Increasing Infant Safe Sleep Practices among MA WIC Participants

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Carlene Pavlos, Director, Division of Violence and Injury Prevention, MDPH
Lisa McCarthy, State Child Fatality Review Coordinator, MDPH
Sally Fogerty, Director, Children’s Safety Network
Overview of Presentation

- Background of safe sleep issue in MA
- Disparities in infant safe sleep practices by race
- WIC’s safe sleep initiative
- Evaluation of WIC’s safe sleep initiative
Overview
Recommendations

1. AAP Recommendations (2011)

2. MA Department of Public Health Safe Sleep Policy (2012)

“The safest place for an infant to sleep is on his or her back in the same room with a parent or caregiver and in a separate sleep space such as a crib or bassinet.”

“MDPH supports breastfeeding and encourages mothers to sleep in close proximity to, but in separate space from, their infants, regardless of the feeding status.”
Leading causes of death among MA infants 1-11 months of age, 2010

- Sudden Unexpected Infant Death*: 45%
- Congenital Malformations: 15%
- Perinatal Conditions: 6%
- Homicide: 6%
- Unintentional injuries and injuries of undetermined intent**: 5%
- Other causes: 23%

SUID is the leading cause of infant death after the first month of life.

An average of 41 MA infants died EACH YEAR (2004-2010) from sleep environments due to SUID-related sleep environments.

*SUID includes: SIDS, unintentional suffocation in bed, and undetermined causes

**unintentional injuries and injuries of undetermined intent include unintentional MV occupant and unspecified causes

Source: Registry of Vital Records and Statistics, MDPH, 2010
Infant Sleep Deaths Data: Disparities

The rate of infant sleep death in MA from 2004-2010 was over three times higher among Black non Hispanic infants and nearly two times higher among Hispanic infants than among White, Non-Hispanic infants.
Why WIC?
Back to Sleep: WIC vs. Non-WIC

Co-Sleeping: \textit{WIC vs. Non-WIC}

Most Frequent Infant Sleep Position Reported by MA Mothers, By WIC Status, 2007-2010

Source: Pregnancy Risk Assessment and Monitoring Survey, MDPH
Usual Infant Sleep Location Reported by MA Mothers, By WIC Status, 2007-2010

Source: Pregnancy Risk Assessment and Monitoring Survey, MDPH
Why WIC?

- Parents trust WIC when it comes to babies!

- WIC Staff:
  - Provide direct service to more than 40% of all babies born in Massachusetts, including African American and Hispanic infants who are at highest risk of infant sleep deaths.
  - Can address this emotional issue using Touching Heart, Touching Minds (THTM) approach.
  - Are able to reinforce safe sleep messages over multiple visits.
  - Can reinforce importance of breastfeeding.
WIC’s Safe Sleep Initiative

- Raising the Issue (2012)
- Train the Trainer (2013)
- Implement Staff Trainings and Participant Discussions
- WIC’s nutrition service guidance will include information regarding the inclusion of infant safe sleep in nutrition counseling.
- Evaluation – pre/post-tests, 6 month post training
# Major Components of WIC’s Training

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<tbody>
<tr>
<td><strong>1.</strong></td>
<td>Understand the leading causes of deaths of infants and children</td>
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<td><strong>2.</strong></td>
<td>Identify the major components of infant safe sleep practices</td>
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<td><strong>3.</strong></td>
<td>Describe the risk and protective factors for infant safe sleep</td>
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<td><strong>4.</strong></td>
<td>Identify challenges and understand the development of infants in relation to sleep</td>
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<td><strong>5.</strong></td>
<td>Crying and calming techniques</td>
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<td><strong>6.</strong></td>
<td>Incorporate safe sleep education into their work</td>
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Messaging

- Want effective messages that reach all communities
- Goal of reducing disparities
- Use of “emotion-based messaging”
- Addresses the challenges we hear from parents
Focus of the Message

1. Back-Only Sleep
2. Separate Sleep Environment
3. Uncluttered Crib
4. Breastfeeding
5. Smoke-Free Environment
WIC – Door Knob Hangers

Educational tool for WIC staff to distribute to participants.
Including Safe Sleep Messages in WIC Counseling

- **When?**
  - Prenatal visits (before bedding purchases)
  - Infant certification and early follow-up visits
  - Peer counseling contacts
  - Breastfeeding classes

- **How?**
  - Use emotion-based, patient-centered counseling
    - Build on parents’ desire to keep baby as safe as possible
Smoking and SIDS

- Both pre and post natal smoking increases SIDS risk
- Infants co-sleeping with smoking mothers have a higher risk of SIDS
- AAP and DPH include recommendations to avoid smoking as part of safe sleep policies

Breastfeeding and SUID

- Infant sleep death occurs in both breastfed and formula fed babies
  - Breastfeeding reduces, but does not eliminate, risk
  - Longer duration and exclusivity of breastfeeding may increase protection

WIC’s Safe Sleep Initiative – Preliminary DATA
Who has been trained?

- Out of 35 WIC sites, 22 sites have trained their staff members.

Evaluation:
- Assess knowledge, attitude and behavior about safe sleep
- 15 sites have returned pre/post tests
- Pre/Post tests - 12 questions

Future evaluation
- 6 months follow (post-test)
1. Healthy babies placed on their backs are more likely to have serious or fatal choking episodes than those placed on their stomachs.

2. Lying infants down on either their sides or backs for sleep is recommended to prevent infant sleep death.

3. A smoke-free environment reduces the risk of infant sleep death.

4. It is good practice to use bumper pads in an infant’s crib to protect the infant from harm.

5. It is safe for infants to sleep with their twin, an older brother or sister or a pet.

6. It is not safe for an infant to sleep with one stuffed toy or one blanket.
Attitude – Question 7

I believe infants can safely sleep in the same bed with their mothers after breastfeeding

Response Percentage

<table>
<thead>
<tr>
<th>Attitude/Agreement</th>
<th>Pretest</th>
<th>Posttest</th>
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<tbody>
<tr>
<td>Strongly Disagree</td>
<td>10%</td>
<td>60%</td>
</tr>
<tr>
<td>Disagree</td>
<td>20%</td>
<td>10%</td>
</tr>
<tr>
<td>Neutral</td>
<td>20%</td>
<td>0%</td>
</tr>
<tr>
<td>Agree</td>
<td>10%</td>
<td>10%</td>
</tr>
<tr>
<td>Strongly Agree</td>
<td>10%</td>
<td>0%</td>
</tr>
</tbody>
</table>
If an infant appears to sleep more soundly on his/her stomach or side, the infant should be put down to sleep that way.
I believe that it is best for infants to sleep on a separate sleep surface from parents, and ideally in the same room.
Behavior – Question 10
(baseline)

How many clients have you spoken to about... the safest position to put an infant down to sleep

Response Percentage

Amount of Clients

None
Some
Half
Most
All
Behavior – Question 11 (baseline)

How many clients have you spoken to about... what a safe crib looks like

Response Percentage

Amount of Clients
Behavior – Question 12 (baseline)

How many clients have you spoken to about... the dangers of cosleeping

- None: 50%
- Some: 30%
- Half: 10%
- Most: 10%
- All: 0%
Keys to this Work

- Reinforce message where and whenever we can
- Message needs to be consistent
- Message needs to make sense to parents and address parental concerns
- Efforts to encourage room sharing without bed sharing must address parent safety concerns
- Breastfeeding is recommended!
- Recommendations need to stress the “preventability” of infant death
- Respect parents’ culture and beliefs