

Safe Infant Sleep: Reducing the Risk of Sudden Infant Death Syndrome and Other Sleep-Related Causes of Infant Death

Satellite Conference and Live Webcast
Thursday, August 4, 2016
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Produced by the Alabama Department of Public Health
 Video Communications and Distance Learning Division

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Safe to Sleep® Campaign
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National Trends for SUID

- The number of US sleep-related SUID cases, including SIDS, is approximately 3,500 deaths per year
- Since the Safe to Sleep® (formerly Back to Sleep) campaign launched in 1994, the overall United States SIDS rate declined by more than 60%; the proportion of infants placed on their backs to sleep increased from 27% in 1993 to 74% in 2011

Source: CDC, Division of Reproductive Health

National Trends for SUID

- Incidence of deaths attributed to accidental suffocation, strangulation, overlay, and entrapment have quadrupled since 1984
- Although the decline in SIDS rates was significant between 1994 and 1999, the rates have leveled out in recent years

Source: CDC, Division of Reproductive Health

National Trends for SUID

- CDC has developed national guidelines for infant death investigations but they are not uniformly implemented on a national level

Source: CDC, Division of Reproductive Health

What are some risk factors for SUID/SIDS?

SUID / SIDS Risk Factors*

- Sleep Position:

- Babies who are put to sleep on their tummies are at 5 times greater risk
- Babies who are used to sleeping on their backs, but who are then placed to sleep on their stomachs, are at 7 to 8 times greater risk

*For a complete list of risk factors, please visit: <https://www.nichd.nih.gov/sts/about/risk/Pages/factors.aspx>

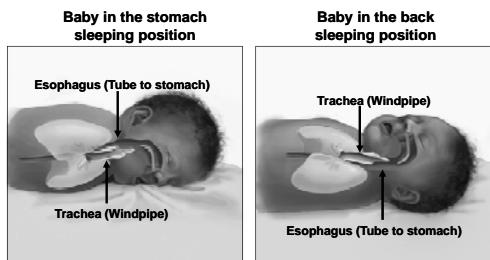
Challenges to Back Sleeping

- Comfort of the infant
- Concern about a flattened skull
- Advice from others
- Fear of choking



Babies Sleep Safest on Their Backs

- Fatal incidents of choking are rare



Co - Sleeping

- A sleep arrangement where the parent (or another person) and infant sleep in close proximity (on the same surface or different surfaces) so as to be able to see, hear, and / or touch each other
 - Co - sleeping arrangements can include bed sharing or room sharing
 - The terms “bed sharing” and “co - sleeping” are often used interchangeably, but they have different meanings

Room Sharing vs Bed Sharing

- Room sharing: the infant sleeps in the parents' room near the parent's bed, but on a separate sleep surface, such as a safety - approved* crib, bassinet, or play yard
 - Room sharing is known to reduce the risk of SIDS and other sleep - related causes of infant death

Room Sharing vs Bed Sharing

- Bed sharing: the infant sleeps on the same surface, such as a bed, couch, or chair with another person
 - Sleeping with a baby in an adult bed increases the risk of suffocation and other sleep - related injuries

*For more information: www.cpsc.gov

How Can Bed Sharing Be Risky?

- Shared sleep surface
- Soft bedding on sleep surface
 - Pillows
 - Blankets
 - Quilts / bedspreads

Other SIDS Risk Factors*

- Racial / Ethnic:
 - African Americans
(2x greater risk than white babies)
 - American Indians / Alaska Natives
(3 - 4x greater risk than white babies)
- Environmental:
 - Babies exposed to secondhand smoke (2.5x greater risk)

*For a complete list of risk factors, please visit: <http://www.nichd.nih.gov/sts/about/risk/Pages/factors.aspx>

Safe to Sleep® Campaign Overview

Safe to Sleep® Campaign Collaborators

- Health Resources and Services Administration (HRSA), Maternal and Child Health Bureau
- Centers for Disease Control and Prevention (CDC), Division of Reproductive Health
- American Academy of Pediatrics (AAP)

Safe to Sleep® Campaign Collaborators

- American Congress of Obstetricians and Gynecologists (ACOG)
- First Candle
- Association of SIDS and Infant Mortality Programs (ASIP)
- Consumer Product Safety Commission

Safe to Sleep® Campaign Messages

- Guided by the American Academy of Pediatrics Task Force recommendations on safe infant sleep
- Contribute to the alignment of federal and national strategy to address safe infant sleep across the United States



Audience-Specific Resources

- General outreach
- Statewide efforts
- Health care providers
 - Nurses' Continuing Education
 - Questions and Answers for Health Care Providers: Sudden Infant Death Syndrome (SIDS) and Other Sleep-Related Causes of Infant Death

Audience-Specific Resources

- African American communities
- Spanish - speaking communities
- American Indian / Alaska Native communities
- Fathers
- Grandparents
 - Safe Infant Sleep for Grandparents and Other Caregivers Video
<http://safetosleep.nichd.nih.gov>

How Can You Reduce the Risk of SUID / SIDS?

To Reduce the Risk of SIDS and Other Sleep-related Causes of Infant Death:

- Always place your baby on his or her back to sleep, for naps and at night
- Use a firm sleep surface, such as a mattress in a safety-approved* crib, covered by a fitted sheet

To Reduce the Risk of SIDS and Other Sleep-related Causes of Infant Death:

- Room share - keep baby's sleep area or surface separate from your sleep area or surface but in the same room where you sleep
- Keep soft objects, toys, crib bumpers, and loose bedding out of your baby's sleep area

*For more information: www.cpsc.gov.

To Reduce the Risk of SIDS and Other Sleep-related Causes of Infant Death:

- Women should:
 - Get regular care during pregnancy
 - Not smoke, drink alcohol, or use illegal drugs during pregnancy or after the baby is born

To Reduce the Risk of SIDS and Other Sleep-related Causes of Infant Death:

- Do not smoke during pregnancy, and do not allow smoking around your baby
- Breastfeed your baby
- Give your baby a dry pacifier that is not attached to a string for naps and at night

To Reduce the Risk of SIDS and Other Sleep-related Causes of Infant Death:

- Do not let your baby get too hot during sleep
- Follow your health care provider's guidance on your baby's vaccines and regular health check ups

To Reduce the Risk of SIDS and Other Sleep-related Causes of Infant Death:

- Avoid products that claim to reduce the risk of SIDS and other sleep-related causes of infant death
- Do not use home heart or breathing monitors
- Give your baby plenty of Tummy Time when he or she is awake and when someone is watching

Alabama Safe Sleep Outreach Project

- Alabama was ranked 4th for sleep - related infant deaths in 2013
- 3-year project; \$50K available in mini - grant funds
- Funding from NICHD supports outreach activities to address safe infant sleep and SIDS risk reduction

Alabama Safe Sleep Outreach Project

- Eligible mini-grant activities:
 - Safe infant sleep demonstrations
 - Trainings and workshops to community members and health care providers
 - Community awareness events
 - Community safety baby showers

Eligible Mini - Grant Applicants

- Health Departments
- First Responders
- Community Health Centers
- Health Coalitions
- Childcare and Youth Development Agencies

Eligible Mini - Grant Applicants

- Hospitals
- Universities
- Sororities / Fraternities



NEW: First Responder Eligibility

- First Responders in the Direct On Scene Education (DOSE) Program
 - Fire fighters and police officers
- Must complete at least 1 educational session (with at least 10 participants)
- Remaining grant funds may be applied towards providing safe sleep environment components

NEW: First Responder Eligibility

- Distributed during DOSE encounters
- Beneficiaries must not otherwise have access to safe sleep environments
- Non - first responders do not qualify for this funding mechanism

Important Dates and Deadlines

2016 – 2017 Mini-Grant RFP Release	September 28, 2016
Mini-Grant Orientation Meeting	December 11, 2016
Funding Cycle Commences	January 8, 2017

Review Process

- Incomplete applications will not be reviewed
- Each proposal will be considered on its own merit
- Additional information may be requested to provide a more detailed budget or description of activities
- All proposed projects must adhere to budget guidelines

Questions?



If you would like additional information or to request an application, please write to:
ALsafetosleep@iqsolutions.com