Title: Factors Contributing to Non-Compliance and Their Effect on Infant Mortality Rates: Residents’ Perspectives

Purpose: The state of Ohio itself is ranked 47th of the 50 states in infant mortality, some of the highest rates being in the Canton area, and a very distinct racial disparity in infant mortality has been found in Northeast Ohio. The purpose of this study is to determine what steps are needed to improve Ob/gyn and pediatric residency education and patient care in order to acknowledge and act toward the reduction of infant mortality, and to examine the levels of moral distress pertaining to this issue in Northeast Ohio.

Methods:

Anonymous as well as confidential focus groups and surveys were conducted with Ob/Gyn residents at two local hospitals, Summa Akron City Hospital and Aultman Hospital, and an electronic survey was sent out to a third, Akron Children's Hospital Pediatrics residents (n=?), to explore the perceptions and biases that residents share about the rising infant mortality rates in their communities. Up to 20 individuals per site participated in the survey, and up to 10 participants from each of the two Ob/Gyn programs participated in the focus group. The focus groups were then transcribed and analyzed via thematic analysis to uncover shared beliefs, sentiments, and experiences among the groups.

Results:

Preliminary results from the focus groups show that these residents already possess many vivid recollections of instances of infant mortality. Many also demonstrate and report frustration pertaining to their inability to reach certain populations or change socioeconomic factors they believe contributed to poor outcomes within their patient population. They describe many programs already in place intended to improve patient compliance and outcomes; however, these programs are often not discussed during a patient visit unless the patient specifically inquires, potentially limiting their benefit.

Conclusions (Anticipated):

Residents likely carry unconscious biases related to their perceptions of and experiences with infant mortality, elucidated within this study via thematic analysis, that can negatively impact their interactions with patients. Further research into physician perspectives and biases is certainly required, but these findings coupled with socioeconomics and other related variables limits the success of interventions and could prevent improvement of the infant mortality rates within these vulnerable groups.