

## SAFE SLEEP

### **National Performance Measure 5: Percent of infants placed to sleep on their backs.**

**Goal:** To increase the number of infants placed to sleep on their backs.

**Definition:** Numerator: Mothers reporting that they most often place their baby to sleep on their back (Excludes multiple responses of back and combination with side or stomach sleep positions)/Denominator: Live births.

#### **Healthy People 2020 Objectives:**

Maternal, Infant, and Child Health (MICH) Objective 20: Increase the proportion of infants placed to sleep on their backs (Baseline: 69.0%, Target: 75.9%).

**Data Source:** Pregnancy Risk Assessment Monitoring System (PRAMS).

#### **Policy Context:**

Sleep-related infant deaths, also called Sudden Unexpected Infant Deaths (SUID), are the leading cause of infant death after the first month of life and the third leading cause of infant death overall. Sleep-related SUIDs include Sudden Infant Death Syndrome (SIDS), unknown cause, and accidental suffocation and strangulation in bed. Family education, professional training, and public policy are all instrumental in reducing SIDS/SUID.

National governmental and organizational recommendations have long called for infants to sleep on their back (supine) and as a result the number of infants dying from SIDS declined by more than half since 1990. The American Academy of Pediatrics (AAP) expanded its recommendations in 2011 to help reduce the risk of all sleep-related deaths with a safe sleep environment that includes use of the back-sleep position, on a separate firm sleep surface (room-sharing without bed sharing), and without loose bedding.

(<http://pediatrics.aappublications.org/content/early/2011/10/12/peds.2011-2284> ) Among others, additional higher-level recommendations include breastfeeding and avoiding smoke exposure during pregnancy and after birth. These expanded recommendations have formed the basis of the National Institute of Child Health and Development (NICHD) Safe to Sleep Campaign®.

State Title V MCH programs have long been leaders in efforts to reduce SIDS/SUID. Many states have laws related to SIDS/SUID. Such laws may: provide guidance for coroners or medical examiners and set protocol for post-mortem examinations (or autopsies) when SIDS and/or SUID death is suspected, require that an expert on SIDS participate in child fatality/death review committees, create advisory councils, or require training for child care, emergency medical, or law enforcement personnel. Other laws focus on hospitals and other birth facilities, with requirements to provide safe sleep environments and education for providers and parents.

<http://www.ncsl.org/research/health/sudden-infant-death-syndrome-laws.aspx>

**Action Agenda for State Title V MCH Block Grant Programs:**

- Create or maintain a child death / fatality review process, which includes SIDS specific protocols and experts.
- Use the AAP recommendations as the guideline for all infant safe sleep efforts in your state.
- Maximize use of the NICHD Safe to Sleep public education campaign, including distribution of materials to health providers, health department clinics, child care centers and homes, and families in birth facilities. These materials include curricula for professionals.
- Support and maintain a public health structure for education and training that serves an array of professionals.
- If your state does not have one, educate policymakers about the value of laws that require emergency medical technicians, firefighters, child care providers, and law enforcement officers to receive training on handling of cases of sudden, unexplained child death.
- If your state has not already done so, adopt a law or promulgate rules that require post-mortem examinations (or autopsies) when SIDS and/or SUID death is suspected.
- Encourage Medicaid and private managed care organizations to either collect data on breastfeeding and/or initiate a performance improvement project (PIP) or focused study that seeks to increase rates of safe sleep among enrolled families.
- Offer state public health recognition (e.g., certificates, awards, news releases) for health providers, child care providers, birth facilities, and others work to reduce SIDS/SUID, increase knowledge, or lessen its impact on families according to national recommendations.