



Tennessee's 2025 Infant Mortality Report & Infant Health Strategic Plan

Nicole Andersen

Child Fatality Review Mission



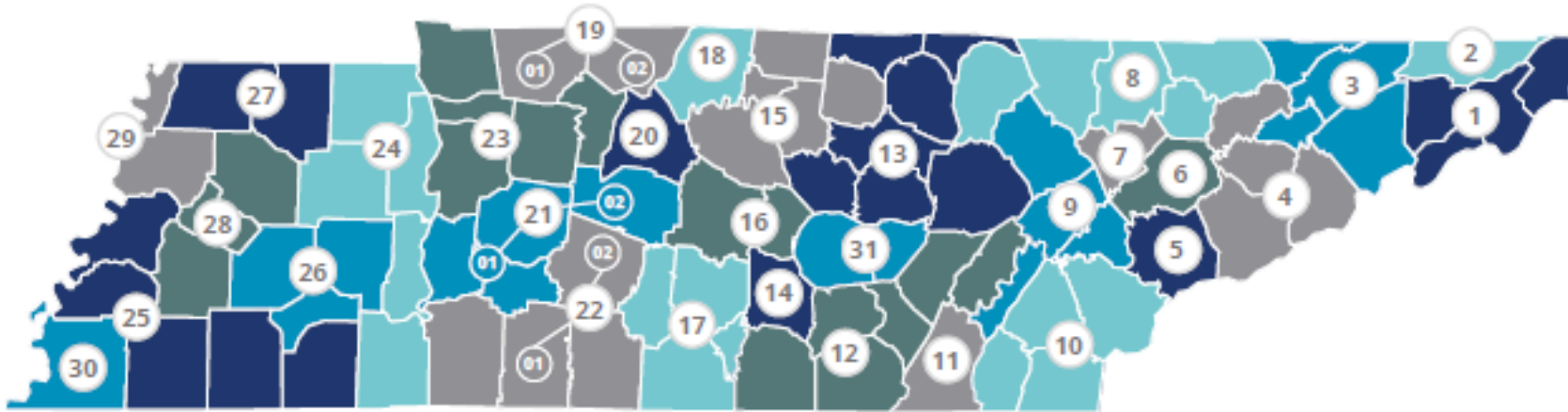
Established by the
*Child Fatality and
Prevention Act of 1995*

CFR Aims to:

1. Improve response to child fatalities.
2. Provide accurate information on how and why TN children are dying.
3. Reduce the number of child deaths.

Child Fatality Review

34 multi-disciplinary and multi-agency teams across the state conduct in-depth reviews of all TN child deaths ages 0 to 17. For infant deaths, cases are eligible for review if the infant was born at least 23 weeks' gestation or weighed 500 grams or more at birth.



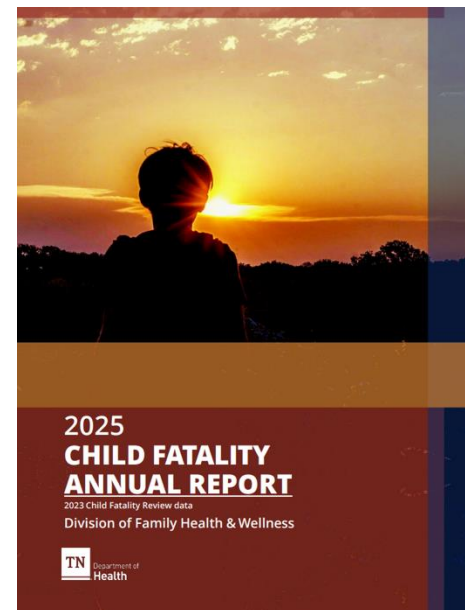
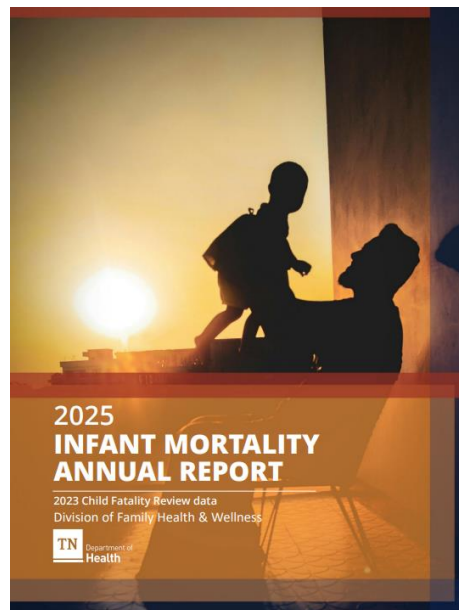
Child Fatality Review

One multi-disciplinary and multi-agency state team reviews aggregate data from local reviews and develops statewide prevention recommendations and initiatives.



Child Fatality Review Annual Reports

In the past, information was presented in one Child Fatality Review Annual Report. **In 2025, a separate Infant Mortality report was released** to allow for more in-depth examination and reporting of infant death data.



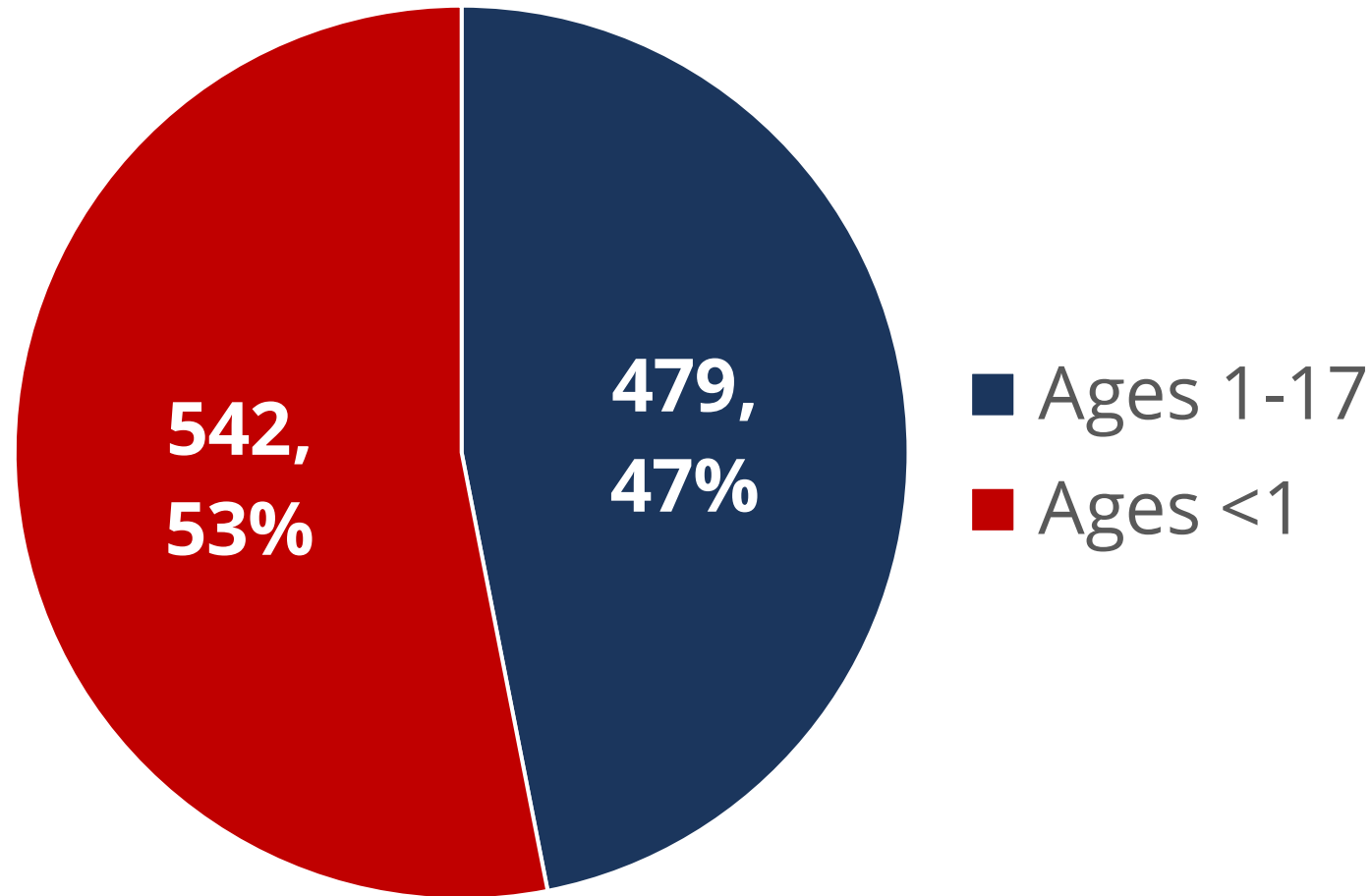


TM

**Vital Statistics Data
2023 Infant Deaths
Age <1 Year**

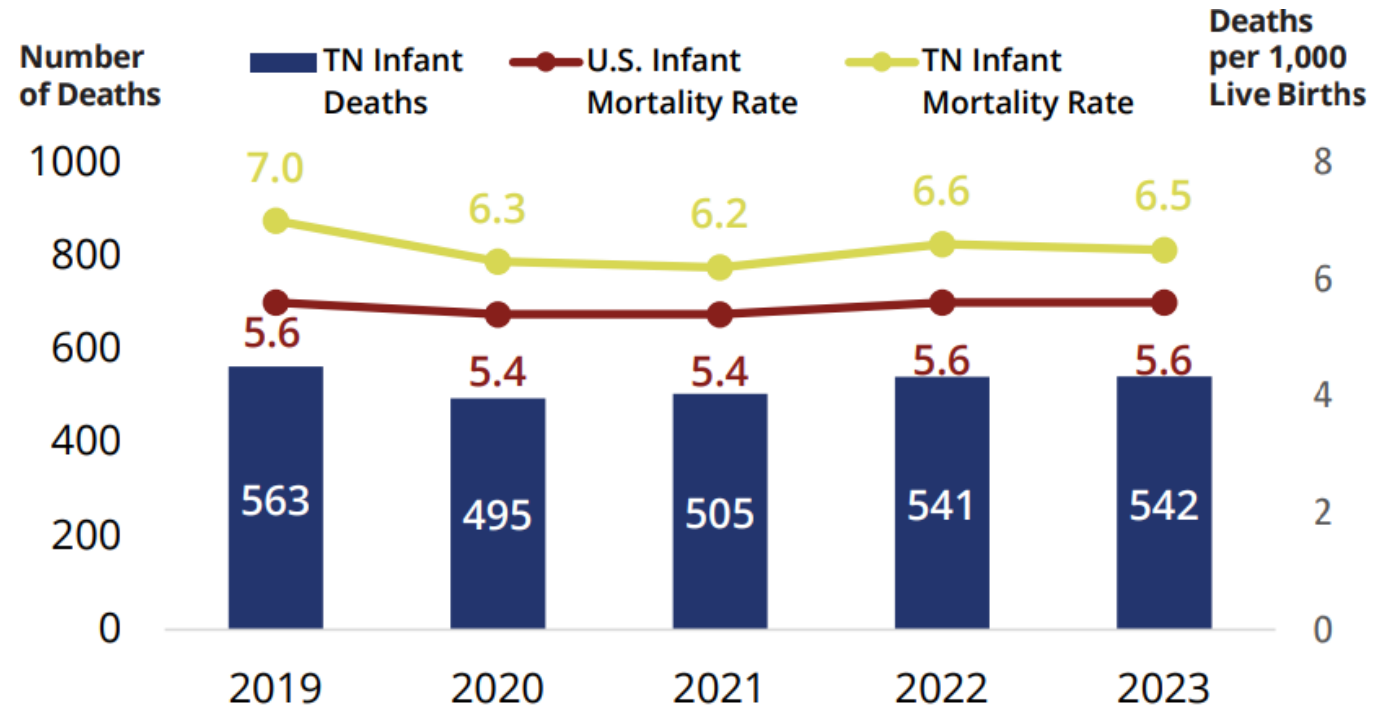
All Child Deaths, 0-17 Years, 2023

In 2023, **over half** of all child deaths (ages 0-17) in Tennessee occurred before the child's first birthday.



All Infant Deaths, 2023

In 2023, there were a total of **542 infant deaths**.



- From 2019-2023, Tennessee's infant mortality rate consistently exceeded the national rate.
- In 2023, Tennessee's infant mortality rate was 16.1% higher than the national rate.

All Infant Deaths – Geographic Distribution, 2023

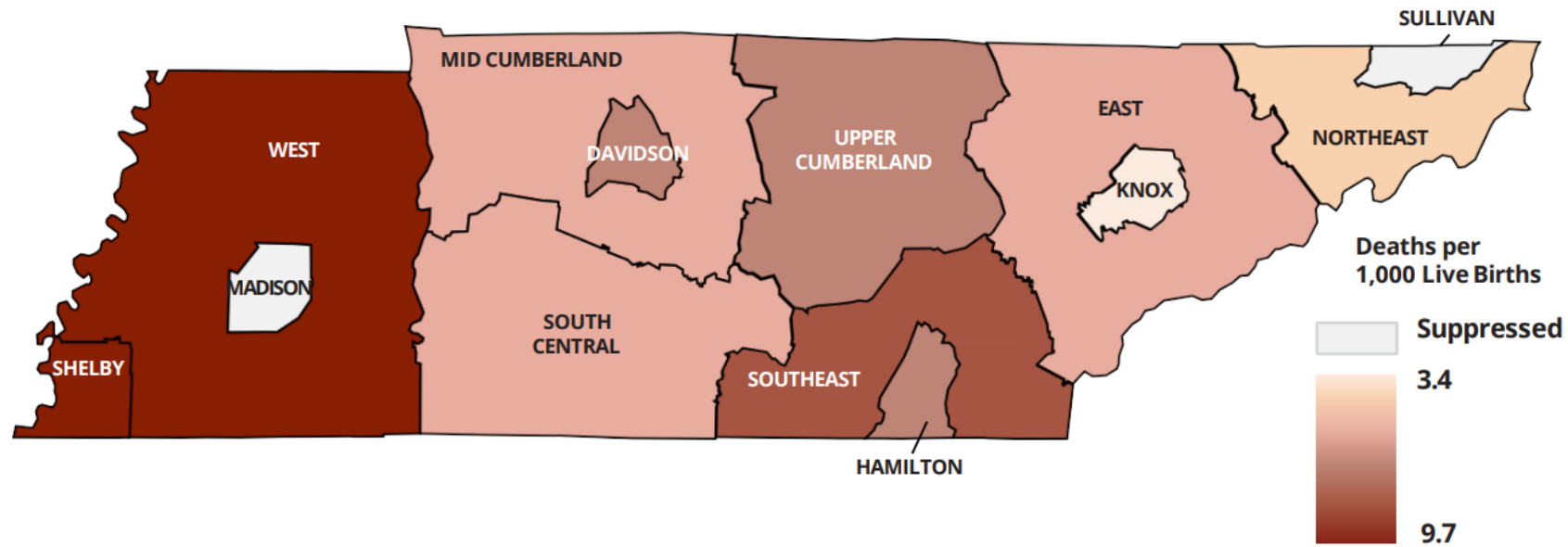


Figure 4. Infant Mortality Rate by Tennessee Health Region, Tennessee, 2023.

Data source: Tennessee Department of Health, Office of Vital Records and Health Statistics, Death Statistical File, 2023.

- The highest rates of infant mortality were observed in the **West Region** and **Shelby County**.
- **Knox County** and the **Northeast Region** saw statistically significant **decreases** in rate from 2022 to 2023, while the **Southeast Region** and **Hamilton County** reported **increases**.

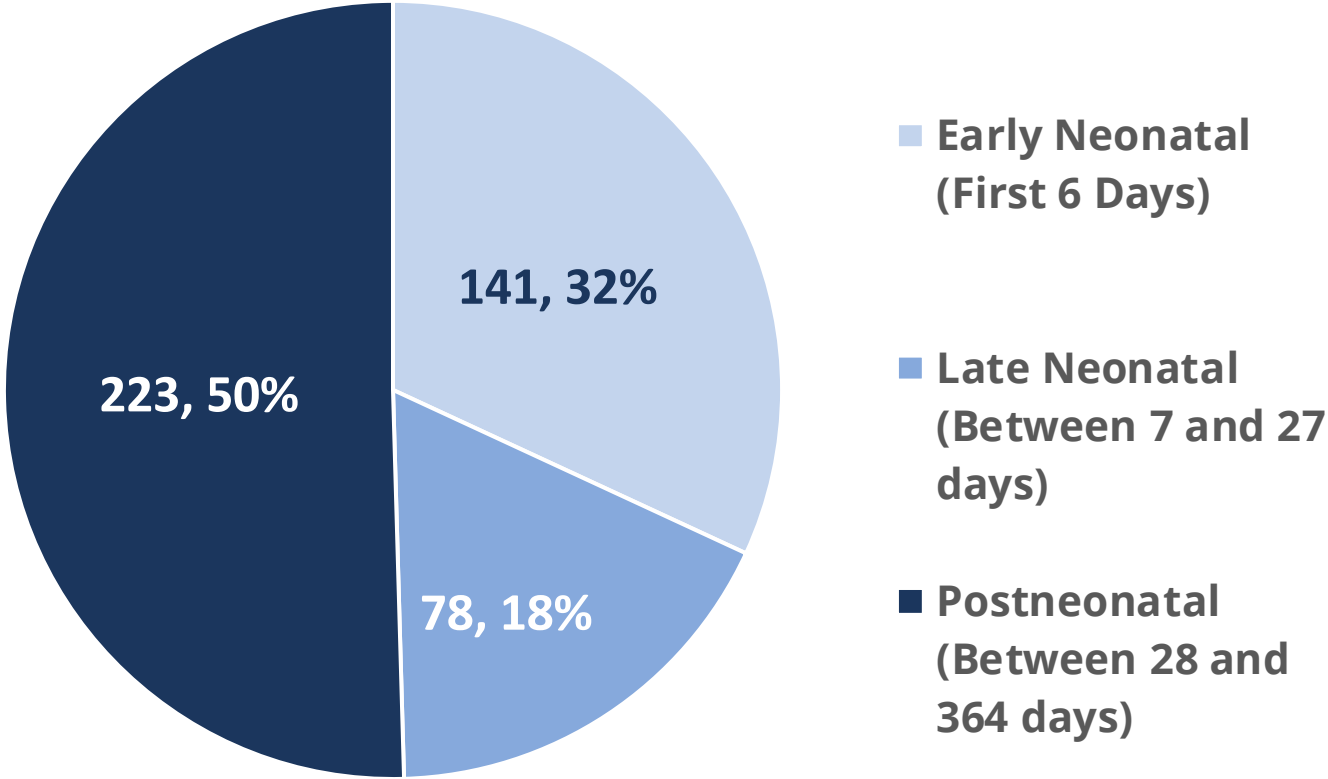


TM

CFR Data
2023 Infant Deaths
Age <1 Year

Reviewed Cases: Timing of Infant Deaths, 2023

Half of all reviewed infant deaths occurred in the postneonatal period.



Reviewed Cases: Cause of Death, 2023

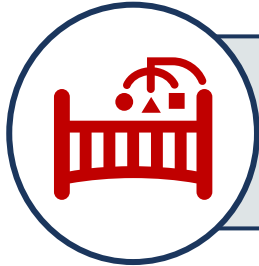
Over 3 in 5 reviewed infant deaths had a **medical condition** as cause of death.



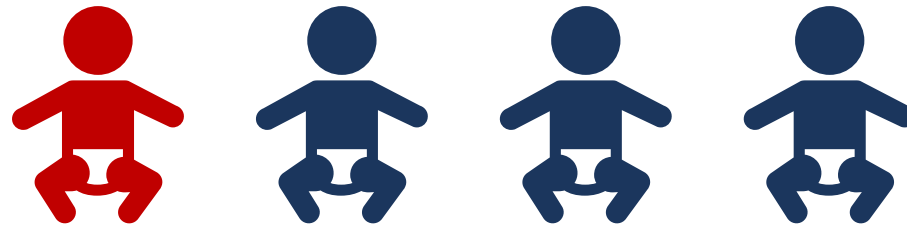
The top causes of reviewed infant death were preterm birth, low birthweight, and congenital anomalies.

16.5% of reviewed infant deaths had an **external cause**.

Reviewed Cases: Sleep-Related Death, 2023



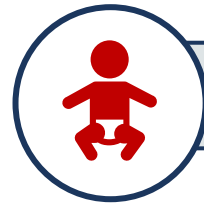
In 2023, **sleep-related deaths** accounted for **1 in 4 (25%)** infant deaths.



Most (69.4%) occurred in the first 3 months of life.

Top contributing factors were related to **not practicing the ABCs of Safe Sleep.**

Reviewed Cases: Preventability, 2023

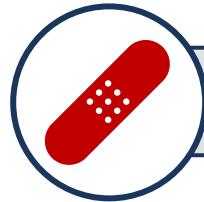


All reviewed infant deaths

30% were deemed probably preventable.



Infant Deaths with Medical Causes



Infant Deaths with External Causes



Sleep-related Infant Deaths

Reviewed Cases: Preventability, 2023



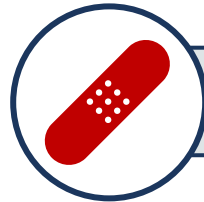
All reviewed infant deaths

30% were deemed probably preventable.



Infant Deaths with Medical Causes

6% were deemed probably preventable.



Infant Deaths with External Causes



Sleep-related Infant Deaths

Reviewed Cases: Preventability, 2023



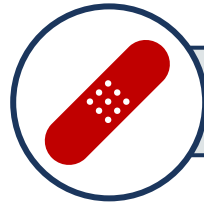
All reviewed infant deaths

30% were deemed probably preventable.



Infant Deaths with Medical Causes

6% were deemed probably preventable.



Infant Deaths with External Causes

89% were deemed probably preventable.



Sleep-related Infant Deaths

Reviewed Cases: Preventability, 2023



All reviewed infant deaths

30% were deemed probably preventable.



Infant Deaths with Medical Causes

6% were deemed probably preventable.



Infant Deaths with External Causes

89% were deemed probably preventable.



Sleep-related Infant Deaths

78% were deemed probably preventable.



TM

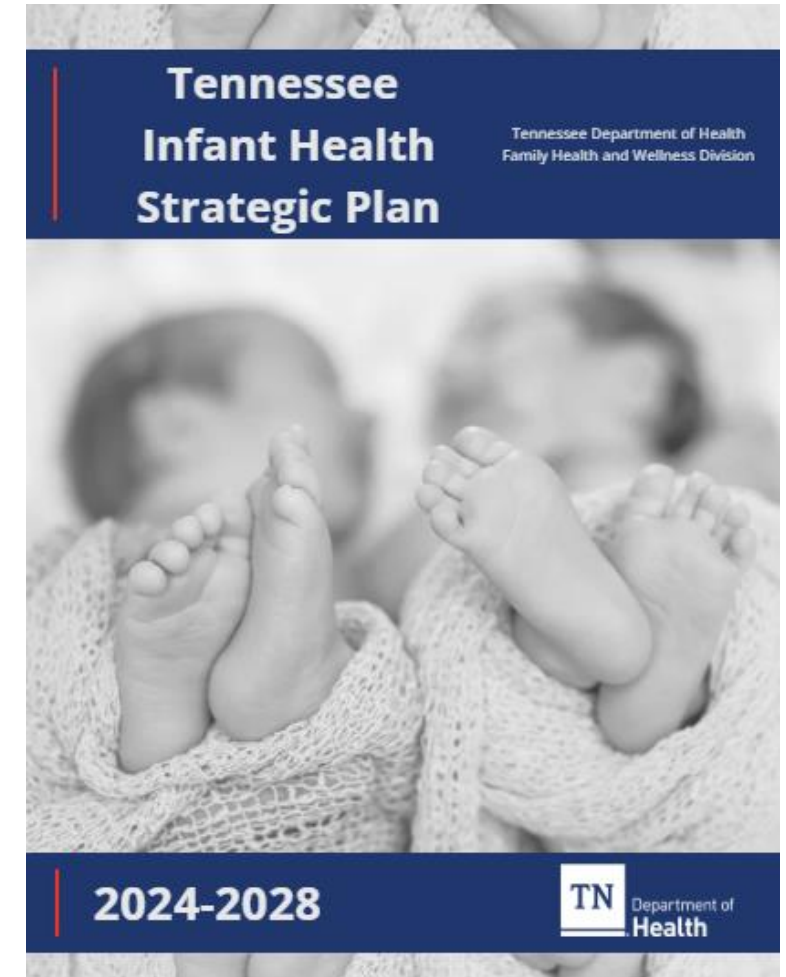
Prevention

Prevention Recommendations in the 2025 Report

- 1 Maternal Health
- 2 Infant Health
- 3 Safe Sleep
- 4 Programmatic

Infant Health Strategic Plan

- **7 key data-driven and community informed strategic areas with associated activities:**
 - Family Planning
 - Prenatal Care
 - Birth Outcomes & Infant Health
 - Safe Sleep
 - Preterm Birth
 - Breastfeeding
 - Smoking



How Can You Help?

The action plan at the end of the strategic plan highlights entities that are encouraged to engage with specific activities.

Action Plan



Data
Plan
Action

The following pages specify specific entities tasked with completing the activities listed in this strategic plan. All entities and individuals, regardless of specific inclusion in the action plan, are encouraged to think creatively about how they can participate in this plan to promote the health of infants in Tennessee.

State Government
Includes TennCare, Tennessee Department of Health programs, TN Title W/Maternal and Child Health Block Grant programs, and Genetics Advisory Committee.

Healthcare
Includes Tennessee Hospital Association, Tennessee Initiative for Perinatal Quality Care, Tennessee Primary Care Association, regional genetic hemoglobin centers, birthing hospitals, funded clinical family planning services, federally qualified health centers, hospitals, perinatal centers, emergency departments, providers, and doulas.

Local Government
Includes regional health departments, metro and local health departments, and local education agencies.

Community & Charity
Includes community-based organizations, community health organizations, A Step Ahead, and other perinatal partners.


Infant Health Strategic Plan **22**

Action Plan

Safe Sleep



| Activities |  |  |  |  |
|--|---|---|---|---|
| 4.1 Convene and expand the TDH Safe Sleep Collaborative, focusing on organizations serving communities disproportionately affected by sleep-related infant deaths. | ✓ | | | ✓ |
| 4.2 Increase the number of Tennessee birthing hospitals achieving at least bronze level certification in the Cribs for Kids National Safe Sleep Hospital Certification program. | ✓ | | ✓ | |
| 4.3 Enhance external outreach by establishing a Community of Practice within the TDH Safe Sleep Collaborative to highlight regions with sustained improvements as models for statewide learning and replication. | ✓ | ✓ | | |
| 4.4 Distribute safe sleep materials to all new parents through CHANT, EBHV, and the MyTN app Welcome Baby Platform. Track annual app usage and target promotion in high-risk areas with set viewership goals. | ✓ | | | |
| 4.5 Explore implementation of quarterly or bi-annual notification reports by region to birthing hospitals, detailing aggregate data on local sleep-related deaths. | ✓ | | | |
| 4.6 Promote the ABCs of safe sleep through PSAs, social media, and distribution of portable cribs and educational resources, targeting high-risk populations. | ✓ | ✓ | ✓ | ✓ |
| 4.7 Conduct geographic and demographic risk assessments to guide prioritization and development of new initiatives. | ✓ | | | |


Infant Health Strategic Plan **27**

Expanding Family Planning and Prenatal Care Access



Promote family planning services, including telehealth options.



Increase awareness of coverage (including options through TennCare) of postpartum contraception and Presumptive Eligibility.



Encourage optimal pregnancy spacing through patient education.



Highlight annual well-woman visits and available community support services.

Improve Birth Outcomes and Infant Health



Ensure high-quality newborn screening and follow-up and connect families to supportive services.



Link families to comprehensive perinatal telehealth providers as needed.



Share resources from health departments and TennCare including, CHANT and child car safety support services (Child Safety Fund and Car Seat Safety Checks).



Encourage enrollment in TennCare and CHIP to expand access to maternal and infant health services.

Promote Safe Sleep Practices



Achieve at least Bronze-level certification in the Cribs for Kids National Safe Sleep Hospital Program.



Educate families and colleagues on the ABCs of Safe Sleep leveraging tools like PSAs, social media, and resource distribution. Emphasizing the importance of this education prior to discharge from birth hospitalization.

Address Preterm Birth and Maternal Health



Promote preconception, interconception, and prenatal care with focus on obesity, chronic conditions, and smoking cessation.



Increase education on congenital syphilis; promoting universal screening, partner tracking, and timely treatment.



Boost visibility of the Growing Inside Free of Tobacco program.

Support Breastfeeding and Smoking Cessation



Promote breastfeeding by increasing awareness of benefits and lactation support services through state agencies, such as the TN Breastfeeding Hotline, and community resources, fostering a supportive and person-centered breastfeeding culture.



Promote tobacco cessation resources (GIFTS, TN Quitline) and champion upstream prevention strategies to reduce the initiation of smoking and vaping among youth.

Contact Us

Nicole Andersen, MPH

**Child Fatality Review
Program Director**

Nicole.R.Andersen@tn.gov

**Infant Health
Strategic Plan:**



**Infant Mortality
Report:**

