

Infant Safe Sleep

A death of a baby before his first birthday, known as infant mortality, is a critical indicator of the health of a population. It reflects the overall state of maternal health as well as the quality and accessibility of primary health care available to pregnant women and infants. A number of factors contribute to infant mortality, including suffocation. Infant deaths due to suffocation result when the child is in a place or position where he is unable to breathe.¹ A majority of these suffocations occur when infants are in unsafe sleeping environments, and the American Academy of Pediatrics first linked sleep position and infant death in 1992.² Major risk factors for infant death include infants sleeping on their stomachs and on soft surfaces, with loose bedding, toys and other objects in the sleeping environment, overheating, bed-sharing, sleeping places other than a crib, maternal smoking during pregnancy, faulty design of cribs or beds, quality of supervision at time of death and other factors.¹ The Academy strengthened its recommendations in 2005 and 2011 to further emphasize supine sleep position and other environmental factors to protect against sleep-related deaths, such as room-sharing but not bed-sharing, ensuring a firm sleep surface free of soft objects and avoiding alcohol, illicit drugs and smoke.²

Infants spend more than 14 hours a day sleeping – and sometimes more. While sleep is an important part of an infant’s development, it can also be a dangerous time if parents and caregivers do not follow a few simple guidelines. Make sure to follow the ABCs of safe sleep:

- A. **Alone.** Infants should always sleep alone. The American Academy of Pediatrics warns that babies should never go to sleep with anyone or practice co-sleeping, as this raises the risk for suffocation. Cribs, cradles, bassinets and Pack ‘n Play portable cribs can be placed in the parent’s room to create a separate, but close sleeping environment. Alone also means the **crib should not have anything in it**. The crib should be free of toys, stuffed animals, pillows, bumper pads and blankets. Dress your baby in light sleep clothes or use a sleep sack (not a blanket) for extra warmth.
- B. **Backs.** Infants should always sleep on their backs on a firm surface with a tight-fitting bottom sheet. Soft surfaces like cushy mattresses or sofas are not safe places for a baby to sleep. Babies should not have pillows, comforters, quilts or other soft items beneath or on top of them.
- C. **Crib.** The safest place for a baby is in a crib – not a bed or sofa. A crib should be free and clear of toys, stuffed animals, bumper pads and blankets. The infant should sleep in a bassinet, crib or play yard that meets current safety standards from the U.S. Consumer Product Safety Commission. The mattress should fit snugly in the crib so there are not any gaps or spaces between the mattress and the crib frame. Don’t let your baby sleep in his carrier or sling, car seat or stroller because babies who sleep in these items can suffocate.^{2,3}

How does infant safe sleep affect the United States?

Fatal data

- While the incidence of sudden infant death syndrome (SIDS) has been decreasing since 1992, other causes of sudden unexpected infant death that occur during sleep, such as suffocation, asphyxia and entrapment have increased in incidence.²
- In 2014, 991 infants died as a result of unintentional suffocation, which may be related to unsafe sleeping.⁴
- Unintentional suffocation deaths resulted in 104,313 years of potential life lost before age 65 years in 2014, a measure of premature mortality.⁴
- An analysis of U.S. Consumer Product Safety Commission data revealed 15 suffocation deaths between 1990 and 1997 resulting from car seats overturning after being placed on a bed, mattress, or couch.²

Non-fatal data

- More than 131,000 infants sustained non-fatal injuries as a result of unintentional suffocation between 2001-2013.⁴

Cost data

- In 2010, infant suffocation deaths cost the U.S. more than \$1.15 million in medical costs and lost productivity.⁴

How does infant safe sleep affect Indiana?

- Suffocation was the leading cause of unintentional injury death for children under one year of age, and suffocation deaths are preventable. In 2014, 46 infants died as a result of unintentional suffocation.⁵
- Unintentional suffocation deaths resulted in 4,564 years of potential life lost before age 65 years in 2014, a measure of premature mortality.⁴
- In 2010, fatal suffocation injuries among infants cost Indiana \$32.4 million in total medical and work loss costs.⁴

How do we address this problem?

Policy:

- Important child care laws enacted by the Indiana General Assembly (SEA 305 and HEA 1494) went into effect on July 1, 2013. All regulated child care programs are impacted by the laws including licensed homes, licensed centers, registered ministries, legally licensed exempt provider homes that receive payments through the **Child Care Development Fund (CCDF)** and legally licensed exempt facilities that receive payments through CCDF. The law requires primary caregiver complete training on safe sleep for infants. Website: <http://www.in.gov/fssa/carefinder/3900.htm>.
- **IC 16-49-3-3** states a local **Child Fatality Review** team shall review the death of a child that occurred in the area served by the local child fatality review team if: 1) the death of the child is sudden, unexpected, unexplained, or assessed by the Department of Child Services (DCS) for alleged abuse or neglect that resulted in the death of the child, or 2) the coroner in the area served by the local child fatality review team determines that the cause of the death of the child is undetermined or the result of a homicide, suicide, or accident.
- **American Academy of Pediatrics Policy Statement:** Task Force on Sudden Infant Death Syndrome <http://pediatrics.aappublications.org/content/early/2011/10/12/peds.2011-2285.full.pdf>.
- **U.S. Health and Human Services Agencies Support Infant Safe Sleep Recommendation:** <http://www.nichd.nih.gov/news/releases/Pages/101811-infant-safe-sleep-recommendations.aspx>.

Collaborations:

- **Indiana Perinatal Network (IPN)** is an alliance of hundreds of individuals and organizations across Indiana committed to the beliefs that: Every mother deserves a healthy and safe pregnancy and every baby deserves to be born healthy and into a safe and nurturing home.
- The **Indiana Child Fatality Review Program** attempts to better understand how and why children die, take action to prevent other deaths, and improve the health and safety of our children. Each local child fatality review team is made up of a coroner/deputy coroner, a pathologist, a pediatrician or family practice physician, and local representatives from law enforcement, the local health department, DCS, emergency medical services, a school district within the region, fire responders, the prosecuting attorney's office, and the mental-health community. The teams are required to review all deaths of children under the age of 18 that are sudden, unexpected or unexplained, all deaths that are assessed by DCS, and all deaths that are determined to be the result of homicide, suicide, accident, or are undetermined.
- The multi-branch **statewide Commission on Improving the Status of Children in Indiana**, in cooperation with other entities, studies issues concerning vulnerable youth and makes recommendations concerning pending legislation, review and promotes information sharing and best practices. Website: <http://www.in.gov/children/>.

Data collection:

- The **Indiana Child Fatality Review teams** ensure the accurate identification and uniform, consistent reporting of the cause and manner of every child death. The case report is part of the Child Death Review Case Reporting System, a web-based application. The system allows local and state users to enter case data, access and download

their data and download standardized reports via the Internet. More information on this system is available from the National Center for Child Death Review at <http://www.childdeathreview.org>.

- Statewide direction and focus for child injury prevention safe sleep is one of the areas outlined in the **Indiana Trauma and Injury Prevention State Plan**. The Indiana State Department of Health Division of Trauma and Injury Prevention conducts statewide injury surveillance through death certificates, hospitalizations and ED visits.

Programs:

- **Indiana State Department of Health Safe Sleep Action Plan**
 - Work with agencies to distribute infant survival kits and provide safe sleep education throughout the state.
 - Work with external partners to expand and standardize safe sleep training for nurses, caregivers and childcare providers.
 - Provide first responders with safe sleep training/education to help expand safe sleep messaging.
 - Help reduce sleep-related infant deaths by providing first responders with training/education to standardize and improve infant death scene investigations, and promote consistent classification and reporting of sudden unexpected infant death (SUID) cases.
 - Promote and support the Cribs for Kids National Safe Sleep Hospital Certification Program that strives to award recognition to hospitals that demonstrate a commitment to reducing infant Sleep-Related Deaths through promoting best safe sleep practices and educating health professionals and parents/caregivers on infant sleep safety.
 - Establish partnerships with agencies to improve the well-being of infants and children in the community.
- **Indiana Safe Sleep Collaborative:** ISDH, in collaboration with DCS and a partnership with the Cribs for Kids National Infant Safe Sleep Initiative, has implemented a statewide program that provides education and **Infant Survival Kits** to infant caregivers and families. The survival kits contain one infant Pack 'n Play portable crib, fitted sheet with imprinted safe sleep messaging, wearable blanket, pacifier and safe sleep recommendations for those in need with an infant at risk for SIDS or sleep-related death. There are currently 23 education/survival kit distribution sites throughout the state, reaching families in all 92 counties.
- **“Labor of Love” public awareness campaign:** A sustained, statewide information effort began January 2015. The goal is to raise awareness of the problem of infant mortality and encourage support for education and prevention. The fundamental premise of the campaign is to educate citizens that everyone has a role to play to ensure our babies reach their first birthdays. Website: <http://www.in.gov/laboroflove/>.
- **ISDH Child Fatality Review Program** provides technical support and assistance to local child fatality review teams to enhance existing capacity, identify sudden unexpected infant deaths and collect, review and enter accurate, objective and comprehensive surveillance data on SUID cases that occur in Indiana. The purpose of child fatality review is to examine the circumstances and risk factors involved in a child’s death, monitor and identify the magnitude, trends and features of infant death and translate findings into prevention strategies by disseminating useful, actionable data to stakeholders and data providers to support and improve local, state and national infant mortality prevention policies, programs and practices.
- Effective March 1, 2016, the Indiana Family Helpline is rebranding into the **MCH MOMS Helpline**. The new phone number will be **1-844-MCH-MOMS (1-844-624-6667)**. The Helpline Specialists offer information and referral assistance on a variety of topics including infant health programs such as Safe Sleep and Baby & Me Tobacco Free. For any other questions or concerns, please email MCHMOMSHelpline@isdh.in.gov. Website: <http://www.in.gov/isdh/21047.htm>.
- **The Cribs for Kids® Safe Sleep Hospital Initiative** is a hospital certification program awarding recognition to hospitals that demonstrate a commitment to best practices and education on infant sleep safety. Requirements include: developing a safe sleep policy statement, train staff on guidelines and policies, educate parents on safe sleep practices, replace regular receiving blankets with wearable blankets and affiliate with local Cribs for Kids partners. Website: <http://www.cribsforkids.org/hospitalinitiative/>.

- **The Baby-Friendly Hospital Initiative** is a global program sponsored by the World Health Organization and the United Nations Children's Fund (UNICEF) to encourage and recognize hospitals and birthing centers that offer an optimal level of care for lactation. As of June, 2015, Indiana has 8 Baby-Friendly Hospitals. Website: <http://www.babyfriendlyusa.org/>.
- **Indiana Tobacco Quitline 10-Call Protocol for Pregnant Women- 1-800-QUIT-NOW (800-784-8669)**: A tailored quitline intervention for pregnant women includes up to 10 calls with relapse prevention sensitivity. The first 5-6 calls are completed within 60 to 90 days of enrollment and one call is made 30 days prior to the woman's planned due date. In addition, two postpartum contacts are made (15 days and 45 days postpartum, emphasizing the importance of remaining quit beyond delivery). The program takes a woman-centered approach, balancing the benefits of quitting for both the fetus and the woman, in addition to incorporating an element to enlist optimal support for the woman and to encourage smoking partners to quit as well. Website: <http://www.in.gov/quitline/>.
- The **Period of Purple Crying** is an evidence-based infant abuse prevention program that educates parents and caregivers about normal infant crying, soothing techniques and ways to cope through this sometimes difficult period from 2 weeks to 3-4 months. The acronym PURPLE describes characteristics of an infant's crying during the first few months and Period indicates that crying has a beginning and an end. Website: <http://purplecrying.info/>.
- **Period of Purple Crying** mobile and web application: <http://www.dontshake.org/purple-crying>.

Education:

- Safe Sleep Awareness can be pivotal in assisting to decrease our infant mortality rate in the state of Indiana. The educational messages focus on three key risk reduction recommendations –**ABC: babies sleep safest alone, on their backs and in a crib**. The messaging encourages breastfeeding and safe bonding practices that can occur while the baby and mother are awake – both in and outside of the adult bed.
- Most infant suffocations occur in the sleeping environment. Infants should be placed on their backs to sleep in bare cribs that meet safety standards of the **U.S. Consumer Product Safety Commission (CPSC)** and the **Juvenile Products Manufacturers Association (JPMA)**. Since June 28, 2011, all cribs sold in the United States must meet new federal requirements for overall crib safety, including:
 - Traditional drop-side cribs cannot be made or sold; immobilizers and repair kits are not allowed;
 - Wood slats must be made of stronger wood to prevent breakage;
 - Crib hardware must have anti-loosening devices to keep it from coming loose or falling off;
 - Mattress supports must be more durable;
 - Safety testing must be more rigorous.⁶
 - U.S. Consumer Product Safety Commission certified cribs, cradles, bassinets and Pack 'n Play portable cribs can be used for a safe sleep environment, with the remaining components of the ABCs of Safe Sleep.

Measures: Healthy People 2020:

Injury and Violence Prevention (IVP)-24: Reduce unintentional suffocation deaths.

IVP-24.2: Reduce unintentional suffocation deaths among infants 0 to 12 months.

Additional resources:

Indiana Department of Child Services
 Indiana Government Center South
 302 West Washington St, Room E306
 Indianapolis, IN 46204
 Website: <http://www.in.gov/dcs/index.htm>

Indiana State Department of Health
 2 North Meridian Street
 Indianapolis, Indiana 46204

DCS Ombudsman Information
 (Located at the Indiana Department of Administration)
 Phone: 317-234-7361
 Fax: 317-232-3154
 Email: DCSOmbudsman@idoa.in.gov

ISDH Indiana Child Fatality Review Program
 Phone: (317)233-1240
 Email: GMartin1@isdh.IN.gov
 Website: <http://www.in.gov/isdh/26349.htm>

ISDH Maternal and Child Health Division

Phone: (317)233-7940

Website: <http://www.in.gov/isdh/19571.htm>

ISDH Trauma and Injury Prevention Division

Email: Indianatrauma@isdh.IN.gov

Website: <http://www.in.gov/isdh/19537.htm>

- a. Indiana Child Abuse/ Neglect Hotline: 1-800-800-5556
- b. MCH MOMS Helpline: 1-844-MCH-MOMS (1-844-624-6667): Website: <http://www.in.gov/isdh/21047.htm>
- c. Indiana Tobacco Quitline: 1-800-QUIT-NOW (800-784-8669) Website: <http://www.in.gov/quitline/>
- d. Indiana Safe Haven Hotline: 1-877-796-HOPE (1-877-796- 4673) or 2-1-1. Website: <http://safehaven.tv/>
- e. Indiana Substance Abuse Treatment for Women: <http://www.in.gov/idoc/2966.htm>
- a. SIDS & Infant Loss Support: 317-924-0825
- b. Indiana Perinatal Network: http://www.indianaperinatal.org/?page=MF_Safe_Sleep
- c. Indiana Children’s Bureau, Inc.: <http://www.childrensbureau.org/what-we-do/child-care-development-fund-ccdf>
- d. American Academy of Pediatrics Policy on Safe Sleep: <http://pediatrics.aappublications.org/content/early/2011/10/12/peds.2011-2284.full.pdf+html>
- e. CDC Sudden Unexpected Infant Death and Sudden Infant Death Syndrome: <http://www.cdc.gov/sids/>
- f. Children’s Safety Network: <https://www.childrenssafetynetwork.org/injury-topics/safe-sleep>
- g. Cribs for Kids <http://www.cribsforkids.org/>
- h. First Candle <http://www.firstcandle.org/>
- i. Kids in Danger: <http://www.kidsindanger.org/>
- j. Juvenile Products Manufacturers Association: <http://jpma.org/>
- k. March of Dimes: <http://www.marchofdimes.org/baby/safe-sleep-for-your-baby.aspx>
- l. The Maternal & Child Health Library at Georgetown University: Safe Sleep: <http://www.mchlibrary.info/suid-sids/SafeSleep/index.html>
- m. The National Center for the Review and Prevention of Child Deaths: <https://www.childdeathreview.org/>
- n. Prevent Child Injuries: Safe Sleep Toolkit: <http://www.preventchildinjury.org/toolkits//safe-sleep>
- o. Safe Kids Indiana/ Safe Kids Worldwide: <http://www.safekids.org/>
- p. U.S. Department of Health and Human Services: Safe to Sleep: <http://www.nichd.nih.gov/sts/Pages/default.aspx>
What does a safe sleep environment look like? http://ocfs.ny.gov/main/publications/20090306-BTS-English_tearsheet-FINAL.pdf
- q. U.S. Consumer Product Safety Commission: <http://www.cpsc.gov/>

References:

1. National Center for the Review and Prevention of Child Deaths. SIDS/ SUID Fact Sheet. Retrieved from <https://www.childdeathreview.org/reporting/sidssuid/>.
2. Task Force on Sudden Infant Death Syndrome. (2011). Policy statement: SIDS and other sleep-related infant deaths: expansion of recommendations for a safe infant sleeping environment. *Pediatrics*, 128:1030–39. Retrieved from <http://pediatrics.aappublications.org/content/early/2011/10/12/peds.2011-2284>.
3. Indiana State Department of Health. (2015). Indiana Labor of Love. Retrieved from <http://www.in.gov/laboroflove/>.
4. Centers for Disease Control and Prevention, National Center for Injury Prevention and Control. Web-based Injury Statistics Query and Reporting System (WISQARS) [online]. (2016). Retrieved from <http://www.cdc.gov/injury/wisqars/fatal.html>.
5. Indiana State Department of Health, Epidemiology Resource Center, Data Analysis Team.
6. U.S. Consumer Product Safety Commission (CPSC). A Safer Generation of Cribs: New Federal Requirements. Retrieved from <http://www.cpsc.gov//PageFiles/113598/cribrules.pdf>.