

Child Deaths in Idaho

Calendar Year 2017

Findings from the Idaho Child
Fatality Review Team

Reported February 2020

In 2017, **187** children under the age of 18 died in Idaho. Cases were screened by the subcommittee and selected for full review when one or more of the following criteria were met:

1. Death was due to an external cause
2. Cause of death was unexplained
3. Death was due to a cause with identified risk factors



		Screened by CFR Subcommittee	Reviewed by CFR Team
Perinatal Conditions	37	37	14
Congenital Malformations	33	33	0
Unintentional Injuries (Accidents)	47	47	47
Suicide	20	20	20
Unexplained Infant Death	9	9	9
Assault (Homicide)	7	7	5
Malignancies	6	6	0
Flu/Pneumonia	0	0	0
Non-ranking/All Other Causes	28	28	4
	187	187	99

Unintentional Injuries (Accidents)

There were **47** accident deaths to children. Of these, **24** were motor vehicle accidents. Excess speed, impaired driving, failure to maintain lane, and failure to stop or yield were leading contributing causes. Improper or non-usage of safety restraints (seat belts or proper child safety seats) was a major modifiable risk factor in these motor vehicle deaths.

Other causes of accident deaths included drowning (**11**), fire or carbon monoxide inhalation (**4**), overdose (**2**) and firearms (**1**).

Sudden Unexplained Infant Death

Sudden Unexpected Infant Death (SUID) is the sudden death of an infant under one year of age, which remains unexplained after a comprehensive investigation.

There were **8** SUID plus **1** infant death of “undetermined” cause in 2017. Unsafe sleep environment (including thick bedding, cluttered beds, and co-sleeping) and improper sleeping position were commonly seen risk factors. Many of the deaths occurred in families with a history of CPS referrals for unsafe home environment or alleged neglect. Continued promotion of American Academy of Pediatrics (AAP) safe sleep guidelines, scheduled immunizations, and breastfeeding is recommended. Additional investments in family support services and mental health resources may prevent infant deaths.

Intentional Injuries (Suicide and Homicide)

Idaho’s youth suicide rate increased in 2017 and is historically much higher than the national rate. There were **20** suicides occurring in Idaho in 2017. Those who died were predominantly male with ages ranging from 13 to 17 years. The most common method was firearms, followed distantly by hanging.

Access to a weapon, past suicidal ideation/attempts, and relationship turmoil were the most commonly observed precursors to these suicides.

The team reviewed **5** child deaths which were conclusively ruled as homicides (2 cases were deferred due to pending litigation) along with **2** other deaths of undetermined manner

which were investigated as possible homicides. The victims ranged in age from infants to teens.

Causes included firearm shootings, blunt force head injury, and hyperthermia. Family history of substance abuse, mental health issues, criminal behavior and recent divorce were among the top risk factors observed. The large proportion of homicides involving a parent with a history of mental health concerns highlights the need for improved access to mental health resources, especially in rural communities. Interagency cooperation can help ensure that at-risk families receive the

From CFR Team’s “Key Recommendations”

Improving access to quality mental health services and reducing social stigma of seeking care may help prevent suicide and homicide deaths as well as some accidental deaths resulting from inadequate supervision.

Natural Manner Deaths

The CFR team reviewed **14** perinatal condition deaths from 2017. Nearly all were related to low birth weight and/or prematurity. Lack of prenatal care, maternal smoking, drug abuse and home births were repeatedly observed as modifiable risk factors.

In reviewing *all* causes of death, there were a total of **3** deaths to infants whose parents delayed or refused medical care because of

religious or personal beliefs. The team determined that these deaths might have been prevented with timely medical treatment, scheduled immunizations and/or proper prenatal care.

None of the 2017 deaths were attributed to the influenza virus. Even so, proper hygiene and scheduled vaccinations (including an annual flu shot) can prevent the spread of infections which lead to severe illness and are especially important for medically vulnerable infants and children.

FOR METHODOLOGY and COMPLETE REPORT OF FINDINGS AND RECOMMENDATIONS SEE:
www.idcartf.org

