

Infant Unsafe Sleeping

Issue

Despite state-wide educational efforts, infant unsafe sleeping deaths have remained constant over the last few years and account for a substantial portion of infant deaths.

Findings

Among the twelve 2017 unsafe sleeping death cases reviewed:



100%

of infants were not in a crib or bassinet



90%

of infants had unsafe bedding or toys



83%

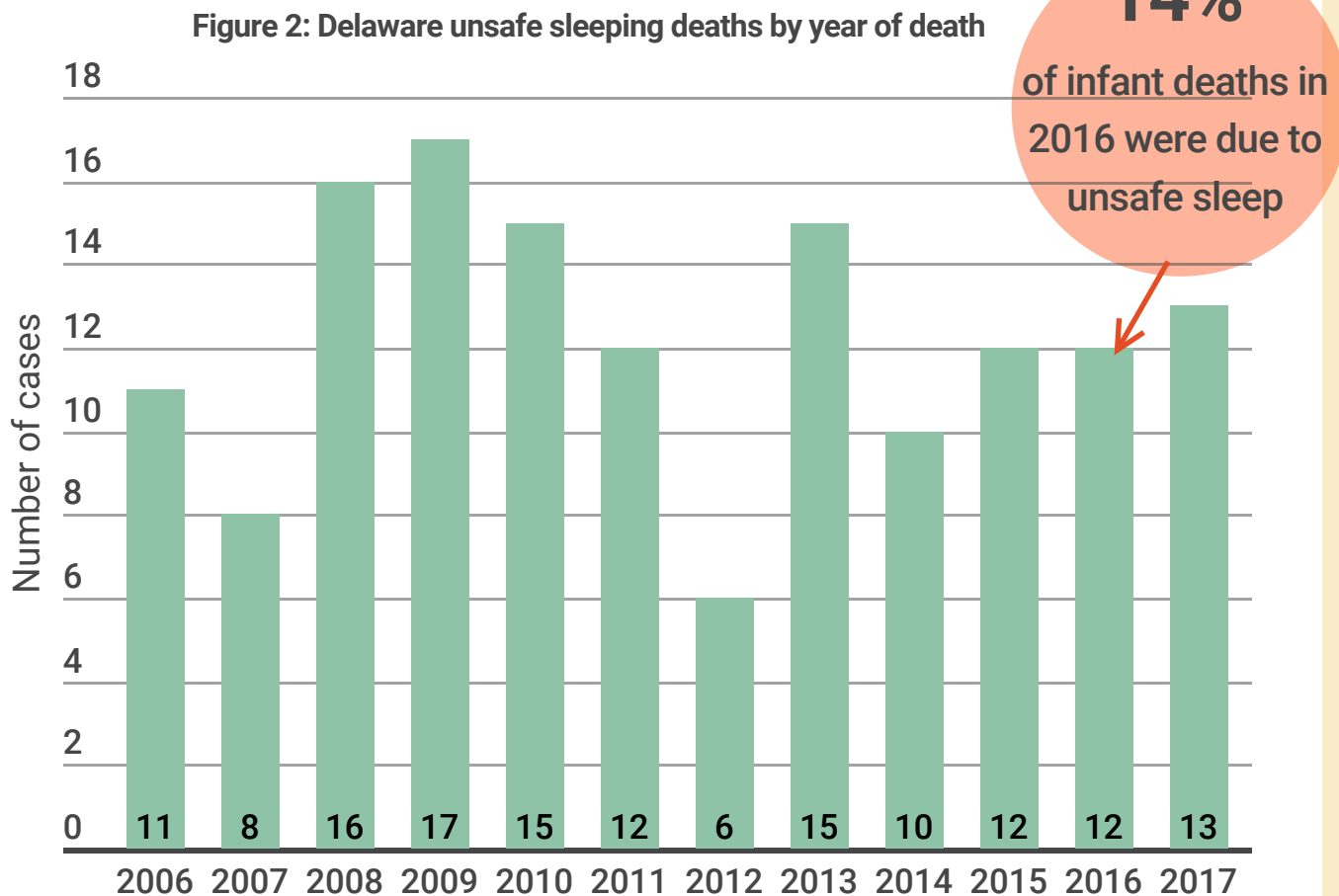
of infants were bed sharing with other people

Recommendation

The CDRC endorses providing support and education to families caring for substance-exposed infants through evidence-based home visiting programs and the Division of Family Services (DFS). The intervention must occur shortly after discharge from the birthing hospital as 60% of the infant unsafe sleeping cases reviewed in 2017 were 0-2 months of age at the time of death, and families with a caregiver impaired by drugs are at higher risk for this outcome.

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In 2016, out of 87 infant deaths statewide, 12 were due to sleep-related causes.(2 and Figure 2) That means that 14% of all infant deaths were due to infant unsafe sleep causes in 2016, the most recent year for which we have infant mortality statistics.



The CDRC has been reviewing infant unsafe sleep deaths and tracking factors associated with these cases. The main contributors to sleep-related deaths in Delaware are: infants not sleeping in a crib or bassinet (100% of deaths), infants sleeping with other people (83% of deaths), and infants sleeping with unsafe bedding or toys (90%). The following table (page 10) presents some of these key factors associated with unsafe sleep cases reviewed in 2016 and 2017.

2 Delaware Division of Public Health, Office of Vital Statistics. Delaware Vital Statistics Annual Report 2016: Infant Mortality. Accessed at <http://dhss.delaware.gov/dph/hp/2016.html> on April 24, 2018

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Factor	% 2017 cases reviewed (n=12)	% 2016 cases reviewed (n=23)
Bed sharing with other people	83%	65%
Infant was not in a crib or bassinet	100%	82%
Infant had unsafe bedding or toys	90%	83%
Infant not sleeping on back (Nat'l average is 25%)	60%	50%
Adult was drug impaired at time of death	25%	26%
Substance-exposed infant	10%	32%
Caregiver fell asleep while bottle feeding	0%	14%
Caregiver fell asleep while breast feeding	0%	9%
Family received safe sleep education	50%	45%

These findings illustrate why the **ABC's** of safe sleep are important:

Babies should sleep **Alone**, on their **Back**, and in a **Crib**



Action Steps

- The CDRC will partner closely with the Division of Forensic Sciences-Medical Examiner’s office to acquire consent for families who want to participate in the sudden death registry.
- The CDRC will enhance collaboration with DFS. This will include hosting an online webinar to educate staff on infant safe sleeping as well as training Substance Exposed DFS liaisons to be Crib for Kids distributors.
- The CDRC will undertake further de-identified analysis of the infant unsafe sleeping deaths in coordination with the Division of Public Health and a designated epidemiologist.

Some of the 2017 CDRC prevention activities included the following:

- Continued teaching at the Delaware Adolescent Program, Inc. (DAPI), Brandywine Counseling, New Expectations (a group home for adjudicated pregnant mothers with substance abuse issues), Delaware coalition of Fathers Boot Camp, daycare facilities and other venues.
- Continued oversight of the Delaware Crib for Kids Program including adding several medical providers and the Wilmington Police Department to the program.
- Distribution of the “Sleep Baby, Safe and Snug” book to every new parent at all Delaware birthing hospitals.