

INFANT SAFE SLEEP PRACTICES

Public Health Issue

Unsafe infant sleep position and placement are associated with risks of sleep-related sudden unexpected infant death (SUID) [1]. SUID is the unforeseen death of an infant in which the cause of death is not immediately known prior to investigation [2]. Sleep-related SUID includes accidental suffocation or strangulation in bed and sudden infant death syndrome (SIDS), which is defined as the death of an infant that remains unexplained after investigation [3, 4].

In 2011, the American Academy of Pediatrics (AAP) published expanded recommendations to promote infant safe sleep practices that significantly reduce the risk of SUID. These infant safe sleep recommendations include back sleep position and room sharing without bed sharing. Compared to side or stomach sleeping positions, the back sleeping position is associated with lower risks of SIDS and other sleep-related deaths. Parents and caregivers are encouraged to place healthy infants to sleep on their backs until the age of 1 [5]. Room sharing without bed sharing can reduce the risk of SIDS by as much as 50% and aids in the prevention of suffocation, asphyxia, or entrapment [5].

Magnitude and Trend

From 2009 to 2011, the proportion of new mothers in Florida that reported placing their infants to sleep on their backs increased from 58.7% to 65.0%. During the same time period, the proportion of new mothers that reported never placing their infants to sleep with themselves or others also increased from 36.2% to 38.1% (Figure 1). Racial/ethnic disparities in these safe sleep behaviors exist in Florida – both safe sleep practices are lower among non-Hispanic (NH) black infants compared to NH white and Hispanic infants.

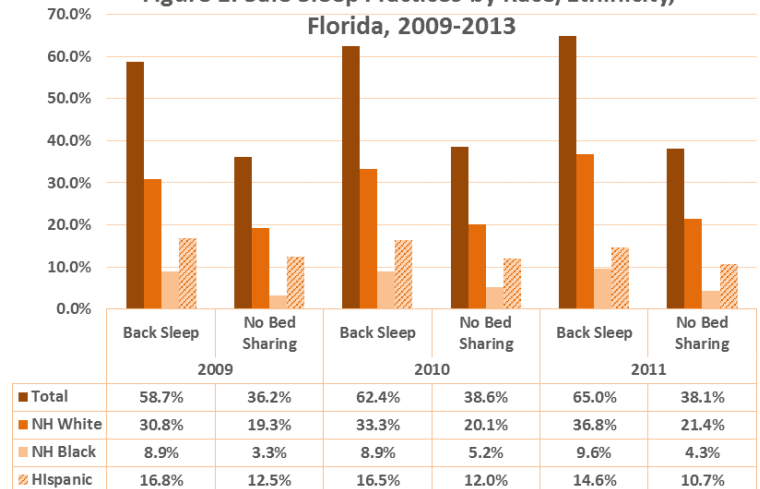
Overall, Florida safe sleep trends are comparable to trends in other states.

According to data from the 2009 to 2010 national Pregnancy Risk Assessment Monitoring System (PRAMS), 70.5% of infants were placed to sleep on their backs and 39.4% never bed-shared. Similarly, both of these safe sleep behaviors were lowest among NH black infants [6].

National and State Goals

The Healthy People 2020 national objective aims to increase the proportion of infants who are placed to sleep on their backs to 75.9% [7]. Florida’s objective is to increase the proportion of infants who are placed to sleep on their backs to 71.2% by December 2015. Although there is no national objective regarding infant bed sharing, Florida’s state objective is to increase the

Figure 1. Safe Sleep Practices by Race/Ethnicity, Florida, 2009-2013



Source: Florida Pregnancy Risk Assessment Monitoring System (PRAMS)

proportion of infants who never bed share to 43.4% by December 2015. Florida PRAMS data for 2011 show the state is -6.2% short of the back sleeping goal and -5.3% short of the bed-sharing goal.

Current State Programs and Initiatives

Infant safe sleep is one of the focus areas of the Florida Maternal and Child Health Title V 2010-2014 block grant cycle. In addition, the Florida Department of Health's (FDOH) SUID Advisory Committee established the following objectives and activities to promote infant safe sleep practices and reduce the risk of SUID deaths:

- Provide education and training on infant safe sleep practices and the causes and prevention of SUID
- Collect information from health care practitioners regarding knowledge, beliefs, practices, and messaging to parents about infant safe sleep and SUID
- Conduct public awareness campaigns on infant safe sleep environments and SUID prevention
- Monitor trends in infant safe sleep practices, SUID, and contributing factors in Florida
- Increase the number of Florida hospitals implementing Baby-Friendly policies and practices
- Collaborate with the State Child Abuse Death Review (CADR) team and the State Fetal and Infant Mortality Review (FIMR) team to improve SUID death investigations and develop joint recommendations to decrease SUID deaths

Public Health Strategies and Practices

Safe sleep messages that emphasize the importance of safe sleep practices in SUID risk reduction are necessary to increase public awareness and positively influence parents and caregivers to adopt infant safe sleep practices [8]. The success of the Safe to Sleep campaign (formerly the Back-to-Sleep campaign) demonstrates the positive impact targeted outreach activities can have. The national SIDS rate declined greater than 50% in a 10-year period after initiation of the Safe to Sleep campaign [9]. In Florida, the FDOH local health departments and contracted Healthy Start Coalitions allocate resources and provide educational materials consistent with Safe to Sleep campaign materials to parents, caregivers, and health care providers that promote safe sleep practices and environments.

DOH Capacity

Existing Florida statutes outline the scope of Florida's public health programs and services as well as mandate the existence of local Healthy Start Coalitions to provide connections between FDOH initiatives and the needs of local communities. In 2013, the FDOH SUID Advisory Committee, comprising of multidisciplinary internal and external maternal and child health practitioners, FDOH staff, and community partners, was established. The purpose of the committee is to link and engage existing programs, staff, and resources in coordinated and evidence-based efforts to address SUID prevention and education. The work of the FDOH SUID Advisory Committee is guided by a Safe Sleep Behaviors and Environments Logic Model that identifies processes and resources needed to obtain desired immediate, intermediate, and long-term outcomes that are ultimately expected to reduce SUID. The FDOH has the capacity to measure the progress of activities, objective accomplishments, and impacts on SUID outcomes.

References

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