Infant Safety <u>OR</u> Sleep?

Parents and Professionals Struggle with 'Sleep' in Safe Sleep Practices

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The Question

Babies depend on parents and caregivers to keep them safe while they sleep.

Parents want to do what is best for their children.

Yet, despite decades of promoting evidence-based safe sleep guidelines, thousands of preventable sleep-related infant deaths still occur each year.





Key Terms

SUID | Sudden Unexpected Infant Death

Any sudden and unexpected death of an infant under 1 year of age.

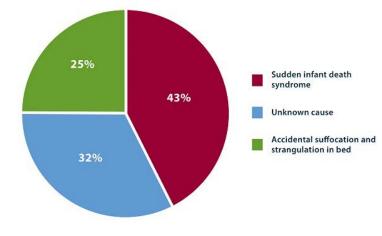
SIDS | Sudden Infant Death Syndrome

Sudden infant death of an infant under 1 year of age that cannot be explained even after a full investigation.

ASSB | Accidental Suffocation and Strangulation in Bed

Infant death caused by suffocation or asphyxiation in a sleeping environment, such as suffocation by soft bedding or being trapped between a mattress and bedframe.





SUID in the US

The prevalence of SUID has decreased thanks to public health efforts, but it has largely steadied since the 2000s.



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Safe Sleep Recommendations

Unsafe sleep practices are a factor in majority of cases diagnosed as ASSB and SIDS. Key sleep-related recommendations from the American Academy of Pediatrics (AAP) include:

- 01 | Put your baby on the back to sleep for every sleep.
- 02 | Room-share with the infant on a separate sleep surface.
- 03 | Use a firm sleep surface.
- 04 | Keep soft objects and loose bedding away from the infant's sleep area.
- 05 | Avoid overheating.

The Study

The Vermont Department of Health funded JSI Research and Training Institute, Inc. to research and design a campaign to promote safe sleep. VT,2017

VERMONT DEPARTMENT OF HEALTH

Of babies are not put on their backs to sleep

1/5

VT, 2017

1/4

Of families bedshare frequently

Methods

Interviews with professionals (N=13)

- Pediatricians
- Nurse midwife
- Nurse clinical manager
- Lactation consultants
- Assistant medical examiner coordinator
- Nurses
- Maternal child health coordinators

Focus groups with parents of infants (N=55)

- Brattleboro
- Burlington
- Morris ville
- St. Johnsbury

Results

- Many themes, but presenting a select few
- Our poster *"Setting Them up for Failure: Why Parents Struggle to Adhere to Infant Safe Sleep Guidelines"* describes the parents' perspective in more depth
- This presentation will focus more on how parents' and professionals' perspectives align in certain aspects

Parents and professionals know the guidelines, but have mixed opinions on beds haring.

"I really believe **we need to tailor our statements for mothers**. I do not agree with the AAP based safe sleep guidelines that give onesize-fits-all."

- The vast majority of parents know the basic AAP recommendations.
- Parents receive mixed messages about whether bedsharing can be safe from their family members, friends, media sources, as well as providers.
- Both parents and professionals varied with regard to their openness to bedsharing.

Parents face challenges following the guidelines.

"My other baby will sleep on his belly on my chest and **he won't sleep any other way**. I'll just sit there with him on my chest for hours."

"At 2-3 weeks old, we decided **the bassinet didn't work**, so we took him in the bed." Parents described having difficulty (baby will not sleep/stop crying) when attempting to follow safe sleep guidelines. They felt they had to choose between sleep and safety.

"I never intended to co-sleep. He started in a crib, but late night feedings are awful. It's conflicting because I know what's best and I know he is supposed to be in his own crib, but he won't sleep in a crib and will not sleep through the night. It's hard for me going with what's best and recommended, versus what's best for me and the baby."

Parents want assistance that is respectful and relevant to them.

"We switched doctors because we felt we couldn't be honest with the doctor anymore... Why should you have a doctor you can't be honest with if they are going to be judgmental?"

- Some parents who beds hared had a strong distrust of healthcare providers, WIC staff, and other professionals.
- Parents asked for additional guidance and support that treated them as good, competent parents with unique babies and situations.

"As moms, we all want our babies to be at their safest. It's important for me to be able to trust my instincts."

Professionals struggle with how to respond to parents' safe sleep difficulties.

"You hear parents who say, my baby will only fall asleep on my chest. **I don't know what the right thing is to say** to those parents when they're completely sleep deprived and exhausted. I don't know what to say when the baby is screaming once you put them down."

- Professionals, regardless of their beliefs about beds haring safety, described feeling sympathy for the challenges parents faced, and uncertainty as to how to advise parents.
- Most interviewees felt supportive of offering information to minimize the risks of bedsharing, but were concerned about sending mixed messages.

The Question

Why do parents, who know the safe sleep guidelines, not follow them?



The Answer*

It is hard to get babies to sleep in a safe sleep environment.

* Or, the main explanation underlying our research team's interpretation of this particular set of data, which does not fully represent the breadth and depth of perspectives on this complex issue.



The Implications

- 1. Education on the AAP guidelines is insufficient to change behavior.
- 2. There is an unmet need for guidance on how to get babies to sleep (in a safe sleep environment).
- 3. Future safe sleep campaigns must target both parents and providers, emphasizing non-judgment, infant sleep education, and parent self-efficacy to stick with safe sleep practices over time.

Thank you.

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