



Safe Sleep
NORTH CAROLINA

Reducing the Risk of SIDS and Other Sleep-Related Infant Deaths

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SCHOOL OF MEDICINE
Center for Maternal and Infant Health

Goal of Safe Sleep NC

To strengthen the adoption of infant safe sleep practices across the state that reduce the risk of Sudden Infant Death Syndrome (SIDS) and that prevent infant sleep-related deaths such as accidental infant asphyxiation and suffocation.



Safe Sleep Advisory Committee

Composed of members from the following agencies:

- DHHS NC Child Care Health and Safety Resource Center
- DHHS Child Fatality Prevention Team
- DHHS Pregnancy Care Management
- DHHS Children and Youth Branch
- DHHS Women's Health Branch
- DHHS State Center for Health Statistics
- DHHS Department of Social Services
- Office of the Chief Medical Examiner
- Carolina Global Breastfeeding Inst.
- Atrium Health, Injury Center
- Safe Child NC
- Welcome Baby
- NC Maternal, Infant and Early Childhood Home Visiting (MIECHV)
- Cribs for Kids
- Wake County Human Services

Current Focus of Safe Sleep NC



NC healthcare providers have asked for more information that fosters conversation and addresses nighttime parenting, including how to:

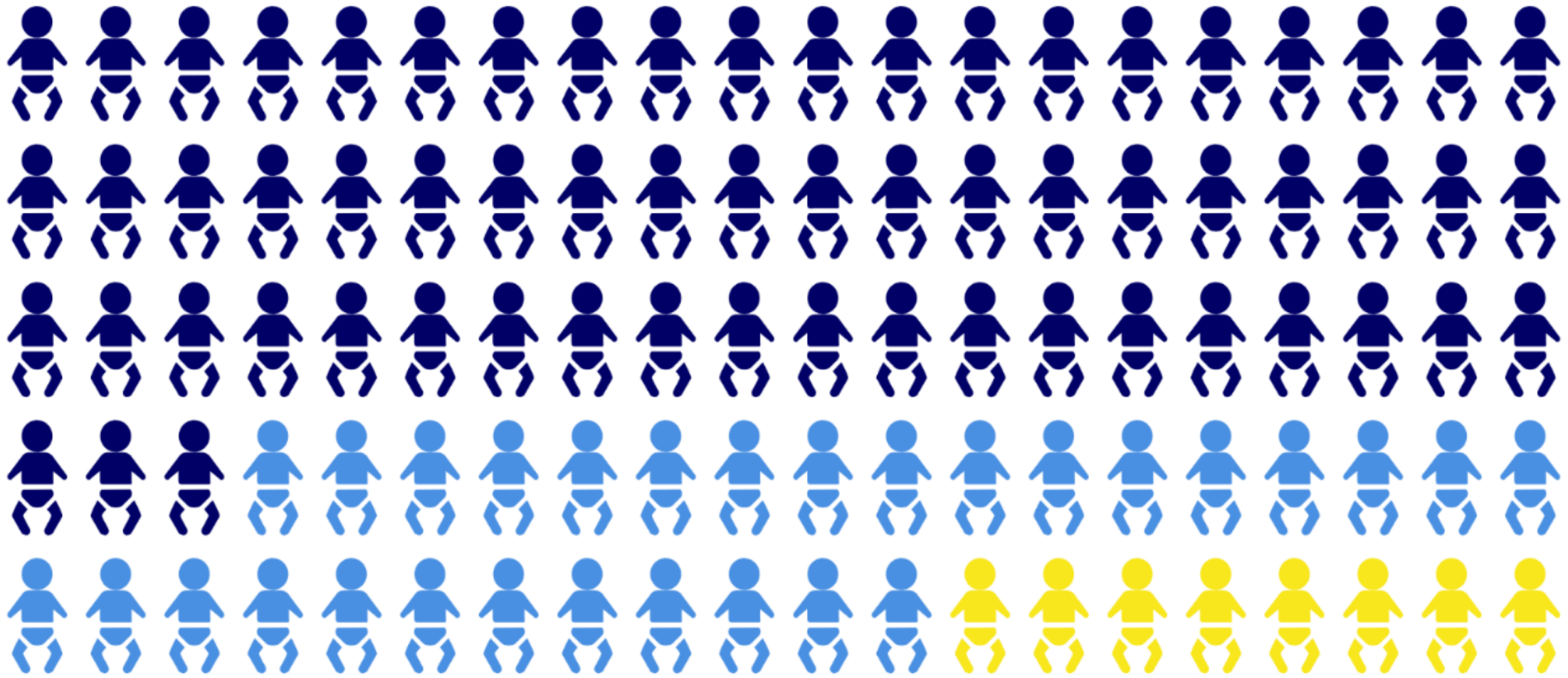
- Engage in honest conversations
- Reduce risk
- Reach high priority populations

Leading Causes of Infant Death, NC 2016

Cause Category:	Deaths	Percent
Prematurity/Low Birth Weight	180	20.6
Birth Defects	166	19.0
Other Unknown Causes	104	11.9
Maternal complications	87	10.0
Other perinatal conditions	84	9.6
Respiratory Distress	67	7.7
Infections	50	5.7
All Other Causes (Residual)	41	4.7
Accidental Suffocation/Strangulation in Bed	22	2.5
Respiratory diseases	21	2.4
Circulatory diseases	17	1.9
SIDS	13	1.5
Accidents	13	1.5
Homicide	8	0.9

Source: North Carolina State Center for Health Statistics, 2016 Infant Mortality Report

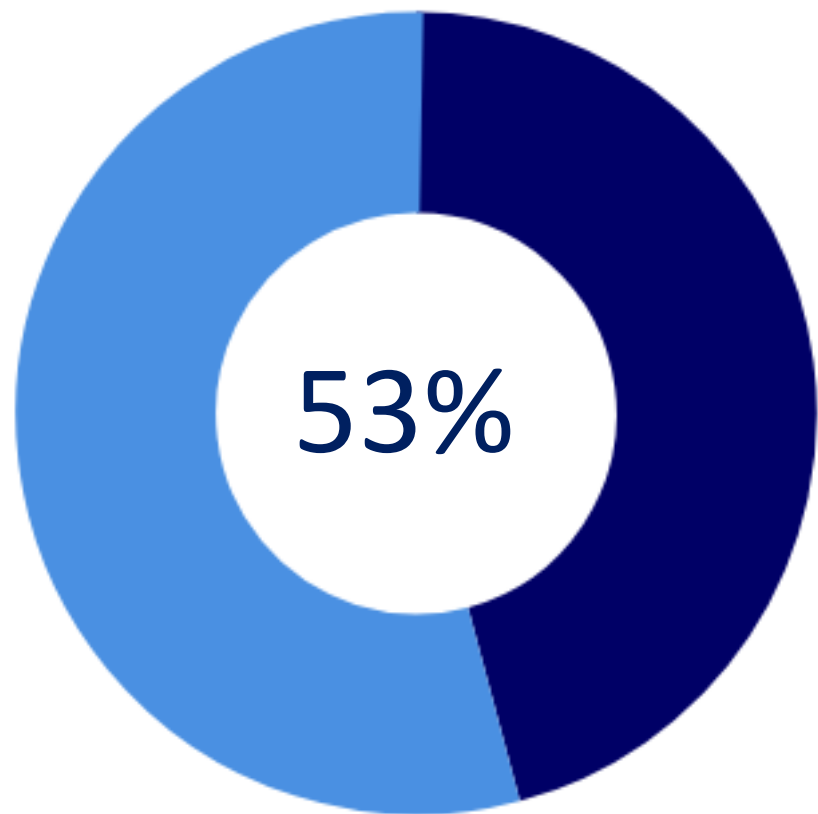
Sleep-Related Deaths by Sleep Environment, 2016



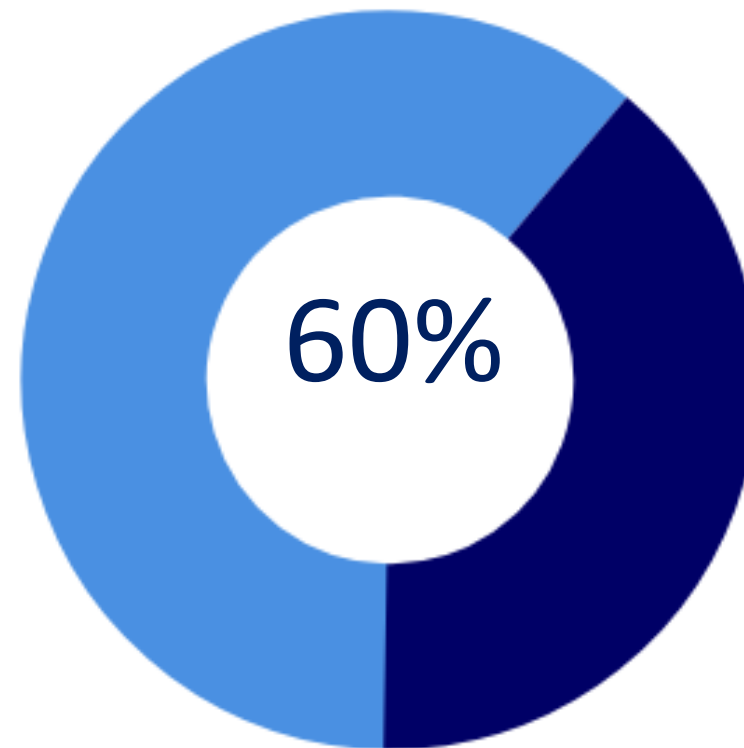
Unsafe Sleep: **Bed Sharing** Assoc.(91) Unsafe Sleep: **Not Bed Sharing** Assoc.(42) **NOT Unsafe Sleep** Assoc. (11)

Source: Office of the Chief Medical Examiner-Division of Public Health North Carolina Department of Health and Human Services

Bed Sharing Among North Carolina Infants, PRAMS 2016



53% of Infants
Bed Share



60% of Low Birth Weight
Infants Bed Share

Source: North Carolina Pregnancy Risk Assessment Monitoring System Survey Results 2016

2016 Updated Recommendations for a Safe Infant Sleeping Environment from the AAP

1. Place infants on their **back to sleep** (supine) for every sleep period until they are 1 year of age.
2. Use a **firm sleep surface**.
3. **Breastfeed**, if possible.
4. **Share the Room, Not the Bed**: Place infants to sleep in the same room where you sleep. Infants should sleep close to the parents' bed but on a separate sleep surface designed for infants, ideally for the first year, but at least for the first six months.
5. **No soft objects**: Keep soft objects and loose bedding out of the infant's sleep area.
6. **Offer a pacifier** (after breastfeeding has been firmly established) at naptime and bedtime.
7. **Avoid tobacco exposure** during pregnancy and after birth.
8. **Avoid alcohol and illicit drug use** during pregnancy and after birth.
9. **Avoid overheating** and head covering in infants.

<http://pediatrics.aappublications.org/content/early/2016/10/20/peds.2016-2938>



Strategies for Engaging with Parents and Caregivers

What Influences Parents & Caregivers About Infant Sleep?



Feedback from Parents



- Trust healthcare providers most for safe sleep information;
- Yet, receive inconsistent messages about infant sleep practices, and
- Feel they cannot be honest about their infant's sleep environment

Source: <https://www1.nichd.nih.gov/cbt/sids/nursececourse/Welcome.aspx>

What Healthcare Providers Say and Do Makes a Difference

It is important that providers:

- ✓ **KNOW** about safe sleep information,
- ✓ **SHOW** safe sleep practices, &
- ✓ **TELL** parents about safe sleep



Strength-Based Approach to Nighttime Parenting



- Families feel valued, not judged
- Ask for permission to share information
- Be respectful and sensitive
- The goal is to reduce the risk by sharing information, answering questions and concerns, discussing resources, problem solving, and offering support



Addressing Bed Sharing

The AAP continues to advise against bed sharing; however, there is now acknowledgement that parents do bed share both intentionally and unintentionally and that should be addressed to reduce risks.

A Harm Reduction Approach



- Aims to reduce risk in the bed sharing environment and help mothers to find ways other than bed sharing to address other night time needs
- Nonjudgmental approach that both recognizes that parents are likely to bed share and empowers them to minimize the risks involved
- Recognizes that bedsharing exists on a spectrum and acknowledges that not all bed-sharing environments share the same risk factors

Moving Beyond “Abstinence-Only” Messaging to Reduce Sleep-Related Infant Deaths Altfeld, Susan et al.
The Journal of Pediatrics , Volume 189 , 207 – 212 <https://doi.org/10.1016/j.jpeds.2017.06.069>

When Bed Sharing is Very Dangerous

- When the infant is younger than 4 months
- If the infant was born premature or low birth weight
- If the bed-sharer uses tobacco or if the mother used tobacco during pregnancy
- If the bed-sharer has taken illicit drugs or medicine that causes drowsiness
- If the bed-sharer has consumed any alcohol
- If the bed-sharer is not the parent
- If there are multiple bed-sharers (including other children)
- If the sleep surface is soft, such as an old mattress, waterbed, or pillow-top mattress
- If the sleep surface is a couch, sofa, or recliner
- If there is soft bedding, such as pillows or blankets, present in the bed

The following guidelines are for all parents, whether they intend to bed share or not



Feeding a baby at night in an adult bed is safer than on a couch or recliner, both of which are extremely dangerous

If feeding in a bed, keep all blankets, sheets, comforters, and pillows, away from the baby to prevent overheating and/or accidental suffocation

What about Baby Boxes?

- Developed in Finland post-WWII as part of an overall plan to improve infant health that included universal healthcare, paid parental leave, etc.
- Local health departments and other community agencies should consider the pros and cons before investing, including:
 - Not proven acceptable or efficacious in the US setting
 - High potential for parental user error
 - Limited usefulness – can only be used until baby is rolling over
 - Cost is comparable to pack-n-play





**Resources for Providers,
Clinics, & Parents/Caregivers**

Healthcare Provider Safe Sleep Training



- 60 minute online training
- Free 1.5 Nursing Contact Hours approved the North Carolina Nurses Assoc.
- Access it here: bit.ly/safesleepnc

Available North Carolina Resources Handout (English and Spanish)



Does Your Baby Sleep Safe?

Reduce the risk of Sudden Infant Death Syndrome (SIDS) and other sleep related causes of death by creating a **safe sleep space for your baby.**

 **Safe Sleep**
NORTH CAROLINA

Learn more at SafeSleepNC.org

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How to make a **Safe Sleep Space for Baby**



Share your room, not the bed.
Keep baby's crib, bassinet, or pack n play in the same room. Baby should not sleep in an adult bed, on a couch, or on a chair, alone, with you or with anyone else.



Put baby to bed on their back for every sleep.
This is the safest sleep position for babies.



A bare sleeping space is best.
Baby's sleeping place should not include blankets, pillows, fluffy toys, or crib bumpers. Just a tight-fitting sheet on a firm mattress.



Use a firm sleep surface in a safety-approved crib, bassinet, or pack n play.
All new cribs sold after June 28, 2011 meet current safety standards.



Don't let baby get too hot during sleep. At most, a baby should wear only one layer more of clothing than an adult would wear to be comfortable.



Keep your home and car smoke and vape free. Keeping baby free of second-hand smoke and vape helps to reduce the risk of death. Need help quitting? Contact Quitline NC at 1-800-QuitNow.

Common Safe Sleep Questions

Won't my baby choke on her back?
No. Infants are actually less likely to choke when placed on their backs. When your baby is on their stomach, anything spit up can block the windpipe and cause choking or breathing problems.

My mother tells me that my baby should sleep on his stomach or side, should I still put my baby on his back to sleep?
Yes. We have learned over the years that infants are less likely to die from SIDS if they are placed on their back for every sleep.

How am I going to breastfeed if my baby doesn't sleep with me?
Put your baby's crib near your bed so that you can easily pick her up for feedings during the night and then return her to her crib for sleeping.

How will I bond with my baby if he doesn't sleep with me?
There are lots of other time for bonding with your infant, but when your baby is sleeping it is safest for them to be in their own space. You might sleep better too.

I know a lot of people who sleep with their babies, how can it not be safe?
The truth is babies are more likely to suffocate when they sleep with an adult or another child.

What if I fall asleep with my baby?
Ask others to move the baby back to her crib or set an alarm for yourself to wake up and move her. You can remove all bulky bedding from your bed to reduce the risk of suffocation. However, there is no 100% safe way to bed-share with a baby.

 **Safe Sleep**
NORTH CAROLINA

Learn more at SafeSleepNC.org

Available North Carolina Resources Posters (English and Spanish)



Does Your Baby **Sleep Safe?**

Share the Room, Not the Bed.

Your baby sleeps safest **on their back** and **in a crib or pack n play.**

Over 130 babies in NC die each year of sleep-related causes. Many of these deaths could be prevented.

 Safe Sleep [Learn more at SafeSleepNC.org](https://www.SafeSleepNC.org)



Ms. Gwen
Grandmother of 10

Does Your Baby **Sleep Safe?**

We now know babies sleep safest **alone, on their backs, and in a crib or pack n play.**

Over 130 babies in NC die each year of sleep-related causes. Many of these deaths could be prevented.

 Safe Sleep [Learn more at SafeSleepNC.org](https://www.SafeSleepNC.org)



¿Duerme seguro tu bebé?

Ahora sabemos que los bebés duermen más seguros **solos, sobre su espalda y en una cuna o corral.**

Más de 130 bebés en Carolina del Norte mueren cada año por causas relacionadas al sueño. Muchas de estas muertes pueden ser prevenidas.

 Safe Sleep [Aprende más en SafeSleepNC.org](https://www.SafeSleepNC.org)

Available North Carolina Resources



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- Services

DHHS > DPH > WCH > Women's Health Branch > For Providers and Partners > Publications, Brochures, Manuals

Women's Health Branch

Publications, Brochures, and Manuals

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To request publications, complete the [Publications Form](#) (PDF, 284 KB - **Updated 07/10/18**). Women's Health Branch publications, fact sheets, manuals, and directories are listed below. If an item doesn't open properly, please try a different web browser like Internet Explorer, Mozilla Firefox or Google Chrome. If you need an item not provided, please call (919) 707-5700.

- Order these FREE resources by going to this link:
<https://whb.ncpublichealth.com/provpart/pubmanbro.htm>
- Click "Publications Form"
- See page 3 under "Parenting & Baby"
- Fax your order to **919-870-4827**

Available National Resources



Safe to Sleep[®]
Public Education Campaign Led By

NIH Eunice Kennedy Shriver National Institute of Child Health and Human Development
In collaboration with other organizations

SAFE TO SLEEP[®]

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Learn About SIDS/Safe Infant Sleep

Sudden Infant Death Syndrome (SIDS) is not the cause of every infant death. [Find out how to reduce baby's risk of SIDS and other sleep-related causes of infant death.](#)

Get Information and Materials

We have information and materials for many audiences, including parents, grandparents, and health care providers. [Get Safe to Sleep[®] materials for outreach and sharing.](#)

Explore the Campaign

Safe to Sleep[®] started in 1994 as Back to Sleep to teach people about reducing the risk of SIDS. [Learn more about the Safe to Sleep[®] campaign.](#)

Did You Know That? [Learn More](#)

- SIDS is the leading cause of death in infants between 1 month and 1 year of age.
- Most SIDS deaths happen when babies are between 1 month and 4 months of age.
- Each year, about 4,000 infants die unexpectedly during sleep time, from SIDS, accidental suffocation, or unknown causes.
- SIDS is not a risk for babies 1 year of age or older.

Media [Visit the Media Section](#)



[Get Web-Ready Photos of Safe Sleep Environments](#)

NICHD News

- [Blood of SIDS infants contains high levels of serotonin \(July 05, 2017\)](#)
- [NICHD's Safe to Sleep Campaign with Dr. Marian Willinger \(July 05, 2017\)](#)
- [Federal agencies express support for updated safe infant sleep recommendations \(October 24, 2016\)](#)

[See All Related News](#)

<https://www1.nichd.nih.gov/sts/materials/Pages/default.aspx>

Available National Resources

cpsc.gov/cribs



United States
CONSUMER PRODUCT SAFETY COMMISSION

Safe to Sleep® - Crib Information Center

Recalls and Crib Standards

Videos

Posters



DEADLY DANGER!
INFANTS ON AIR MATTRESSES

Infants can suffocate on an air mattress or become entrapped between the mattress and bed frame or mattress and wall.

NEVER
Never place infants ages 15 months old and younger to sleep on an inflatable air mattress.

FOR A SAFER SPACE FOR BABY:

ALWAYS
Place baby to sleep on his or her back in a crib or play yard that meets current standards.
Remember, a bare crib is baby's best sleeping area.

CPSC has received reports of 40 infant suffocation deaths in the last five years, of infants who were placed to sleep on air mattresses.

SAFER SPACES FOR BABY

TOP TIPS

- Make sure baby's **CRIB** was manufactured after June 28, 2011, and remember, a bare crib is baby's best sleeping area.
- Always keep **BABY MONITORS** and **CORDS** at least 3 feet away from the crib to reduce the chance that baby can get the cord caught around his or her neck and strangle.
- Use the restraint strap on **HIGH CHAIRS** to prevent your child from slipping through and strangling on the high chair tray.
- PLAY YARDS** made after February 28, 2013 are made to a stronger standard. But, to prevent your baby from becoming entangled and suffocating, never add:
 - Additional mattresses
 - Pillows
 - Cushions
 - Quits
- Sign up to receive **RECALLS** at www.cpsc.gov to know if any of your baby products have been recalled.

U.S. Consumer Product Safety Commission
A SAFER GENERATION OF CRIBS
New Federal Requirements

5 New Federal Requirements:

- Traditional drop-side cribs cannot be made or sold; immobilizers and repair kits not allowed
- Wood slats must be made of stronger woods 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

Beginning June 28, 2011 all cribs sold in the United States must meet new federal requirements for overall crib safety.

SafeSleep is a campaign of the U.S. Consumer Product Safety Commission.

www.cpsc.gov
NSN logo



**Coming Soon:
Website &
Safe Sleep NC Champions**

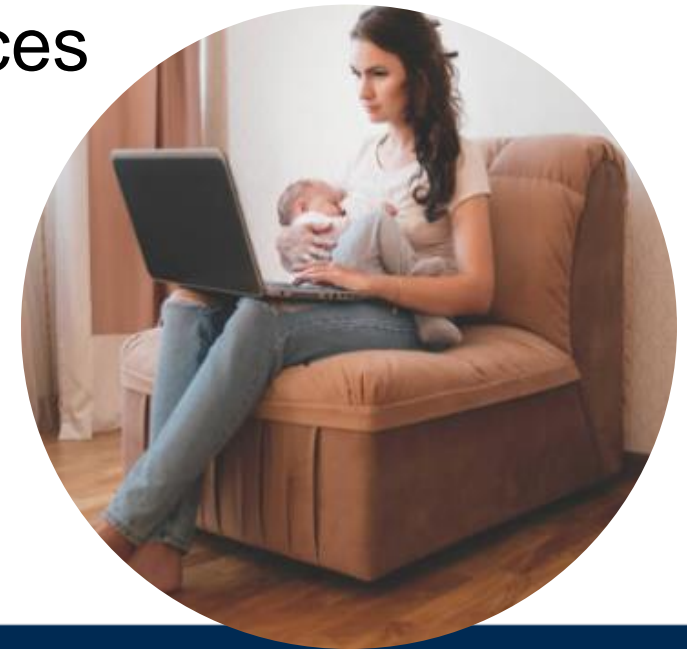
NEW Safe Sleep NC Website

Parent/Caregiver Site

- English & Spanish
- Safe sleep information
- Interactive quizzes, FAQs, forms, etc. for parents/caregivers
 - Levels of risk regarding bed sharing
 - Safe sleep environment quiz

Healthcare Provider Site

- Safe sleep information
- Online training
- Social media tool kit
- Resources



Safe Sleep NC Champions

Goal: Emphasize importance of safe sleep education and to disseminate up-to-date information by partnering with local health departments and other agencies



How to be a Safe Sleep NC Champion:

- Take the Safe Sleep NC Champion online training
- Utilize and tell others in your organization about Safe Sleep NC resources
- Promote Safe Sleep NC messages by using the E-Toolkit

Safe Sleep NC Contact Information



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Improving the health of North Carolina's women and infants

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Safe Sleep



Safe Sleep is a crucial component of infant health

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