SAY YES TO SAFE SLEEP

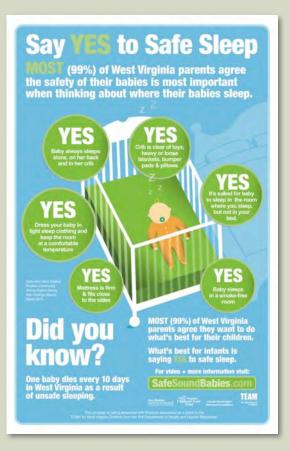
Jim McKay Our Babies: Safe & Sound Prevent Child Abuse WV

Our Babies: safe&sound

SLIDES AVAILABLE AT HTTP://WWW.SLIDESHARE.NET/PCAWV

OUR BABIES: SAFE & SOUND CAMPAIGN THEMES

Say YES to Safe Sleep



Keep Your Cool

Here's how cool dads KEEP THEIR COOL



Meet Jeff.

He loves music, fishing and the baby in his life. When the baby cries, he knows how to chill.

Make sure the baby is safe — Alone, on his Back, in his Crib. Make sure the baby is OK and not hungry, sick or needing a diaper change Then, step away for a few minutes and do something to relax. Or call someone for helo.

Never, ever shake a baby.



MOST (93%) of West Virginia parents agree it is never OK to shake a baby – even if they are very frustrated and the baby will not stop crying.



SUDDEN INFANT DEATH SYNDROME (SIDS)

"... sudden death of an infant under one year of age which remains unexplained after a thorough case investigation, including performance of a complete autopsy, examination of the death scene, and review of the clinical history." Willinger M., James L.S., Catz C., Pediatr Pathol 1991

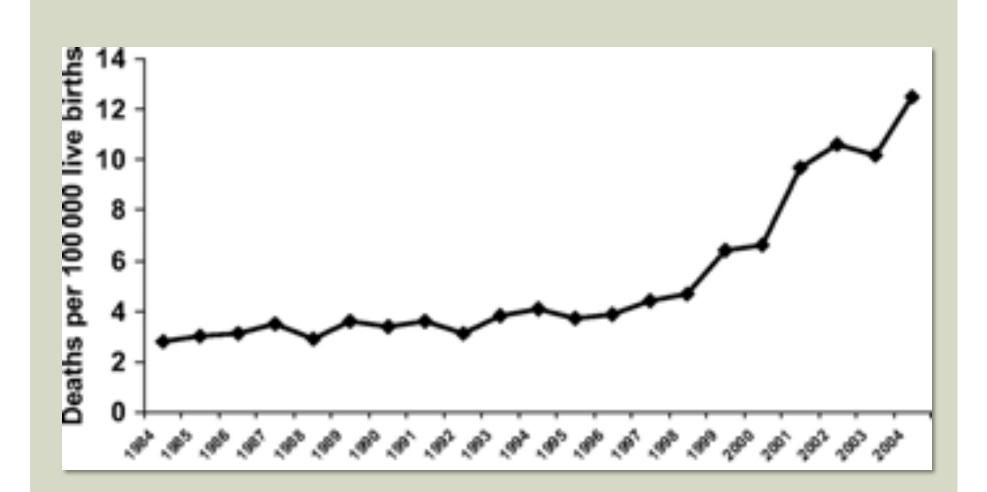
SUDDEN, UNEXPECTED INFANT DEATH (SUID)

An umbrella term for infant deaths that:

- Includes SIDS, suffocation, or other unknown causes
- Occur suddenly and unexpectedly in previously healthy infants
- Can be explained after a case investigation. Investigations may reveal head injury, infection or overdose
- Exclude deaths with an obvious cause such as motor vehicle accidents

SUDDEN, UNEXPECTED INFANT DEATH (SUID)

While rate of SIDS has decreased, other causes of SUID that occur during infant sleep (suffocation, asphyxia, entrapment) have increased.



Accidental Suffocation & Strangulation in Bed Rates United States, 1984 – 2004

* CDC, Wonder 2013

NATIONAL INCIDENCE DATA

- According to CDC, approx. 4,600 SUID cases yearly
- 383 babies are dying each month in US
- 1 death every 2 hours
- Rates comparable to birth defects mortality
- Accidental Suffocation & Strangulation in Bed (ASSB) rates more than tripled in the last decade
- 3.7 to 12.5 deaths per 100,000 live-births from 1995 to 2005
- Potentially preventable infant mortality

WEST VIRGINIA INCIDENCE DATA

- Suffocation & strangulation in an adult bed or other unsafe sleeping surface is the leading cause of injury-related death for WV infants under age 1
- Risk of sleeping-related infant death is 40 times higher for babies who sleep in adult beds compared to babies who sleep in their own cribs

WEST VIRGINIA INCIDENCE DATA

- 37 deaths attributed to sudden unexpected infant death in 2013
- Bed sharing, strangulation and hazardous bedding were key factors
- One of the leading causes of death age 1-12 months in WV
- * WV Child Fatality Review Team Data

"BACK TO SLEEP" IS AN INADEQUATE MESSAGE



NATIONAL OVERVIEW

1992: American Academy of Pediatrics (AAP) released its first recommendations that infants be placed for sleep in non-prone position

1994: Back to Sleep Campaign began to educate parents, caregivers, health providers about SIDS & placement of infants on their back to sleep; reduced incidence of rate of SIDS by 50%

State child care regulations also revised, with over 50% requiring babies to be put to sleep on their backs & soft bedding not be used in cribs

NATIONAL OVERVIEW

In response to increasing rates of SUIDs:

- 2006: CDC began standardized reporting, data collection, training of professionals for SIDS & SUIDS.
- July 2011: National crib safety regulations were strengthened and a federal ban on drop-down side cribs was issued.
- Several local jurisdictions have also banned the sale of bumper pads.
- State-led awareness campaigns implemented in at least 37 states.

CLARIFYING COMMON TERMS

Bed sharing

An infant shares a sleep surface with one or more adults or other children. In past years, this was referred to as co-sleeping.

Room sharing

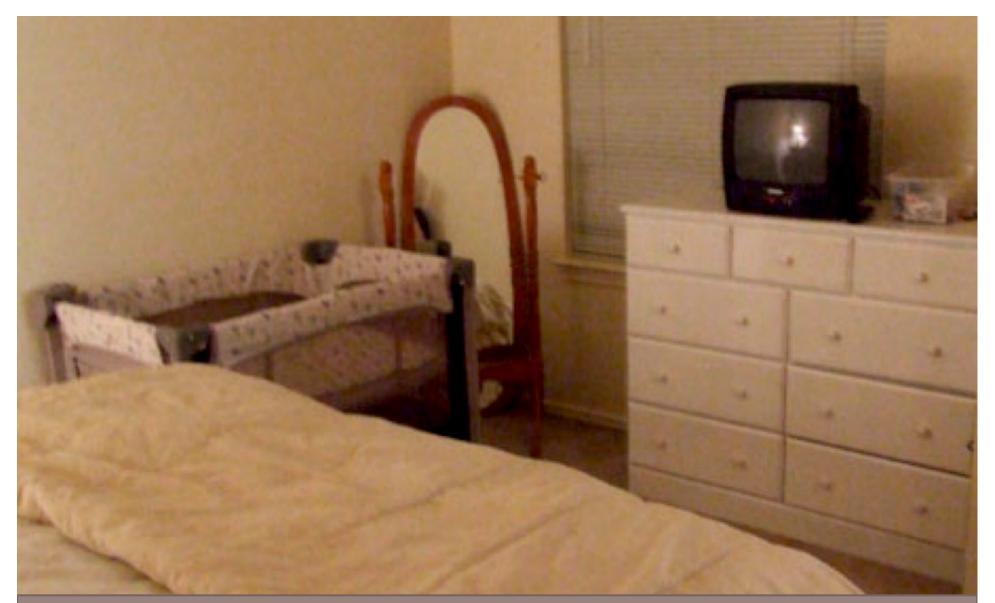
An infant sleeps near the parent or caregivers in their own crib, bassinet or portable crib.











Room Sharing Infant sleeps near the parent or caregivers in their own crib, bassinet or portable crib.



THE COMPETITION WE'RE UP AGAINST

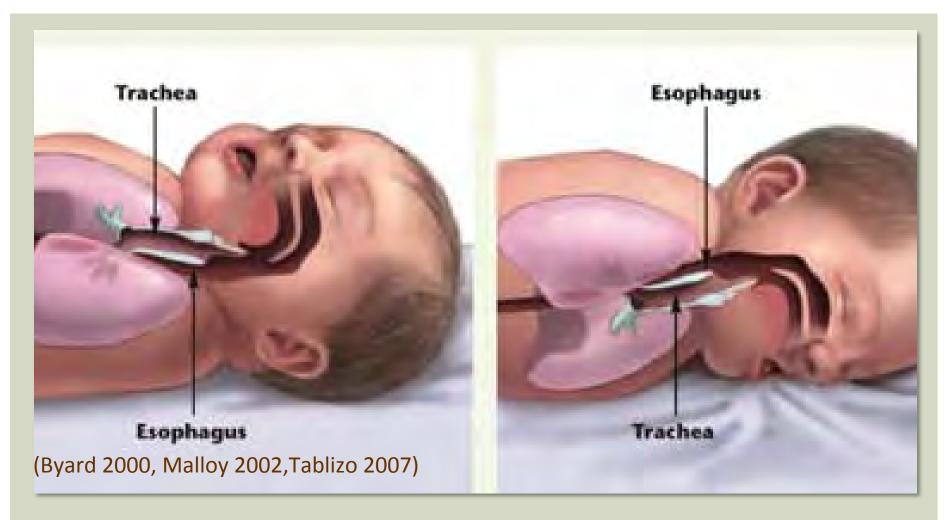








NO INCREASED INCIDENCE OF ASPIRATION SINCE THE CHANGE TO SUPINE SLEEPING



SAY YES TO SAFE SLEEP TOOLS



- Brochures
- Posters
- 30 and 60 second Public Service Announcements
- 5 minute video on Say YES to Safe Sleep

23



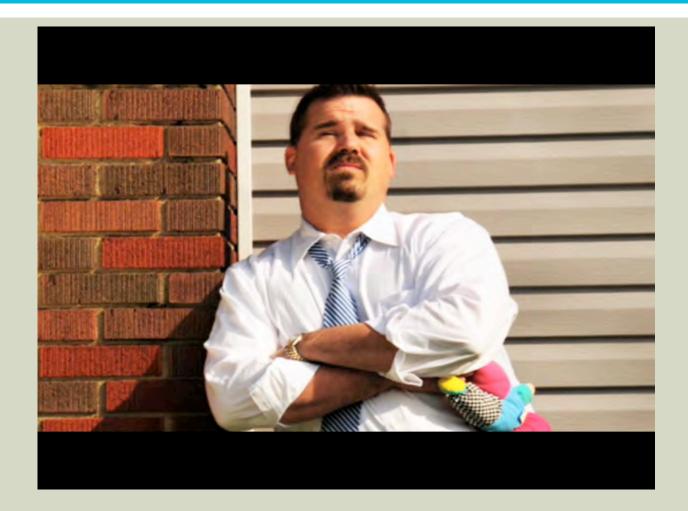
SAY YES TO SAFE SLEEP PSA (2011)



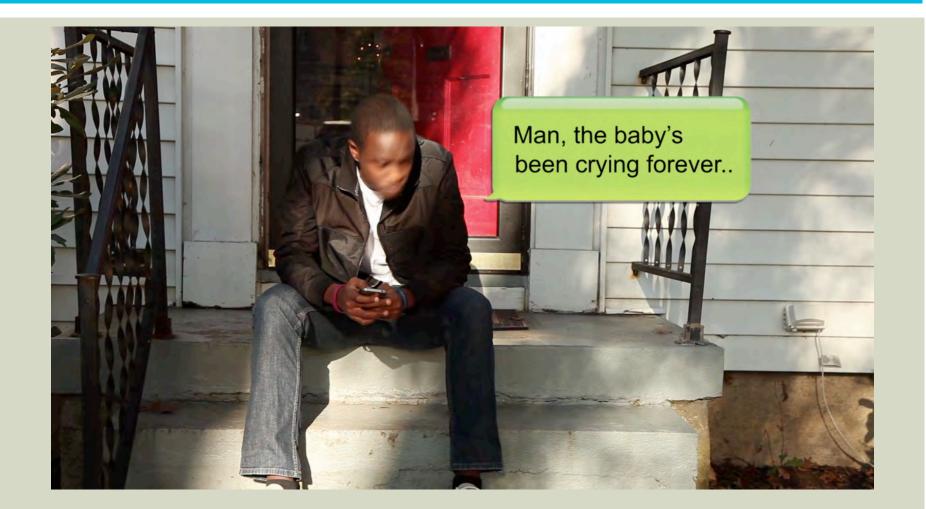
SAY YES TO SAFE SLEEP PSA (2015)



KEEP YOUR COOL PSA (2011)



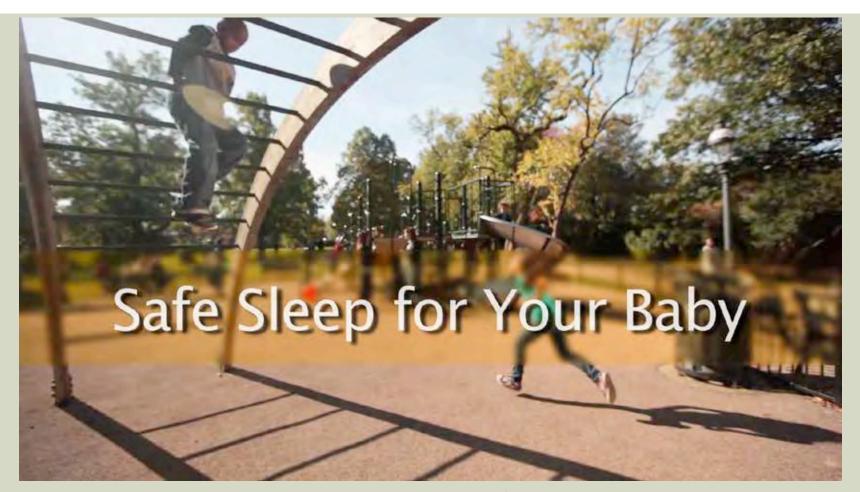
KEEP YOUR COOL PSA (2015)



SAY YES TO SAFE SLEEP 5 MINUTE VIDEO



NIH SAFE SLEEP VIDEO (10 MINS)



https://www.youtube.com/watch?v=29sLucYtvpA

MOST us CENTER FOR HEALTH AND SAFETY CULTURE

West Virginia Positive Community Norms Initiative

- Partnership with Center for Health and Safety Culture at Montana State.
- Provide communication tools to prevent child maltreatment and promote positive outcomes for children in West Virginia by:
 - growing positive parenting norms supporting safe, stable nurturing relationships (broadly),
 - creating safe sleeping environments and behaviors, and
 - reducing shaken-baby syndrome.

Norms Theories

The Actual Norm

The actual behavior or attitude of the majority of a population; what **most people** do or believe.

"How often do you smoke?" The GAP **The Perceived Norm**

The perceived behavior or perceived attitude of most people; what we think **most people** do or believe.

"How often do most students in your school smoke?" **CENTER FOR HEALTH AND SAFETY CULTURE**

MOST

West Virginia Parent Survey Overview

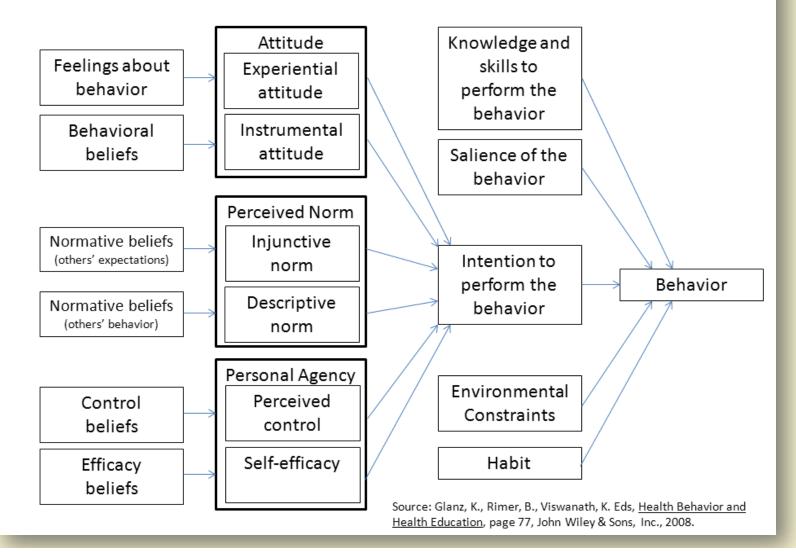
<u>Methodology</u>

- Random sample of 3,000 parents of children born in 2011, 2012 or 2013 from across West Virginia
- Mailed paper-based survey (4 contacts) with a \$2 incentive
- 663 responses (25% response rate, ±4% confidence interval at a 95% confidence level)
- Respondents: 90% female, average age was 30 years

MOST of CENTER FOR HEALTH AND SAFETY CULTURE

www.mostofus.org

Integrated Behavior Model



MOST us CENTER FOR HEALTH AND SAFETY CULTURE

www.mostofus.org

Center for Health and Safety Culture

West Virginia Positive Community Norms Parent Survey Key Findings Report March 2014

Prepared for: TEAM For West Virginia Children P.O. Box 1653 Huntington, WV 25717

> Center for Health and Safety Culture Montaria State University P.O. Box 170548, Bozeman, MT 59717 www.McstofUs.org

CENTER FOR HEALTH AND SAFETY CULTURE

www.mostofus.org

MOST

Safe Sleeping

Most parents, 88% **strongly agree**: "I believe the safety of my baby is most important when thinking about where my baby sleeps."

- However, 83% of parents did not think most parents would strongly agree.
- And, 97% of HV service providers did **not** think most parents would strongly agree. (Q23)

MOST us CENTER FOR HEALTH AND SAFETY CULTURE

Safe Sleeping

Most parents, 70% strongly agree: "Babies should only sleep or nap in safety-approved cribs, bassinets or 'pack and play' with a firm mattress that fits close to the sides."

- However, 83% of parents did not think most parents would strongly agree.
- And, 97% of HV service providers did not think most parents would strongly agree. (Q27)

CENTER FOR HEALTH AND SAFETY CULTURE

www.mostofus.org

MOST

Safe Sleeping

Most parents, 72% reported that their baby sleeps in a separate place (or sleeping surface) like a crib, bassinet, or "pack and play" more than half the time.

- However, 76% of parents thought most babies slept in a separate place half the time or less.
- And, 67% of HV service providers thought most babies slept in a separate place half the time or less. (Q20)

SAY YES TO SAFE SLEEP BROCHURE



SafeSoundBabies.com



SAY YES TO SAFE SLEEP Poster

SAY YES TO SAFE SLEEP PLEDGE CARD

Say Yes to Safe Sleep Pledge

Our Babies: safe&sound

My Say Ves to Safe Sleep Pledge to:

Vame of baby

I love you and promise to:

- Make sure that you always sleep alone, and on your back, in your crib, bassinet or pack and play, even during naptimes.
- Check to make sure your crib is safety approved, and the mattress is firm and fits close to the sides of the crib, bassinet or pack and play.
- Remove toys, heavy blankets, comforters and bumper pads from your crib, bassinet or pack and play.
- · Keep you away from places where people smoke.
- Teach anyone who takes care of you about keeping you safe when you sleep.

Signature:

Signature:

Dette

SafeSoundBabies.com

OUR BABIES: SAFE & SOUND DVD



KEEP YOUR COOL POSTER

Here's how cool dads KEEP THEIR COOL



Meet Jeff.

He loves music, fishing and the baby in his life. When the baby cries, he knows how to chill.

Make sure the baby is safe — Alone, on his Back, in his Crib.

- Make sure the baby is OK and not hungry, sick or needing a diaper change.
- Then, step away for a few minutes and do something to relax. Or call someone for help.

Never, ever shake a baby.



MOST (93%) of West Virginia parents agree it is never OK to shake a baby – even if they are very frustrated and the baby will not stop crying.



KEEP YOUR COOL BROCHURE

It's NEVER ok to shake a baby.

- Shaken Baby Syndrome usually happens when a baby's caregiver doesn't cope with long periods of crying and shakes the baby.
- Shaking a baby or hitting a baby's head can cause serious injury, even death.
- Symptoms of head injury may include fussiness, difficulty staying awake, trembling, vomiting, seizures, difficulty breathing and coma.
- If a baby has been shaken, early treatment can make a big difference. Call 911 or go to the hospital immediately.

Never, ever shake a baby



MOST (99%) of West Virginia parents agree they want to do what's best for their children.

What's best for babies is keeping them safe by keeping your cool when they cry.

> For more information visit:

SafeSoundBabies.com



irginia Claude W n's Trust Benedum

This program is being presented with financial assistance as a grant to TEAM for West Virginia Children from the WV Department of Health and Human Resources.

KEEP YOUR COOL when baby cries



Meet Sean.

He loves basketball, cars and the baby in his life. Like MOST West Virginians, Sean knows how to chill when the baby cries.

MOST (93%) of West Virginia parents agree it is never OK to shake a baby – even if they are very frustrated and the baby will not stop crying.

A quick guide to keeping your cool when the new baby cries.

KEEP YOUR COOL MOM BROCHURE

It's NEVER ok to shake a baby.

- Shaken Baby Syndrome is most
- include fussiness, difficulty staying
- treatment can make a big difference.

Never, ever shake a baby

KEEP YOUR COOL

MOST (99%) of West Virginía parents agree they want to do what's best for their children.

What's best for babies is keeping them safe by keeping your cool when they cry.

> For more information visit:

SafeSoundBabies.com





is program is being presented with financial assistance as a grant to TEAM for West Virginia Children from the WV Department of Health and Human Resources.



Cool moms KEEP THEIR COOL



Meet Kate.

MOST West Virginia parents, Kate knows exactly what to do when her baby cries.

MOST (93%) of West Virginia parents agree it is never OK to shake a baby - even if they are very frustrated and the baby will not stop crying.

> A quick guide to keeping your cool when the new baby cries,

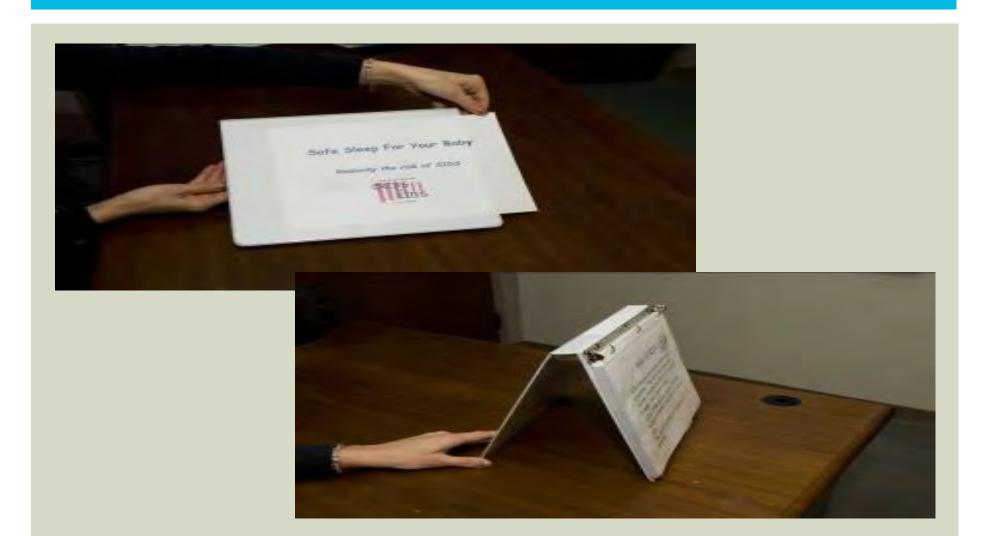
SAY YES TO SAFE SLEEP TOOLS

- Say YES to Safe Sleep web-based Training Module with key talking points for providers delivering materials
- TV and radio spots for public education
- Website: <u>safesoundbabies.com</u> for professionals & public

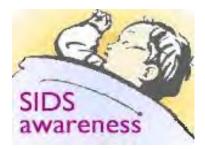




NURSES / HOME VISITORS FLIP BOOK



What is SIDS?

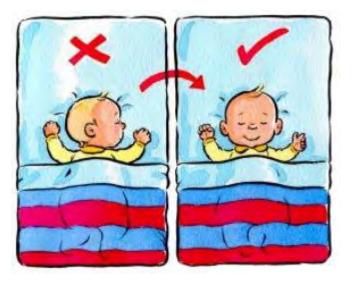


- SIDS stands for sudden infant death syndrome. This term describes the sudden, unexplained death of an infant younger than 1 year of age.
- SIDS is the leading cause of death in infants between 1 month and 1 year of age.
- The peak incidence of SIDS is 2-4 months.

1

SIDS Facts

- Babies sleep safer on their backs.
- Sleep surface matters.
- Every sleep time counts!

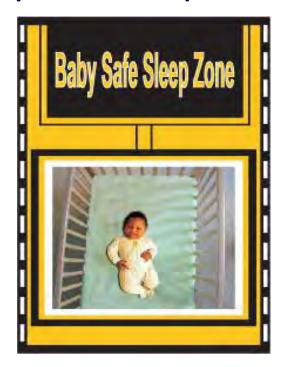


Talking points

- Babies who sleep on their stomachs are much more likely to die of SIDS than babies who sleep on their backs.
- Babies who sleep on soft bedding are more likely to die of SIDS.
- Babies who usually sleep on their backs but who are placed on their stomachs, like for a nap, are at very high risk for SIDS.

Top 10 ways to reduce SIDS! 1

• ALWAYS place your baby on his or her back to sleep, for naps and at night!



Talking points

- The back sleep position is the safest, and EVERY sleep time counts!
- Stomach sleeping DOUBLES the risk of SIDS!
- Once your baby can roll over it is not necessary to go in and reposition him or her. Just remember to start any sleep time on the back.

 Place your baby on a firm sleep surface, such as a safety-approved mattress, covered by a fitted sheet.



 Keep soft objects, toys, and loose bedding out of your baby's sleep area.



Unsafe

SAFE





Unsafe

• Do not allow smoking around your baby.





 Keep your baby's sleep area close to, but separate from where you and others sleep.



• Think about using a clean, dry pacifier when placing your infant down to sleep.









Do not let your baby overheat during sleep.



SAFE

NOT SAFE



NOT

SAFE

SAFE

17





Avoid products that claim to reduce the risk of SIDS.











Do not use home monitors to reduce the risk of SIDS.





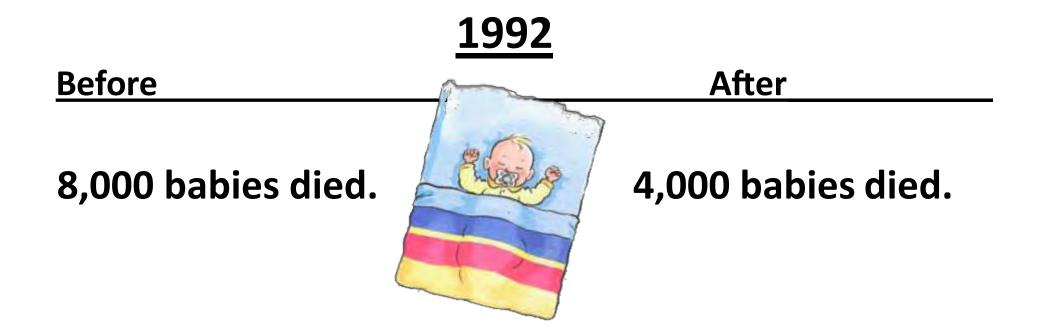


 Reduce the chance that flat spots & bald spots will develop on your baby's head.



Your baby needs Tummy Time! Place babies on their stomachs when they are awake and someone is watching. Tummy time helps your baby's head and neck muscles get stronger and helps to prevent flat spots on the head.

Q. Does Back Sleeping really work? YES!!!



30,000 babies' lives have been saved!

Q. Is there anything else I can do to keep my baby safe?



L







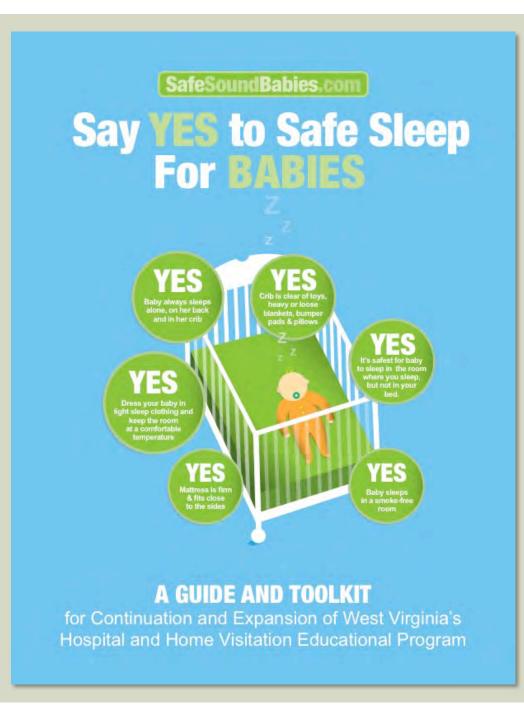


Answer

- About 1 in 5 infant SIDS deaths occur while the infant is in the care of someone else. Many times this occurs because the caregiver places the baby to sleep on his/her tummy. This is called "unaccustomed tummy sleeping" and these babies are 18 times more likely to die from SIDS!
- TALK about the SIDS risk to child care providers, grandparents, babysitters, friends, and everyone who cares for your baby!!!

WEST VIRGINIA SAY YES TO SAFE SLEEP HOSPITAL BASED PILOT PROJECT





HOSPITAL & COMMUNITY-BASED IMPORTANCE

- Reach parents early
- Nurses are important role models
 - More than 90% of parents follow sleep recommendations from MD/RN
 - 93% of parents who see infant placed prone by hospital personnel use prone (Brenner, 1998)
- Home Visitors also viewed as important role models
- Cost-effectiveness
- Prevention is part of quality

WV PILOT DESIGN

- Based on York Hospital in PA
 - Replicated in Baltimore and East Tennessee
- Modeled after AHT Program/Period of PURPLE Crying Program[®]/Dias Model
- Three Doses
 - Hospital
 - Home Visitors / Office Visits
 - Public Awareness

WV PILOT DESIGN

- Provide consistent, accurate, safe sleep messages to expectant parents, parents, and caregivers of infants under one year of age, ideally within first few weeks of baby's life
- Trained providers working with parents and babies deliver & reinforce Say YES to Safe Sleep materials

WV PILOT DESIGN

- Each family receives its own set of materials - Say YES to Safe Sleep
 Brochure, DVD, Safe Sleep Pledge distributed as one package
- Person delivering materials reviews content with parents and encourages them to share information with others

STEPS IN DELIVERING SAY YES TO SAFE SLEEP MESSAGES

- Review materials one-on-one with parents by watching DVD & reviewing brochure using provided teaching points
- Answer any questions
- Confirm there is a safe place for their baby to sleep
- Encourage parents to share materials with others
- Ask parents to sign voluntary sleep pledge promising safe sleep practices for their baby
- Reinforce messages at follow-up visits

ADDITIONAL STRATEGIES

- Wear Say YES to Safe Sleep buttons/use floor talkers
- Display posters at appropriate locations
- Add messages to call-waiting/use screen savers
- Show the Say YES to Safe Sleep DVD via closed circuit TVs in waiting rooms, hospital rooms, community events, etc.
- Set up a model nursery/safe sleep center with materials
- Continue to model safe sleep practices!

RESOURCES AND MATERIALS

- All materials are free based on AAP focus on the positive!
- Parent Say YES to Safe Sleep Kits
- Say Yes to Safe Sleep Online Training Course
- Script and Teaching Points
- Flipchart Q&A
- Sample Hospital Policies
- Sample Hospital Readiness Tool
- Community Resource Guide
- Baby Safe and Snug Book (Dose II)
- Website: www.safesoundbabies.com

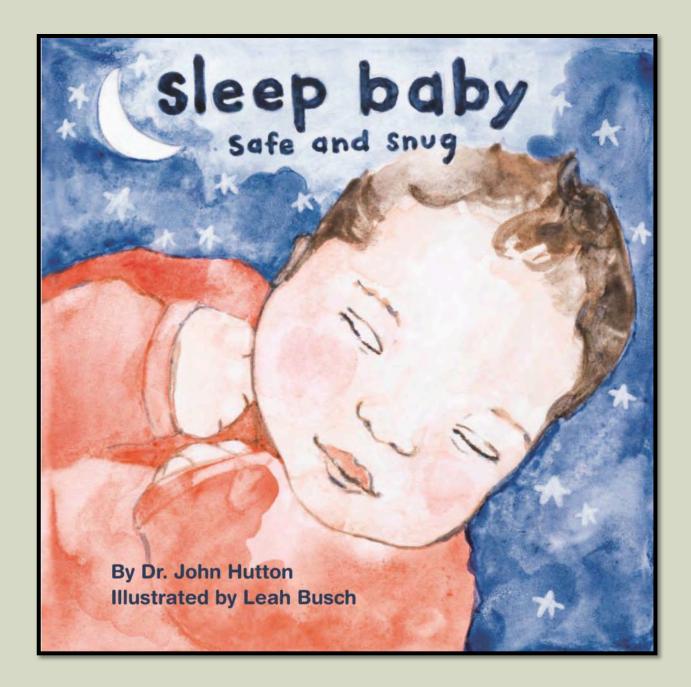


A GUIDE AND TOOLKIT for Continuation and Expansion of West Virginia's Hospital and Home Visitation Educational Program



WV First Lady, Joanne Tomblin

http://safesoundbabies.com/hospitals.html



National Action Partnership to Promote Safe Sleep A Wake-Up Call to Safeguard Sleeping Infants

The National Action Partnership to Promote Safe Sleep (NAPPSS) is part of the Maternal and Child Health Bureau's efforts to measurably reduce infant mortality.



Our Integrated Approach— Breastfeeding and Safe Sleep

- Breastfeeding is protective.
- The field has addressed feeding and sleeping separately — families don't.
- Need to bring together the power of these important behaviors.



A Theory-Driven Approach

- Ajzen's Theory of Behavior Change
- Social-ecological Model
- Diffusion of Innovation

Read more about the approach at http://nappss.org/conceptual-model.php



Ajzen's Theory of Planned Behavior

Conceptual Framework for Increasing Adoption of Safe Sleep Behaviors by Infant Caregivers

Infant caregivers believe that safe sleep behavior is desirable and protective against SUID. (Behavioral Attitude)

Safe infant sleep behavior is championed by key influencers of infant caregivers. (Subjective Norms)

Infant caregivers have skills, resources and self-efficacy to implement safe sleep behavior. (Perceived Behavioral Control) Increased prevalence of safe infant sleep behaviors by infant caregivers.

Model derived from the Theory of Planned Behavior (Azgen, 1985)

Social Ecological Model

We need safe sleep to be everybody's business.



NAPPSS Social-Ecological Model to Address Safe Sleep and Breastfeeding

Entities that can create policies, guidelines, and funding opportunities, e.g: Federal governmental agencies ,state government agencies, licensing bodies, and legislatures.

Level 1. Organizations that can directly motivate or require individual influencers to promote safe sleep, e.g. :

Employers of providers of services to families with infants; professional organizations for individual healthcare and other providers, etc. *Level 2.* Organizations that can *influence* or *require* programs, agencies, and businesses serving infant caregivers to promote safe sleep, e.g.:

Organizational membership coalitions; accrediting organizations; national centers that support federally funded programs serving families with infants., etc.

Individuals who care for infants, e.g.: Mothers, fathers, grandparents, siblings, other relatives, legal guardians, foster parents, babysitters, and child care /early education providers.

Society

Pubic Policy

Safe Sleep/Breastfeeding Experts & Leadership

Organizations

Influencers

Infant Caregivers

Societal context for promoting safe sleep and breastfeeding, e.g.: broader cultural attitudes about infant sleep and breastfeeding; public media depictions of infant sleep and feeding; political will to address child health and safety, infant mortality, and health disparities; economic contexts for funding of public health initiatives, etc.

State and Local Safe Sleep and Breastfeeding

initiatives, e.g.: FIMRs, CDRs, Title V programs, safe sleep and breastfeeding coalitions, injury prevention coalitions, state SIDS/SUID programs, CoIIN teams, MEs/Coroners, etc.

National Safe Sleep and Breastfeeding leadership, e.g.: Safe to Sleep Campaign; First Candle, CJ Foundation for SIDS, Cribs for Kids, NFIMR, National Center for Child Death Review, Children's Safety Network, CityMatCH, CPSC, researchers, US Breastfeeding Committee, La Leche League, National Association of Peer & Professional Lactation Supporters of Color, American Academy of Pediatrics, etc.

Persons who have contact with infant caregivers in everyday settings where families live, shop, worship, obtain health care and child care services e.g.: Extended family members, community opinion leaders:, faith communities, racial/ethnic advocacy groups, social or support organizations, tribal leaders, community elders ; providers of health and social services; first responders; local businesses, local media outlets, etc.

NAPPSS Actions

- Engage a strategic national coalition to create a national plan and support its implementation
- Create a national action plan
- Create Action Teams to implement key components of the plan on a national level
- Move from campaigns to conversations
- Host an interactive website to share progress, engage new partners and track the plan

Interactive Website www.nappss.org

GEORGETOWN UNIVERSITY

NAPPSS National Action Partnership to Promote Safe Sleep A Wake-Up Call to Safeguard Sleeping Infants

Home About Steering Committee NAPPSS Coalition Members Contact Us Resources Search

Click here for National Action Plan

It's time for a wake-up call. The NAPPSS project marks a new opportunity to safeguard the lives of infants at a time when understanding and reducing the risks of sleep-related infant deaths is advancing on multiple fronts. Key components are in place, including expanded professional safe sleep guidelines and a reinvigorated national campaign that has moved the needle from Back To Sleep to Safe To Sleep. But until now there has been no national coordinated strategy to engage the full set of partners to make safe sleep a national norm. Read More



Stay Connected: Safe Sleep Is Everyone's Business

We want to connect with you. Every person who represents a group that interacts with families and infants can play a role in making safe sleep a national norm. Please sign up for our mailing list to keep in communication about NAPPSS activities and resources. NAPPSS is pleased to announce the official release of the National Action Plan to Increase Safe Infant Sleep.

Making Safe Sleep a National Norm

Join us for a webinar hosted by HRSA's Maternal and Child Health Bureau to learn how your work on promoting safe sleep practices and breastfeeding fits into this national framework.

Date/Time: Wednesday, October 21, 2015 2:00-3:00 p.m. EDT

Register Now

Safe Sleep Resources

Here are resources that you, as a NAPPSS Coalition Member, can share with your constituents to move forward the safe sleep agenda:

AMCHP 2016 January 23-26 Hyatt Regency Washington

NCEMCH

ADDITIONAL RESOURCES

Our Babies: Safe & Sound – http://safesoundbabies.com

National Institutes of Health Safe Sleep Campaign - <u>https://www.nichd.nih.gov/sts/</u>

Cribs for Kids - http://www.cribsforkids.org/

First Candle - <u>http://www.firstcandle.org/</u>

NAPPSS - www.nappss.org

CONTACT INFORMATION

Jim McKay Our Babies: Safe & Sound <u>JimMcKayWV@gmail.com</u>

304.617.0099 www.safesoundbabies.org

Slides available at: http://www.slideshare.net/pcawv

Our Babies: safe&sound