Sudden Unexpected Infant Death (SUID) explains the 4,500 infant deaths a year under the age of 1 year, many of which could be prevented with safe sleep practices (CDC). Major national risk factors include unsafe sleep locations and positions, low socioeconomic status, low maternal education level, male sex, and African American race.

In Allegheny County, 132 SUIDs occurred from 2007 through 2016, averaging 13 per year. The average SUID rate for Allegheny County was 1 per 1,000 residents aged ≤ 1 year. The psychological and emotional impact of a single SUID on family and community is significant. Many infant safe sleep deaths can be prevented by following safe sleep recommendations: sleeping alone, on their backside, on a firm-surface, and in an uncluttered crib.

In Allegheny County, between 2007 and 2016:
- 132 infants ≤ 1 year died from SUID.
- 58% of infants dying from SUID were African Americans - 30% were African American males.
- The SUID rate was 5.8 times higher for African Americans than for whites.
- 40% of infant safe sleep deaths occurred in adult beds (n=54).

*S2010 population data was used in place of 2011-2016 population data for ≤ 21 years.*
Allegheny County
Child Death Review
Team Recommendations

Support Current ACHD Initiatives:

• Promote safe sleep education in Allegheny County WIC offices.
• Collaborate with Cribs for Kids to increase targeted infant safe sleep public education campaigns in Allegheny County.

Additional Recommendations:

• Establish a standard protocol where all caregivers with a positive drug screen receive a referral to treatment and/or social support services.
• Utilize City of Pittsburgh EMS staff to identify homes lacking safe sleeping places for infants and provide a Pack N Play from Cribs for Kids.

Safe Sleep for Infants by Incident Sleep Place, 2007-2016

<table>
<thead>
<tr>
<th>Sleep Place</th>
<th>2007-2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adult Bed</td>
<td>40%</td>
</tr>
<tr>
<td>Couch</td>
<td>27%</td>
</tr>
<tr>
<td>Crib</td>
<td>22%</td>
</tr>
<tr>
<td>Bassinet</td>
<td>4%</td>
</tr>
<tr>
<td>Playpen</td>
<td>4%</td>
</tr>
<tr>
<td>Carseat</td>
<td>2%</td>
</tr>
<tr>
<td>Floor</td>
<td>1%</td>
</tr>
</tbody>
</table>

Infant Safe Sleep Deaths Risk Factors Identified by the ACCDRT Include:

• Infant sleeping on side or stomach
• Infant bed sharing
• Unsafe sleep locations, including adult beds, couches and chairs
• Infant sleeping on soft surfaces or with items in crib

Allegheny County Child Death Review: Infant Safe Sleep

2018
In the U.S., youth violence is a leading cause of injury and death for young people. On average, 13 people under the age of 24 years are murdered each day in the U.S. An additional 1,600 children and young adults visit our hospitals each day for non-fatal violence-related injuries.

In Allegheny County, 299 youth homicides occurred from 2007 through 2016, for an average of 30 per year or 9.7 homicides per 100,000 residents ≤ 21 years. The rate of homicide in Allegheny County was highest among African American males aged 15 to 19 at 188 per 100,000 African American male residents. The psychological and emotional impact of a single homicide on family and community is significant. Though homicide is a complex issue, it is preventable and requires a multi-faceted approach to reduce neighborhood violence, build partnerships with law enforcement, and expand the role of programs for at-risk youth and their families.

In Allegheny County from 2007 through 2016:

- 299 youths ≤ 21 years of age died from homicide.
- 85% of these homicide victims were African Americans - 75% were African American males.
- The youth homicide rate was 22 times higher for African Americans than for whites.
- 55% of homicides occurred in youth aged 15-19 years (n=163).
- 86% of all homicides in youth were caused by firearms.

*2010 population data was used in place of 2011-2016 population data for ≤ 21 years.
Allegheny County Child Death Review Team Recommendations

Support Current ACHD and DHS Initiatives:

• Reduce drug trade by reducing the demand for illegal drugs in Allegheny County, by investing in treatment programs and monitoring the prescribing of medications which may lead to addiction.

• Identify and implement evidence based programs geared towards reducing community violence and providing mentorship to children.

Additional Recommendations:

• Expand the court’s role in Allegheny County in identifying at risk children and both providing and maintaining support to the same.

• Promote responsible firearm storage and ownership.

• Expand the role of programs such as the Center for Victims in working with families of victims.

• Promote collaboration between law enforcement and the community.

Homicide Risk Factors Identified by the ACCDRT Include:

• Criminal history

• Problems in school

• History of substance abuse

• Family disruption

• Mental illness

• Caregiver with a criminal history
Injury is the leading killer of children and teens in the United States, and represents nearly 40% of all deaths among children ages 1 to 19 years (CDC, 2012). The CDC reports that motor vehicle accidents are the leading cause of unintentional injury deaths among youth.

In Allegheny County, 102 motor vehicle crash deaths among persons ≤ 21 years occurred between 2007 and 2016, for an average of 10 per year or 3.2 deaths per 100,000 residents ≤ 21 years. The psychological and emotional impact of a single motor vehicle death on family and community is significant. Though motor vehicle death is a complex issue, it can be prevented with a multi-faceted approach to increase public awareness and education about safety measures for at-risk youth.

**In Allegheny County, from 2007 through 2016:**

- 102 youths ≤ 21 years died from motor vehicle accidents.
- 60% of youths dying from motor vehicle accidents were white males (n=61) – 18% were African American males (n=12).
- Youth motor vehicle deaths were 2.2 times higher for males than for females.
- 32% of motor vehicle deaths were in youths aged 20-21 (n=37).

*2010 population data was used in place of 2011-2016 population data for ≤ 21 years.*
Allegheny County Child Death Review Team Recommendations

Support Current ACHD Initiatives:
- Increase public awareness of the relationship between alcohol and motor vehicle crashes.
- Increase public awareness of free motorcycle safety classes which offer free helmets to the public.
- Disseminate information about traffic safety initiatives to the public.

Additional Recommendations:
- Increase public awareness of the relationship between drowsy driving and motor vehicle crashes.
- Increase public awareness of free motorcycle safety classes which offer free helmets to the public.
- Install cameras with real time viewing in areas where multiple crashes have occurred.
- Elevate the third offense for underage drinking to a misdemeanor.
- Promote a Pennsylvania primary seatbelt law.
- Increase DUI check points.

Motor Vehicle Crash Risk Factors Identified by the ACCDRT Include:
- Underage drinking and impaired driving
- Drowsy driving
- Lack of helmet/head protection on motorcycles and all terrain vehicles
- Not using safety restraints such as seat belts, car seats, or booster seats
- Speeding

Motor Vehicle Death Rate by Race, 2007-2016

Motor Vehicle Death Rate per 100,000 Allegheny County Residents ≤ 21 Years by Race, 2007-2016

Motor Vehicle Crash Risk Rate per 100,000 Allegheny County Residents ≤ 21 Years by Race, 2007-2016
In 2015, more than 33,000 deaths were attributed to opioids in the U.S., which was the highest number per year ever recorded (CDC). This number of deaths involving prescription opioid and illegal opioids such as heroin and fentanyl was 5 times higher than in 1999. The CDC reports that the rate of overdose death in youth is highest among white males ages 16-21. On average, 115 Americans die every day from an opioid overdose (CDC).

In Allegheny County, 109 youth overdoses occurred from 2007 through 2016 for an average of 11 per year. The average overdose rate for Allegheny County was 3.5 overdoses per 100,000 residents aged 0-21 years. The psychological and emotional impact of a single overdose death on family and community is significant. Though overdose is a complex issue, it is preventable and requires a multi-faceted approach to increase access to treatment and promote overdose prevention education for at-risk youth and their families.

Among those aged 0-21 years in Allegheny County, from 2007 through 2016:

- 109 persons died from accidental drug overdose.
- Overdose was the leading cause of unintentional deaths.
- 93% of those who overdosed were white - 70% were white males.
- The overdose rate was 3.1 times higher for whites than for African Americans.
- 58% of all drugs involved (n=129) – 38% of opiates were heroin (n=49).
Support Current ACHD and DHS Initiatives:

- Provide universal access to naloxone and overdose prevention education.
- Improve access to treatment and create opportunities for easy access to treatment on demand.
- Promote and increase prescription drug disposal sites in Allegheny County.
- Improve knowledge and utilization of medication-assisted treatment (MAT).

Additional recommendations:

- Store substances safely using controlled-substances lockboxes where children can’t access them.
- Perform evidence-based screening for unhealthy substance use in schools and healthcare settings.
- Promote and communicate the importance of calling 911 in the event of an overdose.
- Train school staff and students about overdose risks and the use of naloxone.
- Assist student health care centers in obtaining naloxone for on-campus use.

Substances Involved in Youth Overdose Deaths
Allegheny County, PA 2008-2016

Top 8 Specific Drugs Involved in Overdoses Among Allegheny County Residents ≤ 21 Years, 2008-2016

- Heroin: 29%
- Alprazolam: 22%
- Cocaine: 11%
- Fentanyl: 9%
- Morphine: 9%
- Oxymorphone: 5%
- Methadone: 5%
- Oxycodone: 4%
- Other Drug: 2%

*Cocaine and alprazolam are the only specified drugs that are not opiates.

Overdose Risk Factors Identified by the ACCDRT Include:

- History of substance abuse
- History of chronic physical or behavioral Illness
- Criminal history
- Caregiver with a history of chronic physical or behavioral health illness
- Caregiver with a history of substance abuse

Allegheny County Child Death Review Team
Working together to promote the safety and well-being of children and to reduce preventable child fatalities
In the U.S., suicide is a significant public health problem that affects youth of all ages. According to CDC, suicide is the third leading cause of death for youth between the ages of 10 and 24.

In Allegheny County, 93 youth suicides occurred from 2007 through 2016, for an average of 9 per year or 3 suicides per 100,000 residents aged 0-21 years. The impact of suicide on victims, survivors, and social and familial networks is significant. Though suicide is a complex issue, it is preventable and requires a multi-faceted approach to identify, destigmatize, and increase public awareness for youths at risk.

In Allegheny County from 2007 through 2016:
- 93 youths ≤ 21 years of age died from suicide.
- 77% of youth suicides were committed by males– 57% were by white males.
- Hanging (43%) and firearms (41%) were the two most common methods of suicide in youth.

Suicides Among Allegheny County Residents ≤ 21 Years by Residence, 2007-2016

Suicides Among Allegheny County Residents ≤ 21 Years by Sex, 2007-2016

Suicide Rate per 100,000 Allegheny County Residents ≤ 21 Years by Race, 2007-2016

*2010 population data was used in place of 2011-2016 population data for ≤ 21 years.
Allegheny County Child Death Review Team Recommendations

Support Current ACHD and DHS Initiatives:

• Implement school-based interventions that destigmatize mental health disorders and promote resilience.

• Increase public awareness of mental illness and suicide prevention utilizing Youth Mental Health First Aid.

• Co-locate physical and behavioral health services to provide greater access.

Additional Recommendations:

• Increase the utilization of evidence-based interventions, such as Signs of Suicide (SOS) and Youth Aware of Mental Health (YAM).

• Improve communication between health care providers, behavioral health care providers, school counselors, child welfare workers, and family members.

Suicide by Manner
Allegheny County, PA 2007-2016

<table>
<thead>
<tr>
<th>Manner</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hanging/Suffocation</td>
<td>43%</td>
</tr>
<tr>
<td>Firearm</td>
<td>41%</td>
</tr>
<tr>
<td>Drugs/Poison</td>
<td>10%</td>
</tr>
<tr>
<td>Falling/Jumping</td>
<td>2%</td>
</tr>
<tr>
<td>Other</td>
<td>4%</td>
</tr>
</tbody>
</table>

Suicide Risk Factors Identified by the ACCDRT Include:

• History of behavioral health involvement
• History of chronic illness or disability
• Problems in school
• Criminal history