



Early Childhood Services

SafeSleep Program

Ensuring that New Mexico children are safe,
healthy, loved and ready for school



Objectives

- **Identify facts and myths about SIDS, and explain what is currently known about SIDS risk factors.**
- **Define actions that families and caregivers can take to reduce SIDS risk.**
- **Communicate safe sleep messages.**
- **Identify the Procedure for request, storage and distribution of the New Mexico Home Visiting SafeSleep Cradles**



What is SIDS?

- **SIDS is the sudden death of an infant younger than 1 year of age that remains unexplained after a thorough case investigation, including:**
 - **Performance of a complete autopsy;**
 - **Examination of the death scene; and**
 - **Review of the clinical history of the infant.**

Source: Willinger M, James LS, & Catz C. *Pediatric Pathology*, 1991.



SIDS is...

- **The leading cause of infant death between 1 month and 1 year of age in the United States**
- **A sudden, silent medical disorder**
- **Determined after autopsy, exam of death scene, and review of medical records**
- **2 times to 4 times more likely to occur in Native American babies (followed by Latino babies)**

Source: Healthy Native Babies Partnership - Eunice Kennedy Shriver National Institute of Child Health and Human Development (NICHD), National Institutes of Health (NIH)



SIDS is *NOT*...

- Fully understood, but risks can be reduced
- Caused by suffocation
- Caused by diphtheria, pertussis and tetanus (DPT) vaccine, or other shots or vaccines



And SIDS is not...

- **Contagious**
- **Result of child abuse or neglect**
- **Caused by cribs**
- **Caused by choking or vomiting**
- **The cause of every unexpected infant death**



SIDS Risks Factors

- **Bed Sharing**
- **Sleep Position**
- **Soft Sleeping Surfaces and Loose, Fluffy Bedding**
- **Overheating**
- **Alcohol Use**
- **Commercial Tobacco Use**
- **Pregnancy-Related Factors**



Exploring some of the Factors

- Overheating
 - Increases chance baby will sleep too deeply
 - Can occur if:
 - Baby is overdressed;
 - Room is too warm; or
 - Baby is covered in too many blankets.
 - Check for signs: sweating, damp hair, flushed cheeks, heat rash, rapid breathing



Exploring some of the Factors

- **Alcohol Use**
- **(during pregnancy & after baby's birth)**
 - One binge episode during first 3 months of pregnancy increases risk of SIDS 8 times.
 - Any drinking 3 months prior to and during first 3 months of pregnancy increases risk 6 times.
 - Alcohol use during breastfeeding can cause drowsiness, deeper sleep, weakness, and decreased growth in the infant.



Exploring some of the Factors

- **Commercial Tobacco Use (during pregnancy & in baby's living environment)**
 - **Tobacco decreases growth and function of baby's developing brain, nerves, and organs.**
 - **Infants who die of SIDS have higher levels of nicotine in their lungs than infants who die from other causes.**



Exploring some of the Factors

- **Pregnancy-Related Factors**
 - **Not receiving early regular prenatal care**
 - **Preterm labor/birth and low birth weight**



Lowering Risk of SIDS - Alone

- **Use separate sleep area in the same room as parent or caregiver.**
 - The American Academy of Pediatrics now says babies should sleep in their parent's room for the first 6 months, or better yet, until their first birthday.
 - New statistics say room-sharing can lower the risk of SIDS by as much as 50%.
 - It's easier to keep an eye on your baby, comfort, and feed him. But he needs his own safe space: A bassinet, crib, or co-sleeper (a separate sleeping area that attaches to your bed).
 - Babies *should not* sleep in the bed with their parents. That increases the risk that the child's breathing could get cut off, and it's even more dangerous if you smoke, drink, or take drugs (even some prescription meds.)



American Academy of Pediatrics



Lowering Risk of SIDS – on their Back

- The most effective action that parents and caregivers can take to lower the risk for SIDS is to always place the baby on his or her back to sleep, for naps and at night
 - Continue to place babies on their backs at bedtime and naptime, even after they have learned how to roll over
 - Once babies start rolling and choosing their own sleep position, you do not need to keep turning them over onto their backs
- When babies roll over, it is even more important that there is nothing else (blankets, soft toys) in the sleep area to get near their face.



EVERY SLEEP COUNTS!!



What about choking?

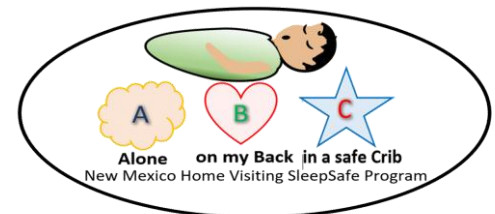
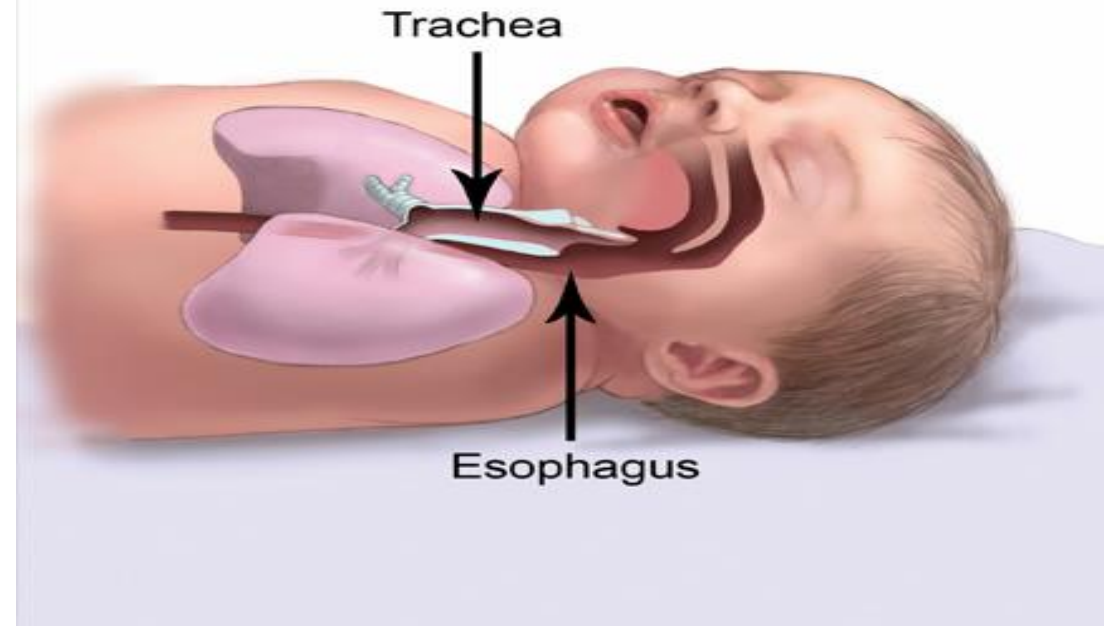
- Won't babies choke when sleeping on their backs?
 - Sometimes babies “spit up” when sleeping.
 - Studies have shown that babies are NOT at risk of choking if they spit up when sleeping on their backs.



Back Sleeping Does Not Cause Vomiting or Choking

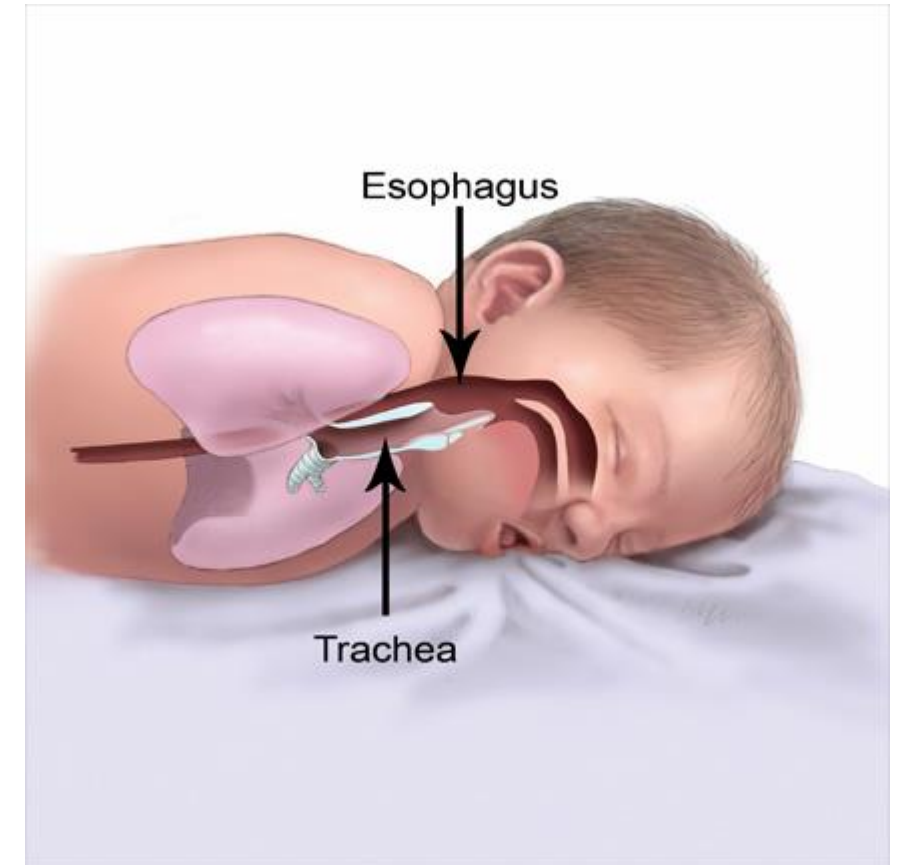
- When a baby is in the ***back sleeping position***, the trachea lies on top of the esophagus.
- Anything regurgitated or refluxed from the esophagus must work against gravity to be aspirated into the trachea.

Back Sleeping Position



Back Sleeping Does Not Cause Vomiting or Choking

- When a baby is in the *stomach sleeping position*, anything regurgitated or refluxed will pool at the opening of the trachea, making it easier for the baby to aspirate or choke.



Lowering Risk of SIDS – in a safe Crib

- **Every time a baby goes down to sleep, she must be placed in her crib, bassinet, or co-sleeper**
 - Never place a baby to sleep or sleep with the baby on an armchair, couch, sofa, or waterbed.
 - Remove soft items (pillows, toys, quilts, comforters, sheepskins) from the sleep area.



Breast Feeding

- **One of the strongest ways to help prevent SIDS is breastfeeding**
 - Several studies show that infants who are breastfed, even for a short time, are less likely to get SIDS.
- **Pacifiers also lower the risk of SIDS.**
 - Never hang the pacifier around her neck or attach it to her clothes while she sleeps.
 - And there's no need to put it back in her mouth after she's fallen asleep.



Tummy Time

- **Give babies plenty of tummy time when they are awake and someone is watching.**
 - Healthy babies need some tummy time when awake to help develop strong muscles.
 - Place baby on tummy on a firm, safe surface, and play together or stay nearby to keep baby safe
 - Tummy time for a few minutes 2-3 times a day can also help to prevent a flat area from forming on the back of baby's head.



Healthy Native Babies Project



Be Consistent

- **It is important to be consistent with your safe sleep messages:**
 - Same information
 - Same messages
 - Same images and methods



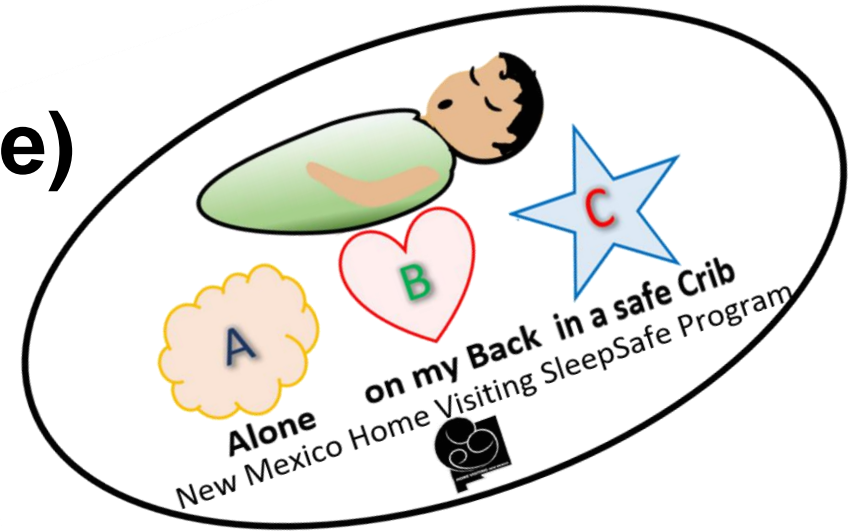
Be Consistent

- **Information**

- Handouts to provide to families must be consistent, simple and relevant

- **Same message (our main message)**

- A – Alone
- B – on my Back
- C – in a safe Crib



Be Consistent

- **Watch for promotional information about your program, families, etc. ensure that there are no images depicting unsafe sleep practices**
 - *“Normative beliefs of others and societal pressures influence parents and caregivers. Advertisements by crib manufacturers, national retailers, and magazines directed at parents are sources of societal pressure...advertising continues to show non-adherent sleep environments”.*
(<https://www.aap.org/en-us/about-the-aap/aap-press-room/Pages/Crib-Marketing-Displays-Often-Depict-Unsafe-Sleep-Environments.aspx>)



Be Consistent

IMPORTANT: The risk of SIDS is **much higher (8-times higher)** when babies who are used to sleeping only on their backs are put to sleep on their tummies for the first time, such as in child care or with a new caregiver

- Make sure parents talk to grandparents, relatives, friends, child care providers about safe sleep and share what works best to help baby fall asleep on her back EVERY TIME.

Tell everyone who takes care of babies to follow these important safe sleep practices.



Be respectful – family centered



- **Using fear, guilt, or shame is usually not effective in sustaining new or desirable behaviors.**
- **Focusing on effective actions that people can take to reduce the risk of SIDS is a more effective and respectful tactic.**
- **Take into account family identity, reality, culture, traditions... use Home Visiting Principles when addressing SafeSleep.**



Home Visiting

The most effective method to share the SafeSleep message is face to face as part of the Home Visiting Services



SafeSleep Baby Cradles

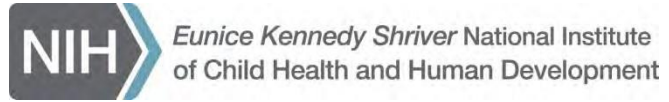


Resources will be emailed to you
Materials are coming to your shipping Address
This Presentation will be posted on the our website
We will send you the links



The Content of this Presentation was based on Information from the following:

Eunice Kennedy Shriver National Institute of Child Health and Human Development,
Safe to Sleep Campaign: <https://www1.nichd.nih.gov/sts/Pages/default.aspx>



Healthy Native
Babies Project

Resources Used for this Presentation include:

Healthy Children: <https://www.healthychildren.org/English/ages-stages/baby/sleep/Pages/A-Parents-Guide-to-Safe-Sleep.aspx>

Centers for Disease Control and Prevention <https://www.cdc.gov/vitalsigns/safesleep/index.html>

Back to Sleep: U.S. Department of Health and Human Services (www.hhs.gov), Health Resources and Services Administration (www.hrsa.gov), Maternal and Child Health Bureau (www.mchb.hrsa.gov)

American Academy of Pediatrics: <http://www.aappublications.org/content/32/11/12.1>



Thank you!

