Alabama Safe Sleep Outreach Project

Satellite Conference and Live Webcast Wednesday, August 26, 2015 10:00 – 11:30 a.m. Central Time

Produced by the Alabama Department of Public Health Video Communications and Distance Learning Division

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National Institutes of Health (NIH)

NIH National Institutes of Health

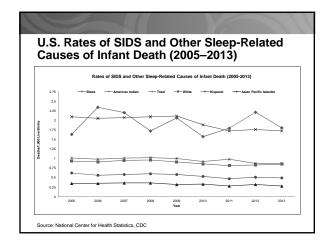
Safe to Sleep® Campaign Collaborators

- 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)
- American College of Obstetricians and Gynecologists (ACOG)
- First Candle
- Association of SIDS and Infant Mortality Programs (ASIP)

SIDS vs. SUID

- SIDS (Sudden Infant Death Syndrome): Sudden, unexplained death of a baby younger than 1 year of age that doesn't have a known cause after a complete investigation (complete autopsy, examination of the death scene, and review of the clinical history).
- c SUID (Sudden Unexpected Infant Deaths): Death of an infant younger than 1 year of age that occurs suddenly and unexpectedly. After a full investigation, these deaths may be diagnosed as suffocation, asphyxia, entrapment, infection, ingestion, metabolic disease, cardiac arrhythmia, trauma (accidental or non-accidental), or SIDS.
- e In some cases, if the evidence is not clear or not enough information is available, the death is considered to be of undetermined cause.

U.S. SUID-Specific Infant Mortality Rates (1990–2013) Rates of SIDS and Other Sleep-Related Causes of Infant Death (1990-2013) --- Tradd 9UD --- SSDS --- Mcclaintal Bifficaction and Stranglation in Bad --- Nacidated Bifficaction and Stranglation in Bad --- Nacidated Bifficaction and Stranglation in Bad --- Source: CDC WONDER, Mortality Files



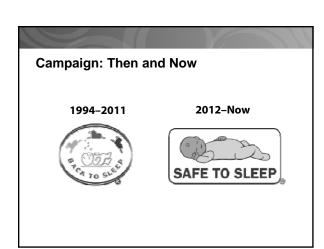
American Academy of Pediatrics: 2011 Guidelines

- Expanded its recommendations from SIDS-focused to safe sleep environment and risk reduction of all sleep-related causes of infant death:
 - Supine positioning (back sleeping)
 - Firm sleep surface
 - · Breastfeeding
 - Room sharing, not bed sharing
 - · Routine immunizations
 - · Offering of pacifier
 - Avoidance of soft bedding, overheating, and exposure to tobacco smoke, alcohol, and illicit drugs

The Facts

- The number of U.S. sleep-related SUID, including SIDS, is nearly 3,400 deaths per year.
- From 1984-2004, other sleep-related infant deaths increased.
- There are no national standards regarding infant death investigations or consensus on sleep-related infant death classification.

Source: CDC, Division of Reproductive Health





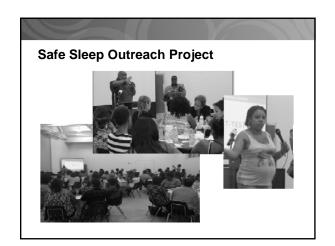
Key Messages for Safe Infant Sleep

- Always place baby on his or her back to sleep, for naps and at night.
- Use a firm surface with fitted sheet, such as a safetyapproved crib*, bassinet, or play yard, with no soft bedding or toys.
- Room share-keeping baby's sleep area separate from yours but in the same room where you sleep-do not bed share.

*For more information: www.cpsc.gov

Promote a Safe Infant Sleep Environment





Mississippi Safe Sleep Outreach Project

- The Mississippi State Outreach project was conducted from 2006 to 2012.
- When the project started, Mississippi had one of the highest SIDS rates in the U.S. The Eunice Kennedy Shriver National Institute of Child Health and Human Development (NICHD) awarded 108 mini-grants of up to \$2,000 each to community-based organizations.
 - Mini-grants benefited each of the nine local health districts across the state.
 - Activities included safe infant sleep demonstration workshops, grandparent trainings, teen workshops, campus events, and community outreach events.

Project Successes

- Collaborated with Mississippi's key stakeholders involved in safe infant sleep outreach.
- Conducted 54 safe infant sleep training sessions across the state for health and service providers.
- Promoted "SIDS Sunday" at 400–500 churches during October SIDS Awareness Month.
- Collected tracking/feedback forms from every outreach activity

Arkansas Safe Sleep Outreach Project

- The outreach project was conducted between 2012 and 2015.
- Arkansas was ranked #2 for sleep-related infant deaths in 2011.
- o Project awarded 94 mini-grants of up to \$2,000 to community/faith-based organizations.
 - Mini-grants went to each of the five local health units across
 the state
 - Activities included safe infant sleep demonstration workshops, grandparent trainings, teen workshops, campus events, and community outreach events.

Project Successes

- Conducted 18 safe infant sleep training sessions across the state for health and service providers.
- Engaged in safe infant sleep outreach:
 - Arkansas Infant Mortality Action Group
 - Arkansas Office of Minority Health and Health Disparities.
- v Promoted "SIDS Sunday" at 100–200 churches during October SIDS Awareness Month.
- Collected tracking/feedback forms from every outreach activity.

Eligible Mini-Grant Recipients

- Health Departments
- Hospitals
- Community Health Centers
- Universities

e And more...

- Health Coalitions
- Sororities/Fraternities
- Childcare and Youth Development Agencies

Alabama Safe Sleep Outreach Project

- The mini-grants are designed to support outreach activities to address safe infant sleep and SIDS risk reduction. Funding opportunities that are considered to be responsive to this application include, but are not limited to, the following example activities:
 - Safe infant sleep demonstrations
 - · Trainings and workshops
 - · Community awareness events
 - · Community "baby showers"

Eligible Applicants

- The following organizations/institutions are eligible to apply:
 - Nonprofits with 501(c)(3) IRS status (other than institutions of higher education)
 - Nonprofits without 501(c)(3) IRS status (other than institutions of higher education)
 - Faith-based organizations

Application Process

- Only one application per organization/program may be submitted.
- Amount requested may not exceed \$2,000.00.
- Please limit the application to the forms provided.

Review Process

- o Incomplete applications will not be reviewed.
- Each proposal will be considered on its own merit.
- $\ensuremath{\sigma}$ Additional information may be requested if it will assist in the review process.
- e All proposed projects must adhere to budget guidelines.

Important Dates and Deadlines

Mini-grant Application Released	September 28, 2015
Application Deadline	November 2, 2015
Mini-grant Status Notification	November 16, 2015
Mini-grant Recipients Meeting	December 11, 2015
Funds Distributed	January 8, 2016
Funding Cycle	January 8, 2016 through July 31, 2016
Mini-grant Recipients Closing Meeting	August 5, 2016
Final Report Due	August 5, 2016

