In an effort to understand existing child deaths and prevent future deaths, Illinois’ Child Death Review Teams (CDRTs) meet quarterly to systematically review the circumstances of certain child deaths and make recommendations to the Department of Children and Family Services (DCFS). As part of this effort, DCFS and the CDRT Executive Council collaborate with the Children and Family Research Center at the University of Illinois to publish and disseminate an annual report that examines child deaths in Illinois (Illinois Department of Children and Family Services, 2020). This research brief, the third in a series that highlights the important work of the CDRTs in Illinois, uses data from the annual CDRT reports to examine trends in child deaths over the past decade. This effort can highlight areas where additional efforts in prevention and intervention are needed or illuminate areas in which policy and practice changes may be working to reduce deaths.

**Total Child Deaths and Child Deaths by Age**

Nationally, child death rates have declined dramatically since 1980, with the biggest declines seen among infants less than one year of age: from 1,288 per 100,000 in 1980 to 567 per 100,000 in 2017, the lowest rate on record. During this same time period, death rates for children ages one to four years dropped from 64 to 24 per 100,000, rates among children age 5 to 14 years dropped from 31 to 14 per 100,000, and rates for youth age 15 to 19 years declined from 98 to 45 per 100,000 (Child Trends DataBank, 2019). Similar to the national trend, the total number of child deaths in Illinois has decreased over the past decade from a high of 1,692 in 2010 to a current low of 1,398 in 2018 (see Figure 1).
Number of child deaths between 2009 and 2011 were those reported to the Illinois Department of Public Health (IDPH) before data were consolidated with DCFS in 2012.

Figure 2 shows the number of child deaths in Illinois reported to the CDRTs from 2009 to 2018, examined by child age. Most notably, and similar to the national data, the vast majority of child deaths each year occur among infants under one year of age. However, the number of deaths among children in this age group has generally decreased in recent years.
Child Deaths by Manner of Death

Manner of death is a categorization used by medical examiners, coroners, and physicians when completing a death certificate to clarify the circumstances of death. In most states, including Illinois, manner of death is classified into one of five categories: natural causes, accident, homicide, suicide, and undetermined. Figure 3 shows the number of child deaths by manner of death from 2009 through 2018. The majority of child deaths in Illinois are due to natural causes, and there has been a decrease in these deaths in recent years. The numbers of deaths due to accidents, homicides, suicides, and undetermined causes are much smaller and have been relatively stable over the ten-year period.

*Deaths reported to the CDRTS.

Child Deaths by Category of Death

The CDRT Executive Council has identified 13 categories of death that are used during their reviews, along with categories for undetermined and “other” deaths. Category of death is used to describe what caused the death. For example, if a teenager died after being accidentally shot while hunting, the manner of death would be “accident” and the category of death would be “firearm.” Trends in the numbers for the most common categories of death are shown in Figure 4. The most common category of death in 2018 was premature birth; there has been no clear increasing or decreasing trend in the number of child deaths due to prematurity in the last ten years. The second most common category of death in 2018 was illness (473 deaths); the number of illness deaths have seen a decline in the past decade. There has been no clear trend in the number of deaths due to suffocation and vehicular accidents in the last decade. Firearm
deaths have shown an overall increase in recent years; the number of deaths due to firearms was over 100 in three of the past five years for which data is available. One category that has seen a significant decrease is deaths due to Sudden Infant Death Syndrome (SIDS), which have declined from 47 in 2010 to only 2 such deaths in 2018. This decline corresponds with the Back to Sleep campaign and other similar efforts to avoid any obstruction to infant airways.

*Deaths reported to the CDRTS.

**Conclusion**

The number of child deaths has dropped by about 14% from 2009 to 2018. When trends in Illinois child deaths are examined by age groups, the biggest decrease has occurred among children under 1 year, which have dropped by about 12% since 2010. The Illinois Department of Human Services’ (IDHS) integrated delivery of the Family Case Management Program (FCM) and Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) is aimed at reducing the number of child deaths. These two programs served an average of 36% of all infants and 76% of Medicaid-eligible infants born in Illinois in the 2013 and 2014 calendar years. In addition, IDHS supplements the aforementioned statewide programs with services such as Better Birth Outcomes for women at risk of giving premature birth, who are also at higher risk of having their infants die before their first year of life (Illinois Department of Human Services, 2017). It is possible that these programs aimed at improving maternal and child health may have had an impact in reducing child deaths. Recent increases in the number of deaths due to firearms suggest that new prevention campaigns may be needed in this area.
Recommended Citation

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Related Publications


References
