

## **Infant Mortality– Executive Commentary**

I welcome this inquiry as it is such a considered review that highlights and raises awareness of some of the factors leading to infant mortality. This is essential as preventable loss of life is the most devastating consequence a family could ever face.

There is obviously far more we need to do as the review highlights the fact that some of these deaths are preventable through a range of actions and awareness and earlier conversations on lifestyle choices. There is more we need to collectively undertake with our health partners, our communities and with our citizens. The facts as set out in this inquiry are alarming given that in our City the rate of infant mortality is twice the national average, 65% of all deaths in children and young people are infant deaths.

The report sets out both national and local work in reducing infant mortality and the findings set out some excellent work is being delivered to tackle the factors, through the NHS Long term Plan - Saving Babies Lives Care Bundle, our Local Maternity System. There is a need to bring together the various strands of work underway and a focus on influencing, promoting, supporting and encouraging healthier lifestyles and choices is key to this. We need to build on the work and programmes identified and progress action around the four strands approach set out by Professor Salway in the report and on the investment in the areas of Clinical Genetics, community genetic literacy and health visiting.

There is clearly a need for improvements in recording data and sharing datasets and an ability to discuss more openly the higher prevalence of infant congenital abnormalities and consequently an increase in the risks of infant mortality with consanguineous unions. A consanguineous union is union between couples related as second cousins or closer. Consanguineous unions according to the current available datasets equate to a fifth of deaths in the City. Whilst this is a significant factor, it is not the only factor. This is a sensitive issue and there is awareness within the community on the significance of congenital abnormalities and genetics from the datasets available. However, there is a need to understand further with Birmingham being a city with significant health inequalities and there is more we need to do raise awareness and education in supporting women through preconception, throughout pregnancy and post birth. Linked to this area is the need to promote the greater use of services that are already available such as the Clinical Genetics Service.

It is vitally important that we improve awareness of the services provided to help manage pregnancy from start to end. Further knowledge is also required to improve the understanding of pregnancy and positive health choices which are available to ensure the health of mothers and their babies. More work is also needed with women from ethnic minorities in relation to drug and substance misuse; obesity, whilst maintaining good mental and physical health and using stress reduction strategies before becoming pregnant to increase their chances of giving birth to a healthy baby. Thankfully we live in times in which we can more easily reach out to all communities through social media and improved digital technology. The City Council along with our partners will be using many media channels to more effectively to target our communities in promoting healthier life choices and improving access to information and advice which needs to be harnessed.

Sadly, it is clear from this report that infant mortality disproportionately affects the poorest areas of our City and the risk factors include congenital anomalies, multiple pregnancies, socio-economic deprivation, teenage pregnancy, older motherhood, obesity, poor nutrition, drug and alcohol abuse and smoking during pregnancy.

I am committed to taking immediate action on this and will be raising this at a future Health and Wellbeing Board meeting. To address the current trend, there is a need to implement immediate actions as well as developing medium to long term actions. Immediate action is underway, and we have a multi-agency steering group that has been established and work is underway in the development of an action plan to respond to the recommendations of this review. This action needs to be owned by all stakeholders and I am keen that the multiagency taskforce established is reflective of all our key statutory partners and wider community, voluntary and faith representative's - co-production is key to reducing the rates of infant mortality.

This review is vital and essential as it provides an insightful commentary on an important issue within our city. I thank the Health and Social Care Overview and Scrutiny Committee and all the agencies, groups and individuals that contributed to the inquiry. There is a need for collective action, and I am committed to delivering on the recommendations proposed to help us in creating a society where we can significantly reduce infant mortality.



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