Geography of Infant Mortality

Premature births are twice as likely when mothers have inadequate prenatal care, and mental retardation is more frequent in premature babies than in full-term babies, according to a report by the Children's Bureau, Department of Health, Education, and Welfare.

Although nearly 11 percent of the babies born in the United States in 1960 were born in the 10 largest cities, only one of the cities, Los Angeles, had an infant mortality rate lower than the national rate.

The 1960 infant death rate of 26.0 per 1,000 live births, based on data collected by the National Vital Statistics Division, Public Health Service, was slightly lower than the 1959 rate of 26.4.

The infant mortality rate for nonwhites was higher than that for whites in each of the 10 major cities in 1960. For the country as a whole during 1950–60, the rate for whites decreased 14.6 percent and the rate for nonwhites decreased 2.9 percent. Most of the improvement in the rates occurred during the first half of the decade, with little change during 1955– 60 (table 1).

The States made uneven progress against infant mortality. The 1960 rates ranged from 19.6 in Utah to 41.6 in Mississippi (table 2).

The U.S. rate is 10th lowest among those of countries of more than 300,000 population that have relatively complete reporting based on internationally accepted definitions. In 1950, the United States was sixth. Since then, this country has had a smaller percentage of decrease than any of the nine nations that now rank above it.

The association between infant mortality and low socioeconomic levels has long been recognized. With the increase in the number of lowincome families in large cities, higher infant mortality rates can be expected in these centers.

The Children's Bureau stated that large cities can combat infant mortality by improving maternity care programs, by increasing the number of prenatal clinics, and by making maternal and child health services more accessible to those neighborhoods where families seem reluctant to take advantage of the city's resources.

A prime goal in these activities is the selection of women with complications of pregnancy that endanger the mother's life and the life and healthy development of the baby.

Table 1. Infant mortality rates, by color, United States and selected cities, 1950, 1955, 1960

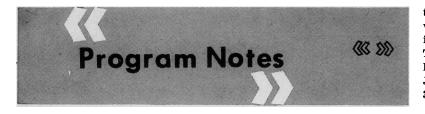
Cities ranked by number of live births, 1960	Number of live births,	Rate per 1,000 live births			
	1960΄	1960	1955	1950	
New York City	157, 706	26. 3	26. 4	24. 9	
White	122, 640	21. 6	23. 2	22. 4	
Nonwhite	35, 066	42. 6	40. 8	39. 1	
Chicago	88, 686	29. 0	27. 3	25. 4	
White	57, 768	23. 4	21. 6	23. 0	
Nonwhite	30, 918	39. 5	41. 7	34. 8	
Los Angeles	$55, 308 \\ 41, 502 \\ 13, 806$	24.5	23. 2	24. 8	
White		22.3	21. 3	23. 1	
Nonwhite		31.1	30. 8	34. 9	
Philadelphia	44, 606	31. 6	32. 2	31. 1	
White	28, 620	26. 2	26. 7	25. 8	
Nonwhite	15, 986	41. 3	44. 6	46. 9	
Detroit	36,060	30. 9	26. 1	26. 9	
White	22, 496	25. 6	21. 8	24. 9	
Nonwhite	13, 564	39. 7	36. 0	34. 6	
Baltimore	23, 372	32. 6	30. 9	28. 0	
White	12, 096	25. 0	24. 0	22. 6	
Nonwhite	11, 276	40. 9	42. 0	38. 8	
Cleveland	22, 034	31. 0	28. 8	25. 6	
White	14, 354	26. 2	22. 3	23. 1	
Nonwhite	7, 680	39. 8	44. 5	34. 9	
Houston	$19,872 \\13,324 \\6,548$	28. 5	26. 9	28.7	
White		23. 8	22. 8	25.6	
Nonwhite		38. 2	37. 9	38.5	
Dist. of Columbia	19, 872	36. 4	32. 2	30. 4	
White	6, 196	29. 4	23. 7	30. 5	
Nonwhite	13, 676	39. 6	39. 2	30. 3	
St. Louis	19, 432	32. 6	27. 7	25. 8	
White	11, 894	24. 5	23. 1	21. 2	
Nonwhite	7, 538	45. 5	38. 0	40. 9	
United States ¹ _	4, 257, 850	26. 0	26. 4	29. 2	
White	3, 600, 744	22. 9	23. 6	26. 8	
Nonwhite	657, 106	43. 2	42. 8	44. 5	

¹ Includes Alaska and Hawaii in 1960.

State	Rate per 1,000 live births			Percent change		
	1960	1955	1950	1960 from 1955	1955 from 1950	1960 from 1950
United States 1	26. 0	26. 4	29. 2	-1.5	-9.6	<u> </u>
AlabamaAlaskaArizonaArizonaArizonaArizonaAriansasCaliforniaColoradoConnecticutDelaware	32. 4 40. 5 31. 9 27. 4 23. 3 27. 5 21. 1 23. 8	32. 0 37. 4 34. 8 27. 7 23. 6 30. 3 21. 7 25. 0	36. 8 51. 8 45. 8 26. 5 25. 0 34. 4 21. 8 30. 7	+1.3 +8.3 -8.3 -1.1 -1.3 -9.3 -2.8 -4.8	$-13.1 \\ -27.8 \\ -24.0 \\ +4.5 \\ -5.6 \\ -11.9 \\5 \\ -18.6$	$-12.0 \\ -21.8 \\ -30.4 \\ +3.4 \\ -6.8 \\ -20.1 \\ -3.2 \\ -22.5$
District of Columbia Florida Georgia Hawaii Idaho Illinois Indiana Iowa	36. 4 29. 7 33. 0 23. 2 22. 9 25. 0 23. 9 21. 9	32. 2 29. 7 29. 9 20. 6 20. 8 24. 8 25. 0 22. 1	30. 4 32. 1 33. 5 24. 0 27. 1 25. 6 27. 0 24. 8	$+13.0 \\ 0 \\ +10.4 \\ +12.6 \\ +10.1 \\ +.8 \\ -4.4 \\9$	$\begin{array}{r} +5.9\\ -7.5\\ -10.8\\ -14.2\\ -23.3\\ -3.1\\ -7.4\\ -10.9\end{array}$	$\begin{array}{r} +19.\ 7\\ -7.\ 5\\ -1.\ 5\\ -3.\ 3\\ -15.\ 5\\ -2.\ 4\\ -11.\ 5\\ -11.\ 7\end{array}$
Kansas Kentucky Louisiana Maine Maryland Massachusetts Michigan Minnesota	22. 1 27. 9 32. 0 25. 5 27. 3 21. 6 24. 1 21. 6	23. 3 30. 4 31. 6 24. 7 27. 6 21. 9 24. 9 21. 8	25. 7 34. 9 34. 6 30. 9 27. 0 23. 3 26. 3 25. 1	$\begin{array}{c} -5.2 \\ -8.2 \\ +1.3 \\ +3.2 \\ -1.1 \\ -1.4 \\ -3.2 \\9 \end{array}$	$\begin{array}{r} -9.3\\ -12.9\\ -8.7\\ -20.1\\ +2.2\\ -6.0\\ -5.3\\ -13.2 \end{array}$	$\begin{array}{c} -14.\ 0\\ -20.\ 1\\ -7.\ 5\\ +1.\ 1\\ -7.\ 3\\ -8.\ 4\\ -14.\ 0\end{array}$
Mississippi Missouri Montana Nebraska Nevada New Hampshire New Jersey New Mexico New York	41. 6 24. 7 25. 0 21. 9 30. 1 23. 6 24. 6 33. 2 24. 1	37. 0 25. 3 25. 0 23. 7 30. 0 25. 7 24. 3 43. 0 24. 3	36. 7 29. 2 28. 2 25. 0 37. 9 24. 5 25. 2 54. 8 24. 7	+12.4-2.40-7.6+.3-8.2-22.88	$\begin{array}{c} +.8\\ -13.4\\ -11.4\\ -5.2\\ -20.9\\ +4.9\\ -4.0\\ -21.5\\ -1.6\end{array}$	$\begin{array}{r} +13.\ 4\\ -15.\ 4\\ -11.\ 4\\ -20.\ 6\\ -3.\ 7\\ -2.\ 4\\ -39.\ 4\\ -2.\ 4\end{array}$
North Carolina North Dakota Ohio Oklahoma Oregon Pennsylvania Rhode Island South Carolina South Dakota	$\begin{array}{c} 31.\ 7\\ 24.\ 8\\ 24.\ 0\\ 25.\ 5\\ 23.\ 2\\ 24.\ 5\\ 23.\ 3\\ 34.\ 3\\ 28.\ 1\end{array}$	30. 3 25. 1 24. 8 26. 7 24. 1 24. 6 23. 4 34. 1 26. 1	$\begin{array}{c} 34. \ 5\\ 26. \ 6\\ 30. \ 2\\ 22. \ 5\\ 27. \ 6\\ 27. \ 8\\ 38. \ 6\\ 26. \ 6\end{array}$	+4.6-1.2-3.2-4.5-3.74+.6+7.7	$\begin{array}{r} -12.\ 2\\ -5.\ 6\\ -7.\ 5\\ -11.\ 6\\ +7.\ 1\\ -10.\ 9\\ -15.\ 8\\ -11.\ 7\\ -1.\ 9\end{array}$	$\begin{array}{r} -8.1 \\ -6.8 \\ -10.5 \\ -15.6 \\ +3.1 \\ -11.2 \\ -16.2 \\ -11.1 \\ +5.6 \end{array}$
Tennessee Texas Utah Vermont Virginia Washington West Virginia Wisconsin Wyoming	29. 4 28. 9 19. 6 24. 1 29. 8 23. 4 25. 5 21. 8 28. 2	29. 2 30. 3 20. 4 26. 1 29. 5 24. 5 27. 3 23. 7 28. 5	36. 4 37. 4 23. 7 24. 5 34. 6 27. 3 36. 1 25. 7 32. 5	$\begin{array}{r} +.7\\ -4.6\\ -3.9\\ -7.7\\ +1.0\\ -4.5\\ -6.6\\ -8.0\\ -1.1\end{array}$	$\begin{array}{r} -19.8 \\ -19.0 \\ -13.9 \\ +6.5 \\ -14.7 \\ -10.3 \\ -24.4 \\ -7.8 \\ -12.3 \end{array}$	$\begin{array}{r} -19. \ 2\\ -22. \ 7\\ -17. \ 3\\ -1. \ 6\\ -13. \ 9\\ -14. \ 3\\ -29. \ 4\\ -15. \ 2\\ -13. \ 2\end{array}$

Table 2. Infant mortality rates, by State, 1950, 1955, 1960

¹ Includes Alaska and Hawaii in 1960.



Air pollution from smoky automobile exhaust is being reduced through a campaign by the Philadelphia Department of Public Health. Licenses of vehicles with smoking motors are noted by policemen and health inspectors, and the motorists are sent letters explaining the offense and giving them 30 days in which to correct the motors or be fined (up to \$100). Approximately 400 violations are processed each week.

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A New York City Department of Health pamphlet, "Teenage Double Trouble," supplies adolescents with information on venereal disease: what it is, how it is contracted, and what can be done about it. The department's treatment centers are listed and the pamphlet encourages teenagers to visit them, emphasizing that they are free.

"An Open Letter to Parents on a Very Important Topic," issued by the department, urges parents to educate their children on sex and its potential relation to VD, and offers the help of the district health educator. District health centers in the New York City area are listed, and the health education section of the department is given as a source for other free pamphlets on VD. Another leaflet, "Questions and Answers About VD," is also directed to the parents, and answers some of the more common questions about VD.

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Special services for adolescents from 13 to 18 years of age, furnishing a setting for research in adolescent medicine, are provided at Beth Israel Hospital, New York City.

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Alcoholism was featured in the October 1962 issue of Ohio's Health. Topics ranged from general description and classification of the alcoholic to Ohio's problem with alcoholism. In an article on the employed alcoholic, Harrison M. Trice, Ph.D., associate professor of industrial and labor relations at Cornell, said that "Not only is it misleading to speak of the alcoholic employee as 'hidden,' but it is also inaccurate to describe the boss as 'covering him up.' It is far more accurate to describe the employer as being on a 'see-saw.' He may cover up for a short time, but soon he is pressured in two directions at the same time toward helping the employee manage his problem, on the one hand, and toward 'reporting him,' on the other. It adds up to classic indecision. Most bosses of alcoholics are ripe for help from their companies and usually welcome a way out of their dilemma."

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Residential treatment for emotionally ill blind children up to age 16 is now available in a 20-bed unit at the Fairmount Division of Syracuse State School under the sponsorship of the New York State Commission of Mental Hygiene.

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Adequately fluoridated water supplies in the United States have been mapped for physicians' reference by the Mead Johnson Laboratories.

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An amendment aimed at open refuse dumps has been added to the New York State Sanitary Code. Open dumps will be approved only by special permission of the full-time health officer having jurisdiction.

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The incidence of tuberculosis among nursing students working with tuberculous patients is no higher than that of the general population. This was the tentative conclusion of a 5-year study carried out in the State of Washington. More than 1,000 student nurses affiliated with Firland Sanatorium, ranging in age from 18 to 41, were observed. The average age was 21, and the length of exposure was 6 weeks until June 1959, when it was changed to 3 weeks.

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PHS information consultant Dorothy Ducas was asked why more girls didn't go into nursing in an interview on WNYC's "You and Your Health Program." In her opinion, it was because their mothers and grandmothers had conditioned them into thinking nursing was "dirty" work—emptying bedpans and working long hours, jobs which are actually done by maids, practical nurses, and aides.

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Breast-feeding decreases the likelihood of staphylococcal infections in infants, Dr. Paul Gyorgy has found in his experiments conducted at Philadelphia General Hospital and the University of Pennsylvania School of Medicine with NIH grants. The experiments with mice show that human milk aids the increased production of diseasefighting antibodies.

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Pica (the eating of nonedibles) is a recurring condition in half of the children hospitalized for accidental poisoning in the United States, states Dr. Reginald S. Lourie, chief of pediatric psychiatry at D.C. Children's Hospital. Although diet is not a contributing factor, incidence is higher in the low socioeconomic brackets (50 to 60 percent for children under age 6 as compared with 30 percent incidence in higher income groups).

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An \$8,000 grant from the Office of Vocational Rehabilitation will be used to formulate plans for a "Deafness, Speech and Hearing Index," which will catalogue past articles of scientific interest dealing with those topics. The grant is to the nonprofit Deafness, Speech and Hearing Publications, Inc., which now publishes a quarterly journal, DSH Abstracts.