An Assessment of the Risk of Preventable Deaths Among Children in Child Care in Georgia

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Background

- Conducted by Dr. John Carter from the Rollins School of Public Health at Emory University.
- Purpose was to review and compare fatalities to children in child care programs with children in the general population.
- Goal is to identify ways to reduce serious injuries and fatalities in child care settings.
Methods Overview

- Assess the risk of preventable deaths in child care settings (for children ages birth to four).
- Compare the fatality rate in child care settings to the fatality rate in the general population.

Context

- Study focuses on preventable fatalities.
  - Many infant – and some child – deaths are generally considered not preventable. Premature and low birth weight infants have a higher risk of death, and death is likely to occur within the first month of life.
  - Reviewing 2004-2008 data, slightly over 50% of all infant deaths occurred within the first week of life (zero to six days, early neonatal).
  - Unintentional injuries, homicides, and deaths attributed to sudden infant death syndrome (SIDS) are potentially preventable deaths.
  - While not all SIDS deaths or infant/toddler deaths attributed to external causes are preventable, over 40% of post-neonatal and toddler deaths are due to external causes and do have modifiable risk factors.
The leading cause of infant deaths was suffocation. Homicides and motor vehicle incidents were the second and third leading causes.

| Table 1: Average Annual Deaths, by Selected Causes, GA 2004 – 2008 (Data Review) |
|------------------|----------|-----------------|------------------|
|                  | All Deaths | SIDS | External Causes | % Preventable |
| Post-Neonatal Infants | 409      | 120  | 50              | 41.6          |
| Toddlers (ages 1 - 4)  | 184      | 87   |                 | 47.3          |

Data Sources

- Vital Records Section, Georgia Department of Public Health (DPH)
- Online Analytical Statistical Information System (OASIS)
- Child Fatality Review Reports (Georgia Child Fatality Review)
- Fatality Incident Reports (DECAL)
- 2008 Child Care Economic Impact Study (DECAL)
Methods

- Analysis covered years 2007-2009
- Using DECAL incident reports and child fatality review studies, identified cases of infant/child death due to SIDS or an external cause that occurred in a child care setting.
  - A key finding being addressed is that two data sources did not always align.
  - SIDS – 82.1 per 100,000
  - External Causes – 18.4 per 100,000

Methods (continued)

- Estimated mortality rates (SIDS and external causes) for infant/toddlers in child care settings
  - Requires assumptions about the number of children in child care and the time spent in child care.
- Low rates for SIDS and external causes in child care settings
  - SIDS – 18.4 fatalities per 100,000. 64 could be expected.
  - External Causes – rate too small to compute. Twelve were expected; four occurred.
Findings

- The death of an infant or toddler is a rare event, but many are preventable.
- An infant in child care has a slightly lower risk of SIDS than the general infant population, but SIDS is the major cause of death associated with child care.
  - Rate calculation is based on a small number of fatalities and assumptions about exposure to child care.
- The risk of a preventable death is much lower for an infant or toddler in child care than for a child in the general population.
- Whether or not the child is in child care has no direct bearing on infant or toddler deaths when identified medical conditions exist.