73119	39.1%	73132	12.7%	73151	*
73007	7.5%	73084	18.3%	73110	12.5%	73120	7.0%	73134	6.0%	73159	21.0%
73008	23.8%	73099	4.4%	73111	24.5%	73121	10.7%	73135	14.7%	73162	4.7%
73012	1.3%	73102	11.4%	73112	17.8%	73122	24.5%	73139	24.1%	73165	5.5%
73013	2.5%	73103	4.1%	73114	21.3%	73127	34.5%	73141	17.1%	73169	12.1%
73020	5.7%	73104	7.6%	73115	18.2%	73128	15.5%	73142	4.5%	73170	4.1%
73025	2.4%	73105	9.0%	73116	4.3%	73129	41.3%	73145	**	73173	*
73034	4.1%	73106	29.2%	73117	22.0%	73130	8.7%	73149	30.7%	73179	4.8%
73045	8.8%	73107	31.0%	73118	18.4%	73131	5.1%	73150	11.5%	74857	7.4%
73049	2.9%	73108	42.7%								

Data Source: Oklahoma State Department of Health 2016-2018 vital records

INFANT MORTALITY

Infant mortality means the death of an infant before their first birthday. Infant mortality rate (IMR) is presented as the number of infant deaths per 1,000 live births, averaged over 2016-2018.

Why Is It Important?

Infant mortality is used as a marker of the overall health of a society (CDC, 2019). Infant mortality rate is not only seen as a measure of infant death risk, but also as a crude indicator of community health status, socioeconomic status, and availability of quality health services and medical technology (SIMC, 2013). This measure is also commonly compared across regions and populations to assess public health programs.

How Are We Doing?

Oklahoma County infant mortality rate during 2016-2018 was 7.3 per 1,000 live births, representing a four percent increase from 7.0 in 2013-2015. By comparison, in 2018, the county rate was lower than the state rate but still ranked higher than the national average. During 2016-2018, the infant mortality rate for Black/African American women was 13.2 infant deaths per 1,000 live births—3 times the rate for Caucasian women of 4.6 per 1,000 live births.

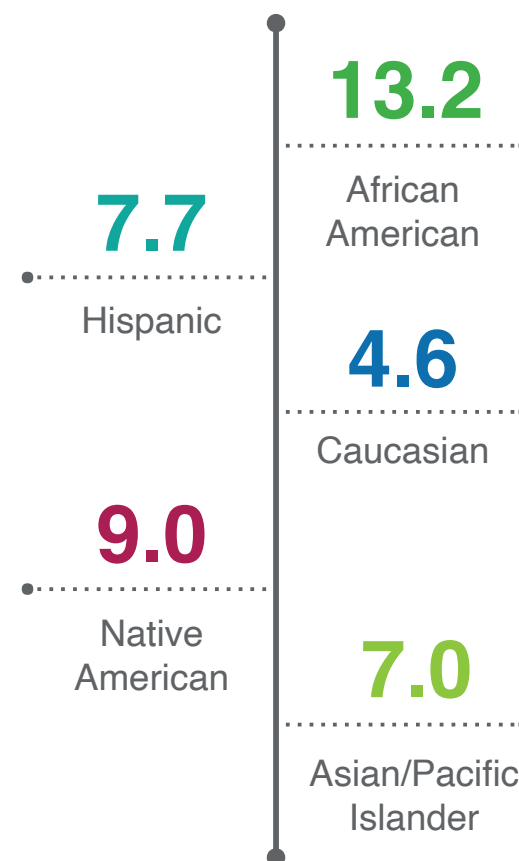
Data Source

- Oklahoma State Department of Health (OSDH), Center for Health Statistics, Health Care Information, Vital Statistics 2016 to 2018, on Oklahoma Statistics on Health Available for Everyone (OK2SHARE). <http://www.health.ok.gov/ok2share>.
- Xu, J. Q., Murphy, S. L., Kochanek, K. D., & Arias E. (2020). Mortality in the United States, 2018. NCHS Data Brief no 355. Hyattsville, MD: National Center for Health Statistics.

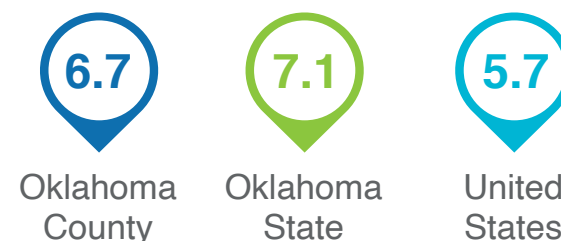
Reference

- Centers for Disease Control and Prevention. (2019). Infant mortality. <https://www.cdc.gov/reproductivehealth/maternalinfanthealth/infantmortality.htm>
- Association of Maternal and Child Health Programs (2013). Infant mortality collaborative: Infant mortality toolkit. State Infant Mortality (SIM) Toolkit: A Standardized Approach for Examining Infant Mortality. <http://www.amchp.org/programsandtopics/data-assessment/InfantMortalityToolkit/Pages/default.aspx>

Infant Mortality Rate by Race/Ethnicity Oklahoma County, 2016-2018

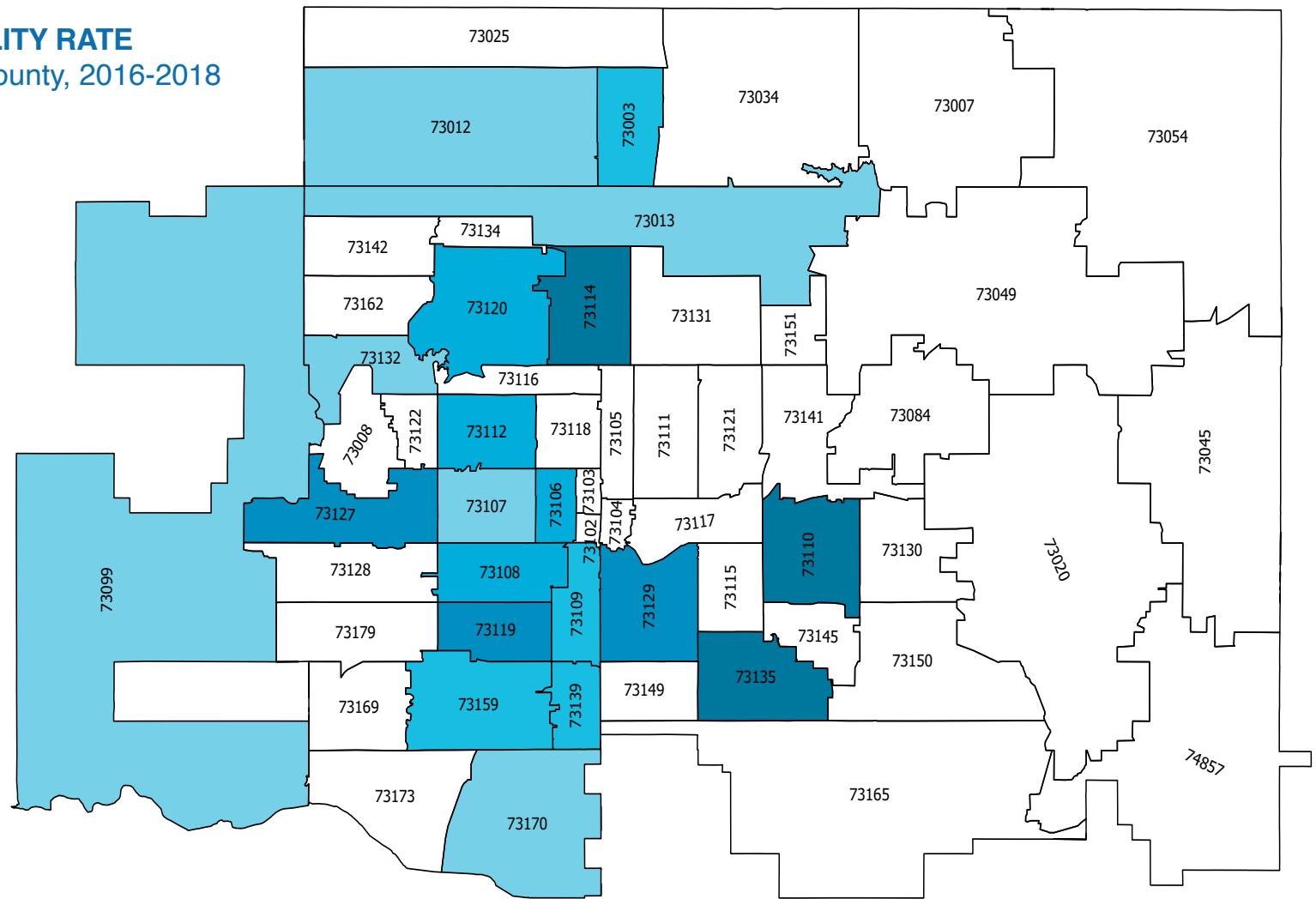


Infant Mortality Rate Comparison, 2018



INFANT MORTALITY RATE

Oklahoma City-County, 2016-2018



*No data available

**Data too low to count/compare

Lowest  Highest  N/A

73003	8.2	73054	**	73109	8.1	73119	11.5	73132	6.8	73151	*
73007	*	73084	**	73110	12.8	73120	9.8	73134	**	73159	8.8
73008	**	73099	5.0	73111	**	73121	**	73135	12.9	73162	**
73012	5.4	73102	*	73112	9.5	73122	**	73139	7.8	73165	**
73013	5.1	73103	*	73114	16.0	73127	10.5	73141	**	73169	*
73020	**	73104	**	73115	**	73128	**	73142	**	73170	5.7
73025	**	73105	**	73116	**	73129	10.8	73145	**	73173	**
73034	**	73106	10.2	73117	**	73130	**	73149	*	73179	*
73045	**	73107	6.0	73118	**	73131	*	73150	*	74857	**
73049	*	73108	9.9								

Rate per 1,000 live births. Data Source: Oklahoma State Department of Health 2016-2018 vital records

SINGLE-MOTHER FAMILY HOUSEHOLD

Female-headed families include widows, divorced and separated women, and never-married mothers. The indicator represents the average percent of households from 2016-2018 headed by a female without a husband, living with her own children under the age of 18 years.

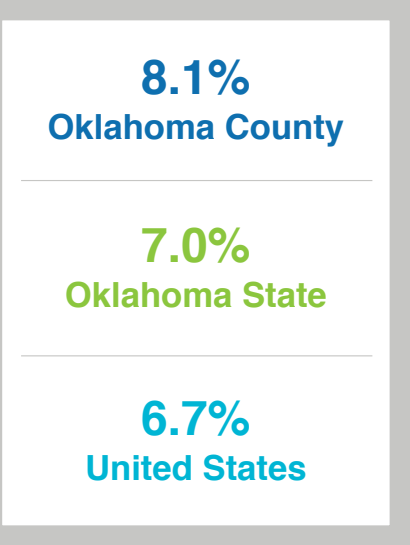
Why Is It Important?

The poverty and food insecurity rates are higher among single-mother households compared to other household types (Bread for the World, 2019). Single-mother households also face other stressors such as availability and quality of childcare and education programs (WESC, 2010). Increasing access, coordination and streamlining of resources available to single-mother households can improve health outcomes for this population.

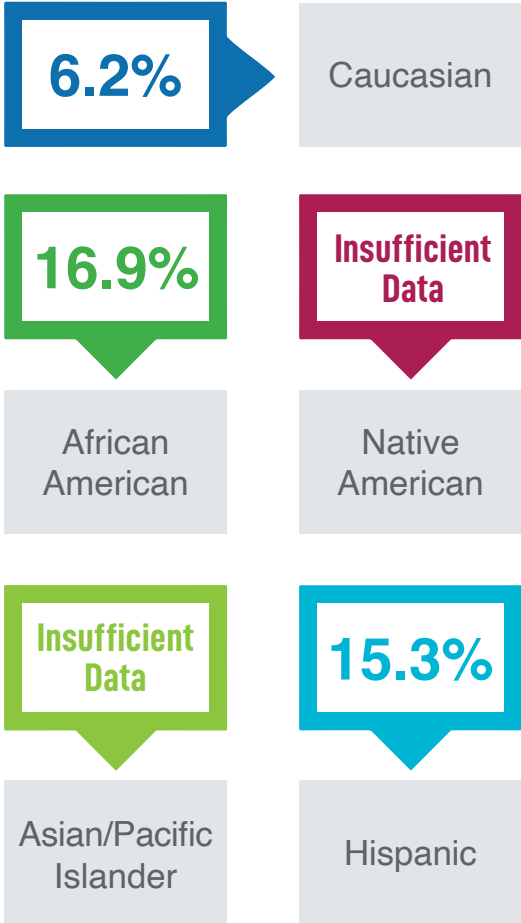
How Are We Doing?

In 2018, nearly seventeen percent of Black/African American households were headed by a female with no husband present and living with own children under the age of 18 years. In comparison, over six percent of Caucasian households were headed by a female. And over fifteen percent of Hispanic households were headed by a female living with her own children, with no husband present.

Single-mother Family Households Comparison, 2018



Percent by Race/Ethnicity Oklahoma County, 2018



Data Source

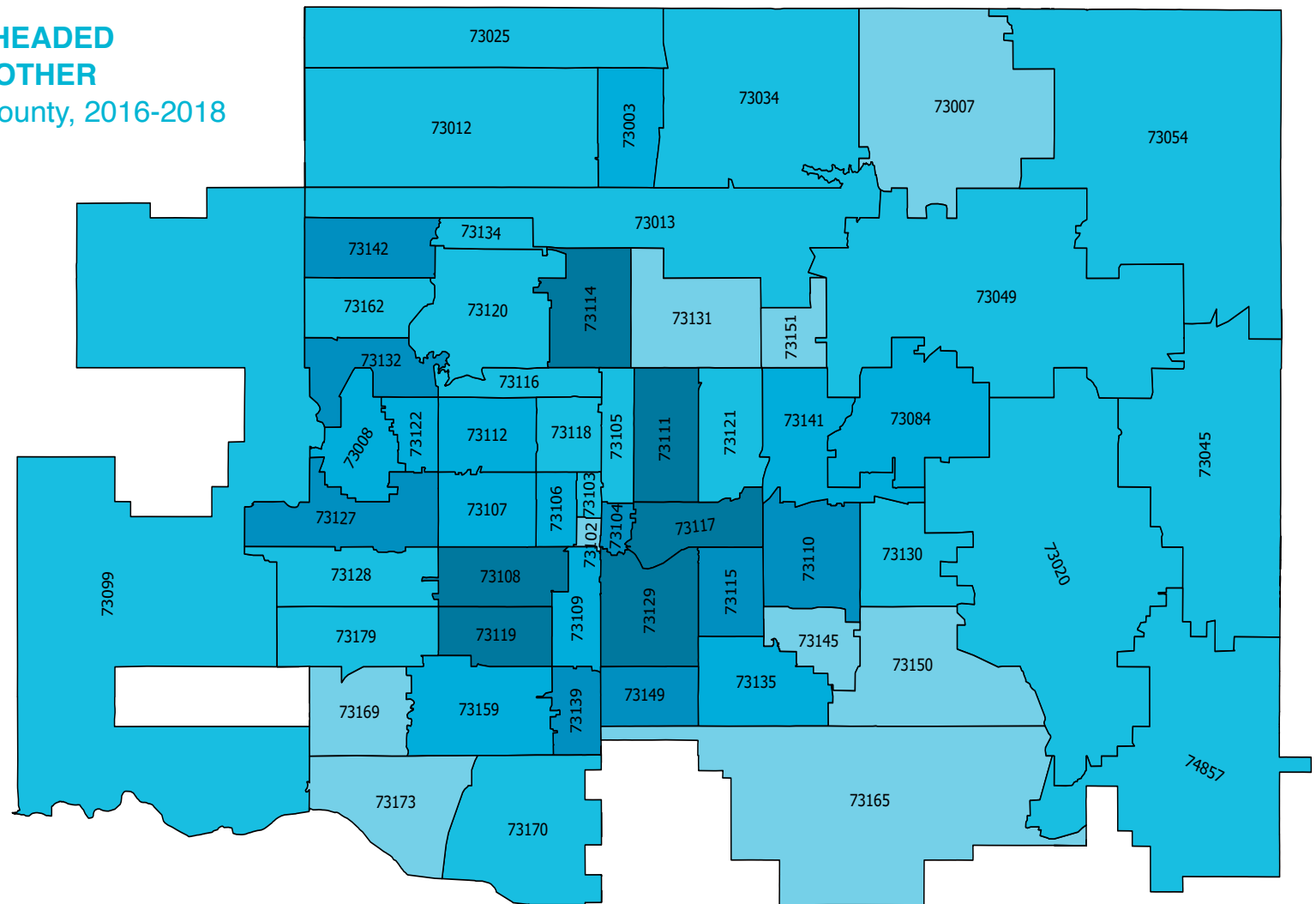
- U.S. Census ACS 2018 1-year and 5-year population estimates.

Reference

- Bread for the World. (May 2019). Hunger and poverty in female-headed households. <https://www.bread.org/sites/default/files/downloads/hunger-poverty-female-headed-households-may-2019.pdf>.
- Women’s Economic Security Campaign. (2010). Child care matters: Building economic security for low-income women. http://www.cofionline.org/COFI/wp-content/uploads/2015/05/wesc_childcarematters.pdf

HOUSEHOLDS HEADED BY A SINGLE-MOTHER

Oklahoma City-County, 2016-2018



Lowest Highest

73003	8.2%	73054	4.2%	73109	8.5%	73119	14.3%	73132	12.0%	73151	1.8%
73007	2.7%	73084	7.8%	73110	11.6%	73120	5.2%	73134	6.0%	73159	7.4%
73008	8.1%	73099	6.1%	73111	16.4%	73121	4.8%	73135	8.4%	73162	4.6%
73012	5.5%	73102	0.9%	73112	8.2%	73122	8.1%	73139	9.3%	73165	2.8%
73013	5.5%	73103	4.3%	73114	17.1%	73127	12.3%	73141	8.3%	73169	2.8%
73020	4.9%	73104	9.5%	73115	9.5%	73128	4.4%	73142	9.3%	73170	3.6%
73025	3.5%	73105	4.6%	73116	4.7%	73129	13.8%	73145	1.5%	73173	2.4%
73034	4.7%	73106	7.4%	73117	13.9%	73130	5.6%	73149	11.2%	73179	4.3%
73045	4.6%	73107	7.3%	73118	4.5%	73131	2.2%	73150	1.2%	74857	4.3%
73049	3.9%	73108	18.9%								

Data Source: U.S. Census ACS 2016, 2017, 2018 5-year population estimates