

# Fathers, pregnancy, and infant mortality

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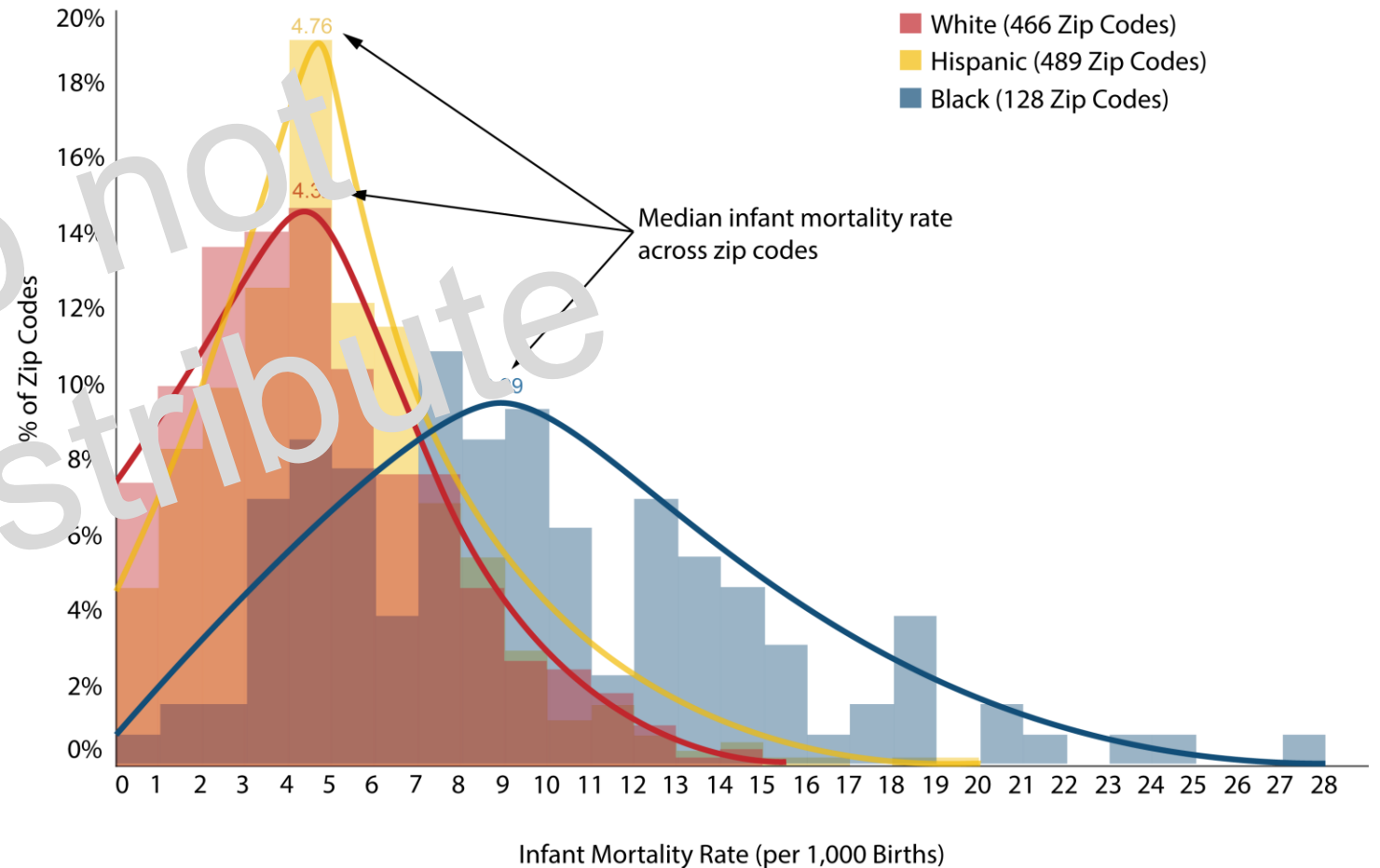
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# Infant mortality

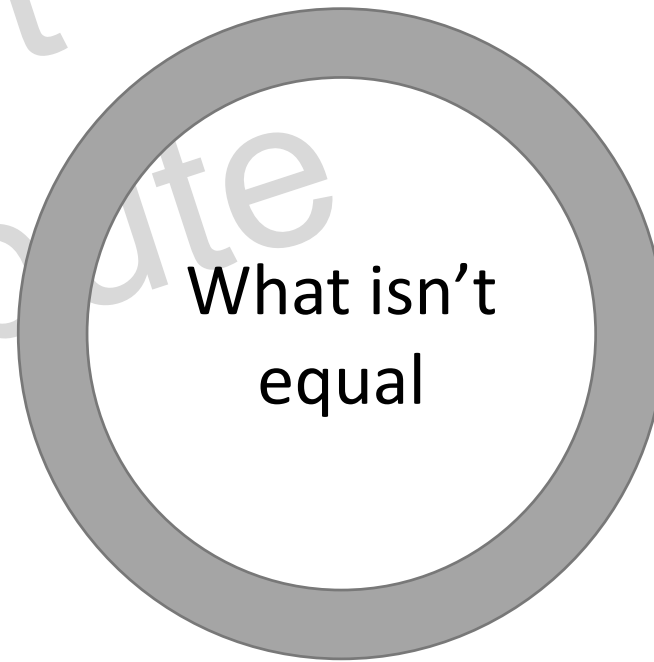
- Death to an infant before their 1<sup>st</sup> birthday
  - Majority of these deaths are within 24 days of the baby's birth
- A rare, but still too common, birth outcome
  - About 5.8 deaths per 1,000 live births in Texas
- Multi-faceted causal chain of events
  - There is almost never ONE thing that leads to death
- Infant mortality reflects the health of the community

# Infant Mortality Disparities

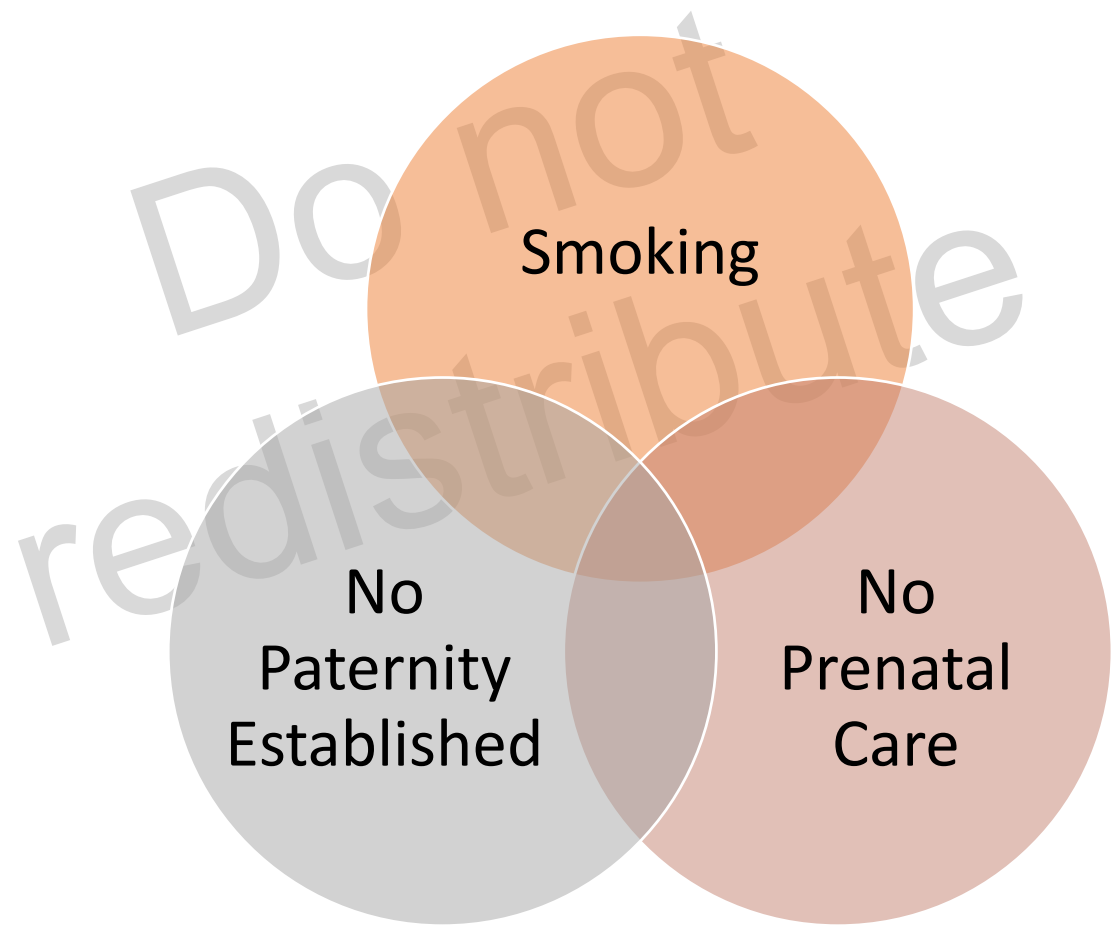
- Substantial race/ethnic disparities
- Substantial geographic disparities



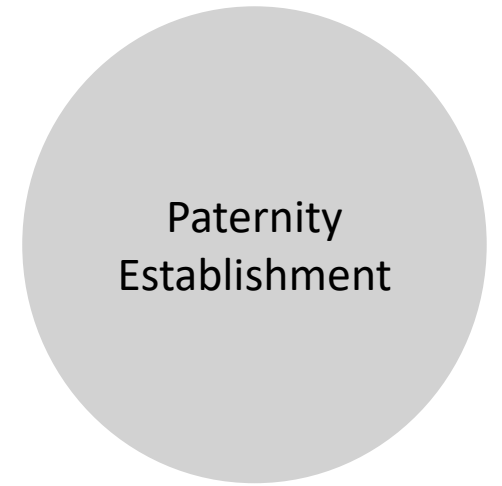
# Disparities and prevention



# Three overlapping points



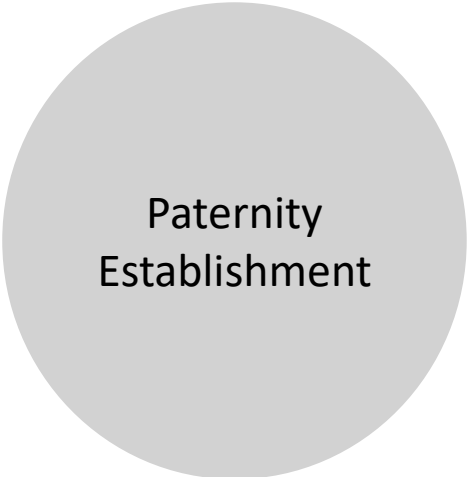
# Baseline Understanding of Paternity Establishment



- 86% – paternity established
  - 67.5% – babies born to a black mother
- 62% – teen births with paternity established
- 80% – paternity establishment for 18-25 year old mothers
  - 54% of babies without paternity establishment are in this age range

# Infant Mortality & Paternity

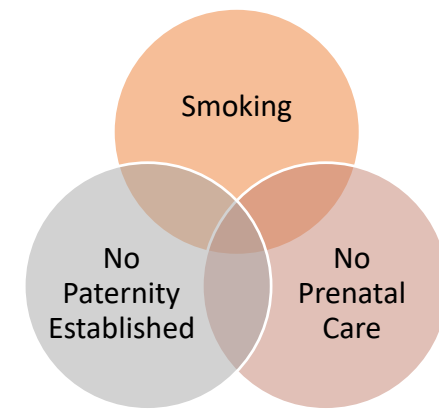
- When paternity is established:
  - IMR\* ~ 5.0 per 1,000
- When paternity is NOT established:
  - IMR ~ 8.5 per 1,000
- Excess deaths associated with paternity establishment
  - ~ 1,000 over 6 years



Paternity  
Establishment

\*Linked birth-death records

# Not just one thing



## Smoking

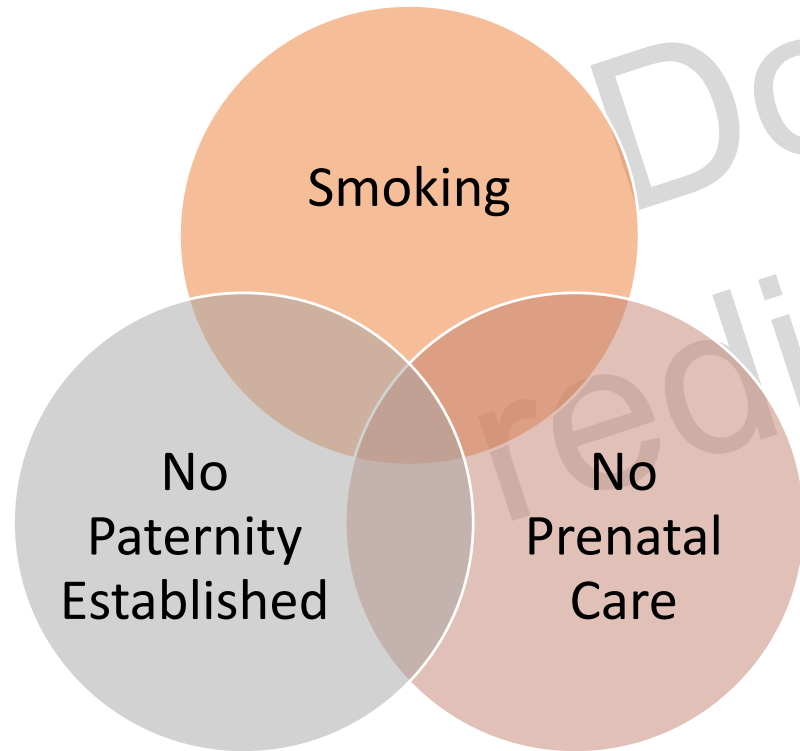
- IMR: smoking but paternity
  - 9.0 per 1,000 babies
- IMR: smoking and no paternity established
  - 10.1 per 1,000 babies
- With paternity
  - 3.7%
- Without paternity
  - 9.1%

## No Prenatal Care

- IMR: no PNC but paternity
  - 16.0 per 1,000 babies
- IMR: no PNC and no paternity established
  - 19.1 per 1,000 babies
- With paternity
  - 2.8%
- Without paternity
  - 8.1%



# What to remember:



- Paternity establishment overlaps with both of these high-risk behaviors
- Lack of established paternity: high-risk behaviors more high-risk
  - Especially seen with prenatal care
- Established paternity: Low-risk behaviors are lower risk

When paternity is established the good things are better

How do we get to making the good things better?

- Paternity establishment does not start at birth
- Paternal involvement does not start at birth
  - It is a journey from conception to birth
- How to we create the environment to make that journey positive?

# Male involvement in pregnancy care systems

## What we know

- Pregnancy affects men biologically, socially, and emotionally
- Men want to be involved
- Men feel underprepared when the baby is born
- Men experience postnatal depression/anxiety, too

## What we don't know

- The percent of men who attend one PNC visit
- What are the external motivating factors to attend PNC visits
- Do men ask questions during PNC visits
- What information “sticks” with men during PNC visits
- What is the best way to present warning signs of complications to men
- Are men being included in PNC visits
- ...

# Engaging Dads Early and Often: Father's Playbook

*Using mobile application*

*<https://fathersplaybook.org/>*

Do not  
redistribute



The University of Texas at Austin  
Center for Health Communication  
Moody College of Communication & Dell Medical School

# Current Modules

## Pregnancy Basics

- Changing Bodies
- Changing Emotions
- Nutrition and wellness
- **Going to Prenatal Exams**
- Twins and Multiples
- Building a Connection with Your Baby

## Preparing for Baby

- Thinking about Finances
- **Birth Preparation**
- **Financial Calculator**
- WIC
- Establishing Paternity
- Setting up the Nursery
- Paternity Leave

## Staying Healthy

- Men Change Too
- **Signs of Depression & Anxiety**
- Helping Your Partner
- Vaccines for Baby
- Vaccines for Mom & Dad
- Building the Team

# Coming content

- Action Plans
  - Developing a plan for the difficult things before they happen
  - Revising your plan after the difficult thing happens
- Postnatal Content
  - Dad and play
  - Dad and reading
  - Dad supporting mom

# COVID-19 and Dads

- Can men attend PNC visits?
  - Are there innovative and best practices we can support
- How are men getting information about pregnancy?
  - What can we do to support quality information seeking
- Are men doing on-line prenatal classes?
  - How can dads get this information

We measure what we value

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