

October

Infant and Pregnancy Loss Awareness Month

#NeverBeStill #InfantandPregnancyLossAwareness #CountTheKicks #SleepOnSide

Nationally, stillbirth claims 1 out every 175 births.¹ While stillbirth occurs in all families of all communities, there are some who are more likely to have a stillbirth occur. In 2021, stillbirth occurred among non-Hispanic Black women two times more often than non-Hispanic Asian or Pacific Islander and White women. These disparities could possibly be attributed to many underlying causes, including access to quality healthcare, preexisting health conditions, and structural discrimination.¹

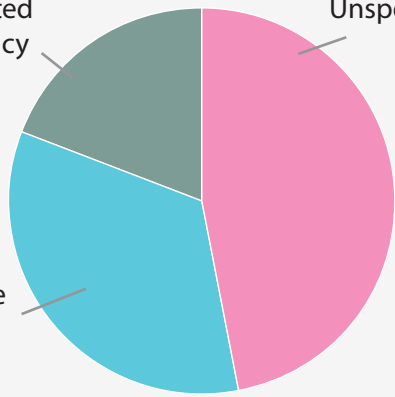
Some factors can include:

- Are of black race
- Are 35 years of age or older
- Are of low socioeconomic status
- Smoke cigarettes during pregnancy
- Have certain medical conditions, such as high blood pressure, diabetes and obesity
- Have multiple pregnancies, such as triplets or quadruplets
- Have had a previous pregnancy loss

Maternal conditions that may be unrelated to present pregnancy
12.6%

Unspecified cause
31.3%

Complications of the placenta, cord and membranes
22.5%



In Kansas, among stillbirths at 20 weeks or more of gestation that occurred in 2017-2021: **31.3%** were attributed to unspecified cause. The second leading cause of fetal death was complications of the placenta, cord and membranes (**22.5%**), followed by maternal conditions that may be unrelated to present pregnancy (**12.6%**).²

In 2021, the perinatal mortality rate was 5.9 (95% CI: 4.6,7.2) per 1,000 live births. The stillbirths at 28 weeks or more of gestation was 3.32 (95% CI: 2.7, 4.0) per 1,000 lives in the same year.² For many families, the cause is unknown.

Some factors can include:



Infection, including syphilis and other sexually transmitted infections



Complications of pregnancy, including being pregnant longer than 42 weeks, trauma or injury, or preexisting health conditions, like autoimmune disorders



Problems with the placenta or umbilical cord



Conditions with the baby's health, such as growth restriction or genetic disorders

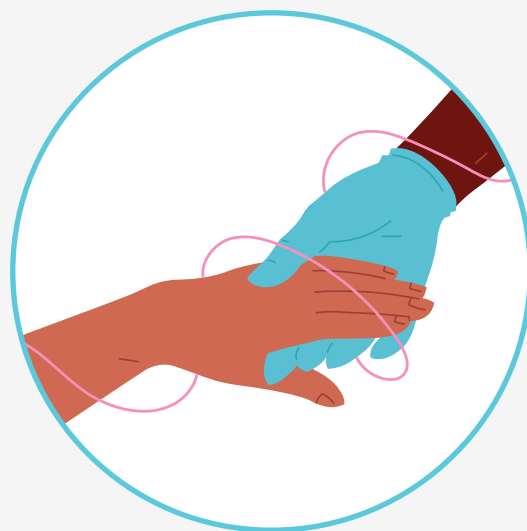
Research indicates that risks for stillbirth were higher in women who had experienced a major traumatic event within the past year including, emotional, financial, or partner related event.³ These toxic stressors could be one of the many combinations of factors that creates such disparities. Toxic stress particularly impacts women and disproportionately impacts women of color.⁴



On average, Kansas loses 190 babies per year to stillbirth.⁵ Implementing Count the Kicks[®] has the potential to **save an average of 61 babies per year.**¹ Educating pregnant persons on the importance of side sleeping has the potential to **halve** their risk of stillbirth.⁶

As providers, certain action steps can be taken to help improve outcomes, including:

- Implement a protocol to introduce Count the Kicks[®] with every patient as a standard of care procedure.
- Educate every patient about the importance of side sleeping from 28 weeks of pregnancy.
- Encourage communication between your patients and staff. Use rewarding language and positioning.
 - Examples could include, “We’d much rather you contact our office multiple times and have nothing be wrong, than not contact us and something be wrong.” It’s important that all staff, including the front desk and those who answer your phone lines, are educated and trained.
- Support families through accessibility of healthcare appointments.
- Complete comprehensive screenings and referrals, including pregnancy intention screening.
- Support breastfeeding by modeling policies in your own workplace.



When a family experiences the loss of a baby from stillbirth or perinatal death, provide individualized support at every step. Use compassionate client-centered language. If you are able, offer to provide alternative waiting areas. Work with your staff and electronic medical records tool to indicate the loss and avoid unintentional exasperation of grief. Offer referrals for grief support by utilizing the below loss and grief resources.

If you are a provider in need of resources to treat perinatal mental health or substance use disorder, contact the Kansas Perinatal Psychiatric Consult line at 833-765-2004 or online at bit.ly/ProviderConsult.

If you are a grieving family in need of support, please contact 1-833-TLC-MAMA (1-833-852-6262).

Resources

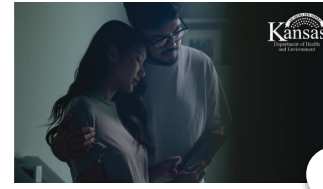
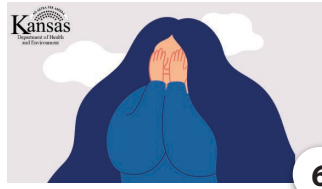
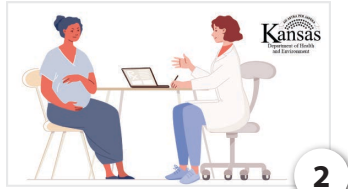
- [KDHE Fetal Monitoring Movement Toolkit](#)
- [Count the Kicks[®] Materials Order Store](#)
- [Star Legacy's About Stillbirth](#)
- [Stillbirth Centre of Research Excellence's Sleep On Your Side Campaign](#)
- [CDC Stillbirth Information and Resources](#)
- [Push Pregnancy Awareness Campaign](#)
- [March of Dimes Information and Resources](#)
- [Kansas Perinatal Psychiatric Consult Line for Consult Training, and Referrals](#)
- [RHNTC Client-Centered Reproductive Goals](#)
- [AAP's Fetal, Infant, and Perinatal Death Terminology](#)

Grief Support Resources

- [Grief Peer Support for Physicians](#)
- [PSI Loss and Grief in Pregnancy and Postpartum](#)
- [KIDS Network Grief Support Resources](#)

Social Media Posts

Click the images below to download and use to spread awareness about Stillbirth Awareness Month on your social media. The images are high quality and are free to download for non-commercial use only.



Post 1

1 in 175 pregnancies in the United States result in stillbirth. Monitoring fetal movement through #CounttheKicks can help reduce your risk. Download the APP and start counting today. Learn more at [CounttheKicks.org](https://www.CounttheKicks.org).

#InfantandPregnancyLossAwareness #NeverBeStill #CountTheKicks #SleepOnSide

1 de cada 175 embarazos en los Estados Unidos resulta en muerte fetal. Monitorear el movimiento fetal a través de #CounttheKicks puede ayudar a reducir su riesgo. Descargue la APP y empiece a contar hoy mismo. Aprenda más en: [CounttheKicks.org](https://www.CounttheKicks.org). #countthekicks #infantandpregnancylossawareness #NeverBeStill #CountTheKicks #SleepOnSide

Post 2

#AlwaysAsk. If you detect any change in movement contact your provider or go to the nearest emergency department. Download Count the Kicks App and talk with your provider about fetal monitoring. Learn more at [CounttheKicks.org](https://www.CounttheKicks.org).

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#AlwaysAsk. Si detecta algún cambio en el movimiento de su bebé, comuníquese con su proveedor o acuda al departamento de emergencias más cercano. Descargue la aplicación Count the Kicks y hable con su proveedor sobre el monitoreo fetal. Aprenda más en: [CounttheKicks.org](https://www.CounttheKicks.org). #infantandpregnancylossawareness#NeverBeStill #CountTheKicks #SleepOnSide

Post 3

Research shows that going-to-sleep on your side from 28 weeks of pregnancy can halve your risk of stillbirth, compared to going-to-sleep on your back. Learn more at stillbirthcre.org.au/parents/safer-baby/going-to-sleep-on-your-side-from-28-weeks. #SleepOnSide

Las investigaciones demuestran que dormir de lado a partir de las 28 semanas de embarazo puede reducir el riesgo a la mitad de la muerte fetal, en comparación de dormir boca arriba. aprende más en: stillbirthcre.org.au/wp-content/uploads/2021/03/Side_Sleep_Flyer_Spanish.pdf. #SleepOnSide

Post 4

October is Pregnancy and Infant Loss Awareness Month. We honor those who have experienced a loss no family should have to endure. Learning to live with grief isn't a linear process. There is support available to families experiencing the tragedy of stillbirth and infant loss. 1-833-TLC-MAMA (1-833-852-6262). postpartum.net/get-help/loss-grief-in-pregnancy-postpartum

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Octubre es el Mes de Concientización sobre las Pérdidas Gestacionales y Neonatales. Honramos a aquellos que han experimentado una pérdida que ninguna familia debería tener que soportar. Aprender a vivir con el duelo no es un proceso lineal. Hay apoyo disponible para las familias que experimentan la tragedia de la muerte fetal y la pérdida de un bebé. 1-833-TLC-MAMA (1-833-852-6262). postpartum.net/get-help/loss-grief-in-pregnancy-postpartum

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Post 5

Health disparities or differences in health outcomes are tragically present in stillbirth rates across the United States. More research is needed to better understand these disparities. Being a person of color is not a cause of having a stillbirth. Black women experience stillbirth at twice the rate of other groups. American Indian and Alaskan Native women experience disproportionate stillbirth rates compared to other groups. Working to end inequities in community resources and living conditions can reduce toxic stressors and improve health outcomes. Learn more at marchofdimes.org/find-support/topics/-miscarriage-loss-grief/stillbirth #InfantandPregnancyLossAwareness #NeverBeStill #CountTheKicks #SleepOnSide

Las disparidades de salud o las diferencias en los resultados de salud están trágicamente presentes en las tasas de mortalidad de Estados Unidos. Se necesita más investigación para comprender mejor estas disparidades. Cualquier mujer puede tener un mortinato. Las mujeres Afroamericanas experimentan mortinatos al doble de la tasa de otros grupos. Las mujeres indioamericanas y nativas de Alaska tienen tasas de mortinatos desproporcionadas en comparación con otros grupos. Trabajar para poner fin a las desigualdades en los recursos y las condiciones de vida de la comunidad puede reducir los factores estresantes tóxicos y mejorar los resultados de salud. Aprenda más en: marchofdimes.org/find-support/topics/-miscarriage-loss-grief/stillbirth #infantandpregnancylossawareness #NeverBeStill#CountTheKicks #SleepOnSide

Post 6

Everyday in the United States 65 babies are born still. That's 22,300 babies a year. That's 22,300 families who have cribs that were never slept in, car seats that were never used, and grief that deserves to be acknowledged and shared. While not every stillbirth is preventable there are steps that can be taken to improve outcomes. Learn more at Healthybirthday.org. #InfantandPregnancyLossAwareness #NeverBeStill #CountTheKicks #SleepOnSide

Cada día en los Estados Unidos nacen 65 bebés muertos. Eso es, 22.300 bebés al año. Son 22,300 familias que tienen cunas en las que nunca se ha dormido un bebé, asientos de seguridad que nunca se usaron y un dolor que merece ser reconocido y compartido. Si bien no todas las muertes fetales se pueden prevenir, hay medidas que se pueden tomar para mejorar los resultados. Aprenda más en: Healthybirthday.org. #infantandpregnancylossawareness #NeverBeStill #CountTheKicks #SleepOnSide

Post 7

Stillbirth deeply effects the entire family. Fathers may feel conflicted in expressing their grief or may be overcome with fear for their partner. Virtual support for bereaved parents, fathers, grandparents, and parenting after loss can be found at starlegacy-foundation.org/support-groups. The National Maternal Mental Health Hotline can be used for ANY PERSON touched by pregnancy or infant loss. 1-833-TLC-MAMA or (1-833-852-6262). #InfantandPregnancyLossAwareness #NeverBeStill #CountTheKicks #SleepOnSide

La muerte fetal afecta profundamente a toda la familia. Los padres pueden sentirse en conflicto al expresar su dolor o pueden sentirse abrumados por el miedo por su pareja. El apoyo virtual para padres, abuelos y padres en duelo después de una pérdida se puede encontrar en: starlegacyfoundation.org/support-groups. La Línea Directa Nacional de Salud Mental Materna puede utilizarse para CUALQUIER PERSONA afectada por el embarazo o la pérdida de un bebé. 1-833-TLC-MAMA o (1-833-852-6262). #infantandpregnancylossawareness #NeverBeStill #CountTheKicks #SleepOnSide



¹Centers for Disease Control and Prevention. Stillbirth. May 15, 2024 https://www.cdc.gov/stillbirth/about?CDC_AAref_Val=https://www.cdc.gov/ncbddd/stillbirth/facts.html

²Kansas Infant Mortality and Stillbirth Report, 2021. (2021). <https://www.kdhe.ks.gov/DocumentCenter/View/29631/Infant-Mortality-Report-2021-PDF>

³U.S. Department of Health and Human Services. (n.d.-b). *What are possible causes of stillbirth?*. Eunice Kennedy Shriver National Institute of Child Health and Human Development. <https://www.nichd.nih.gov/health/topics/stillbirth/topicinfo/causes#:~:text=Problems%20with%20the%20placenta%2C%20such%20as%20insufficient%20blood%20flow,&text=These%20were%20the%20leading%20causes,and%20skull%20fails%20to%20develop>

⁴President, J. C. V., Cusick, J., President, V., Director, S. N. A., Nadeau, S., Director, A., Gordon, Director, P., Gordon, P., Director, Director, J. P. S., Parshall, J., Director, S., Shepherd, Director, M., Shepherd, M., Director, E. L. A., Lofgren, E., Rapfogel, N., Khattar, R., & Buchanan, M. J. (2023, August 30). *The unequal toll of toxic stress*. Center for American Progress. <https://www.americanprogress.org/article/unequal-toll-toxic-stress/>

⁵Kansas. *Count the Kicks*. (2023, August 28). <https://countthekicks.org/statistics/ks/>

⁶Stillbirth Centre of Research Excellence. *Going to sleep on your side from 28 weeks*. Retrieved on September 9, 2024 <https://stillbirthcre.org.au/parents/safer-baby/going-to-sleep-on-your-side-from-28-weeks/#:~:text=Research%20shows%20that%20going%20to,oxygen%20supply%20to%20your%20baby>.