

Williams County Health Department



Williams County Child Fatalities Review, 2013–2023

Purpose: This report includes reviews of child deaths that occurred during a 10-year period, from 2013–2023 in Williams County. This report examines the factors that are contributing to children’s deaths ranging from <1 to 17 years old in Williams County. By using this data to create interventions; we hope that this report will lead to a reduction in the incidence of untimely and preventable deaths of Williams County children.

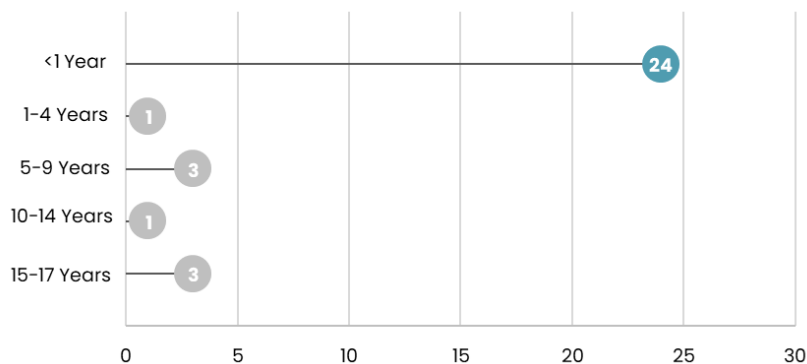
Summary: From the 10-year period from 2013 to 2023, there were 32 child deaths, and 8 (25%) were preventable. 22 (69%) child deaths were “Natural” deaths, and 5 (16%) deaths were classified as “Accident”. “Sleep-related” deaths accounted for 7 deaths or 22% of all child deaths from 2013–2023. Among those who died due to “sleep-related” causes, 71% were between the age of 0-1 month and 71% were female. Not sleeping in a crib or bassinet, soft bedding/toys in sleeping environment, not sleeping on back, and sleeping with people were the leading factors involved in “sleep-related” deaths from 2013–2023.

Data:

All Deaths by Age Group, 2013–2023 (n=32)

Most child deaths were <1 year old

Distribution of deaths by age group in Williams County from 2013–2023 (n=32)



Among the 32 child deaths in Williams County from 2013–2023, children <1 year old had the most deaths with 24 (75%). Children aged 5–9 and 15–17 both had 3 deaths from 2013–2023.

Manner of Death of Children in Williams County, 2013–2023 (n=32)

Most child deaths were **Natural**.

Distribution of manner of death among children <1-17 years old from 2013–2023 (n=32)

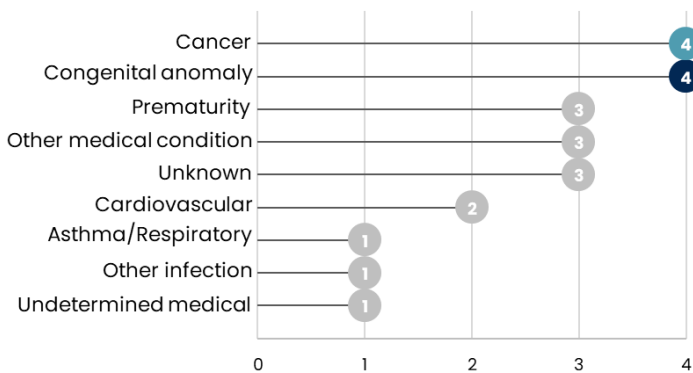
Manner of death	Number of deaths	Percentage of deaths	CFR Annual Report Definition
Natural	22	69%	Deaths caused by the natural disease process, including prematurity, and not an accident or violence.
Accident	5	16%	Deaths caused by unintentional rather than by natural causes, suicide, or murder.
Undetermined	4	12%	Following a thorough medical and legal investigation, a conclusive manner of death is not determined.
Homicide	1	3%	The deliberate and unlawful killing of a person by another person.
Suicide	0	0%	Deaths caused by self-inflicted behavior with the intent to die as a result.

From 2013–2023, nearly 7 in 10 children (69%) died due to “Natural” causes. 16% of children died due to “Accidents”, 12% were “Undetermined”, and 3% were a result of “Homicide”.

Natural vs Accident Deaths, 2013–2023

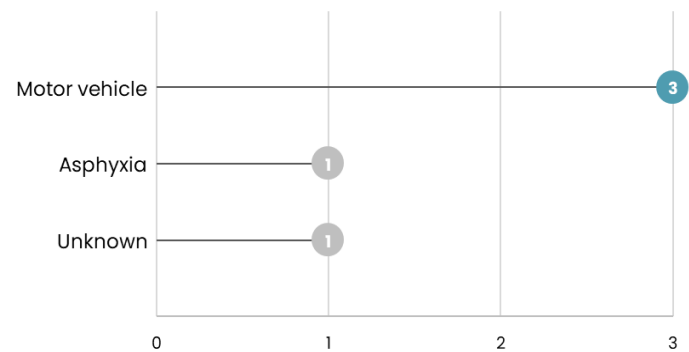
Natural

Cancer and Congenital anomalies were the leading causes of Natural death in children from 2013–2023 (n=22)



Accident

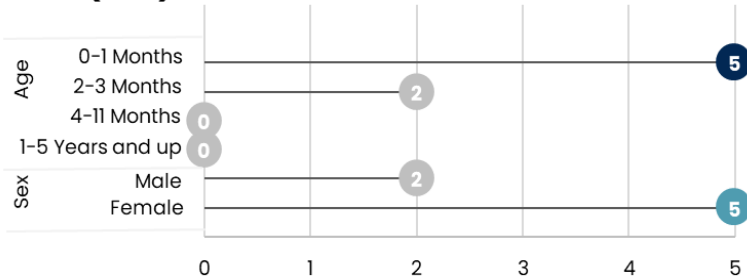
Motor vehicles were the leading cause of Accident death in children from 2013–2023 (n=5)



Among all “Natural” causes of death, 18% were caused by Cancer and 18% were caused by Congenital anomalies. Motor vehicle deaths made up 3 in 5% of “Accident” deaths among children from 2013–2023. Sleep-related deaths are categorized sometimes as “Natural” or “Accident”. However, those categories are not exclusive to sleep-related deaths.

Sleep-Related Deaths by Age and Sex, 2013-2023 (n=7)

Sleep-related deaths were highest among children **0-1 months old and Females** in Williams County from 2013-2023 (n=7)



All sleep-related deaths occurred in babies from 0-3 months old with 5 deaths occurring in babies aged 0-1 month and 2 deaths occurring in babies 2-3 months old.

There were also 2.5 times as many female deaths compared to males with 5 female deaths compared to 2 male deaths from 2013-2023.

Factors Involved in Sleep-Related Deaths, 2013-2023

In Williams County, the most common factors that lead to sleep-related deaths include:

- Not in a crib or bassinet
- Soft bedding/stuffed animals in sleep environment
- Not sleeping on back
- Sleeping with people
- Secondhand smoke

Safe Sleep ABCs

ALONE

Place baby alone in crib to sleep.



BACK

Place baby on their back to sleep.



CRIB

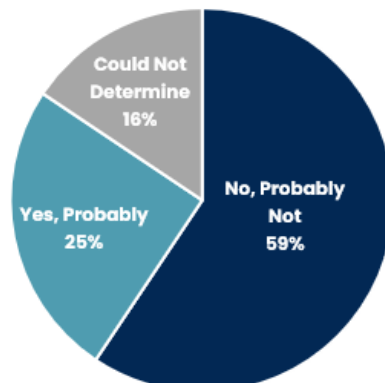
Use a firm, flat mattress and fitted sheet. Keep crib empty.



Death Preventability among Children Ages <1-17, 2013-2023 (n=32)

1 in 4 child deaths were Preventable

Preventability of death from ages <1-17 years in Williams County from 2013-2023 (n=32)



How Can We Prevent Future Deaths?

Many deaths may seem to happen “out of the blue,” but as the facts about the circumstances of all the deaths are compiled and analyzed, certain risks to children become clear. Many times, the circumstances surrounding preventable deaths are influenced by non-medical factors. Non-medical factors include:

- Housing, education, employment
- Life stressors, family trauma, adverse childhood experiences
- Sleep positions and environments
- Motor vehicle crashes

Traditionally, there has been a focus on health care or medical interventions to prevent child fatalities. While early access to prenatal and postnatal care is extremely important for health, medical intervention alone cannot change non-medical factors that exist in the community.

An upstream community approach to improve non-medical interventions like housing, education, employment, safe sleep practices are necessary to prevent future untimely deaths.

WHAT CAN WE DO LOCALLY?

 <p>HOUSING</p> <ul style="list-style-type: none">• PROVIDE SAFE AND HEALTHY RENTAL OPTIONS• PROVIDE RENTAL ASSISTANCE FOR LOW INCOME FAMILIES• AFFORDABLE NEW HOUSING OR LOW INTEREST LOANS	 <p>EDUCATION</p> <ul style="list-style-type: none">• PROVIDE EVIDENCE-BASED HOME VISITING• SUPPORT QUALITY EARLY CHILDHOOD PROGRAMS LIKE HEAD START• PROVIDE CAREER - TECHNICAL PROGRAMS	 <p>EMPLOYERS</p> <ul style="list-style-type: none">• PROVIDE WAGES THAT CAN SUPPORT A FAMILY• PROVIDE PAID SICK LEAVE• BREASTFEEDING SUPPORT DURING WORK	 <p>ACCESS TO CARE</p> <ul style="list-style-type: none">• EARLY CARE FOR MOM AND BABY• SMOKING CESSATION• SUBSTANCE USE TREATMENT• SAFE SLEEP EDUCATION• ACCESS TO VACCINES <p>(HPIO, 2023)</p>
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References:

- Center for Fatality Review and Prevention- National Fatality Review Case Reporting System
- City of Columbus (2017)
- https://www.healthpolicyohio.org/wp-content/uploads/2023/04/SDOIM_FiveYearsLater_MainPaper_Final_4.7.23.pdf
- Ohio Public Health Information Data Warehouse (secured)