

Healthy Native Babies Project: Honoring the Past, Learning for the Future

A Collaboration Between the *Healthy Native Babies Project* Workgroup and the *Eunice Kennedy Shriver* National Institute of Child Health and Human Development (NICHD),

National Institutes of Health (NIH)







Healthy Native Babies Project Training

Welcome!

- What is your name?
- What is your community?
- What do you do in the community related to infant health and safety?
- What do you hope to get out of this training?



Training Objectives

After completing this training, participants will be able to:

- Describe the disproportionately higher rates of Sudden Unexpected Infant Death (SUID), Sudden Infant Death Syndrome (SIDS), and sleep-related causes of infant death for American Indian/Alaska Native (AI/AN) infants.
- Identify facts and myths about SIDS, and explain what is currently known about SIDS risk factors.
- Define actions that families and communities can take to reduce SIDS risk.
- Communicate safe sleep messages.



Opening Activities





Healthy Native Babies Project

A History of this Project:

- Staff from the NIH met with Al/ANs and other federal partners starting in 2002.
- They formed a workgroup to create an outreach initiative.
- The effort focused on areas with highest SIDS rates: U.S. Northern Tier.
- Outreach to communities and workgroup activities inspired the creation of the *Healthy Native Babies Project* Workbook, Toolkit, Resources, and training.



Project Materials & Tools

- Healthy Native Babies Project Workbook Packet
 - Workbook with 5 content chapters and appendices
 - Toolkit Disk
 - Handouts
- Healthy Native Babies Project Facilitator's Packet
 - Resources Disk
 - Facilitator's Guides and Presentations
 - Activities
 - Tests and Assessments
- Train-the-Trainer Sessions
- Mini-Grant Implementation and Support



You are the key to success!





Chapter 1: Facts About SIDS

What are the facts about SUID and SIDS?





What is Sudden (Inexpected Infant Death (SUD)?

 SUID refers to infant deaths that occur suddenly and unexpectedly.



SUID = ALL Unexpected Deaths

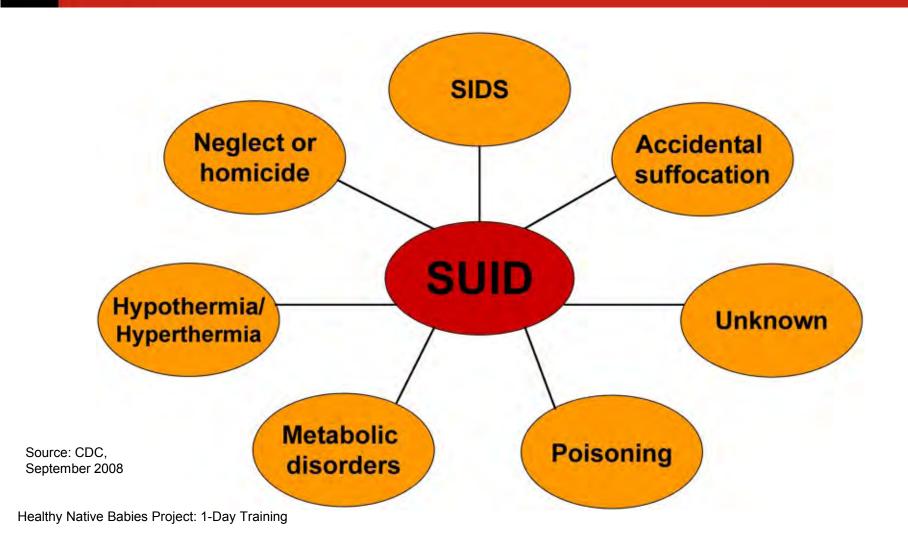
SUID includes both explained and unexplained infant death.

- Explained
 - Poisoning
 - Head injury
 - Metabolic disorders
 - Neglect or homicide
 - Hypo or hyperthermia
 - Accidental suffocation

- Unexplained
 - SIDS
 - Cause unknown or unspecified, for example: Cannot rule out suffocation from unsafe sleep environment



Types of SUID





Incidence of SUID

- Approximately 4,200 infants die of sleep-related SUID.
- One-half of these deaths are categorized as SIDS.



What is SIDS?

SIDS is the sudden death of an infant younger than 1 year of age that remains unexplained after a thorough case investigation, including:

- Performance of a complete autopsy;
- Examination of the death scene; and
- Review of the clinical history of the infant.



Incidence of SIDS

- 2,226 infants died from SIDS in the United States in 2009.
- SIDS rates are declining in the United States, but disparities still exist among certain populations.

Source: CDC. Infant Mortality Statistics from the 2009 Period Linked Birth/Infant Death Data Set. National Vital Statistics Report, 61(7)



5105 is...

- The leading cause of infant death between 1 month and 1 year of age
- A sudden, silent medical disorder
- Determined after autopsy, exam of death scene, and review of medical records
- 2 times to 4 times more likely to occur in Al/AN babies



5105 is NOT...

- Fully understood, but risks can be reduced
- Caused by suffocation
- Caused by diphtheria, pertussis and tetanus (DPT) vaccine, or other shots or vaccines



5105 is NOT...

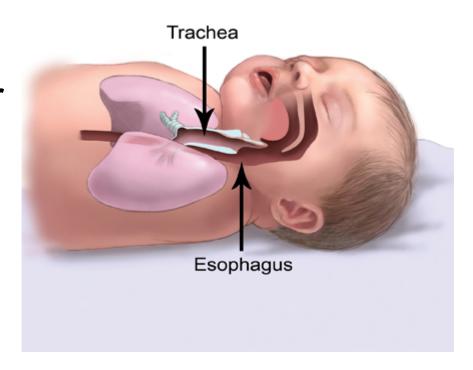
- Contagious
- Result of child abuse or neglect
- Caused by cribs
- Caused by choking or vomiting
- The cause of every unexpected infant death



Back Sleeping Does Not Cause Vomiting or Choking

When a baby is in the back sleeping position, the trachea lies on top of the esophagus.

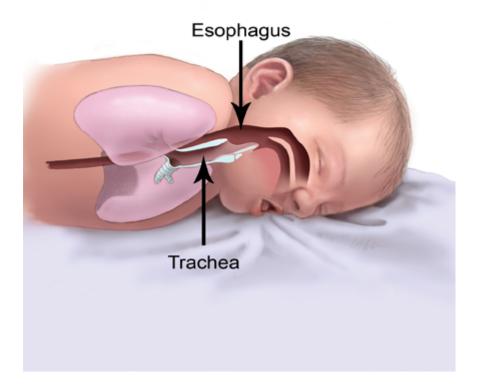
Anything regurgitated or refluxed from the esophagus must work against gravity to be aspirated into the trachea.





Stomach Sleeping Could Cause Vomiting or Choking

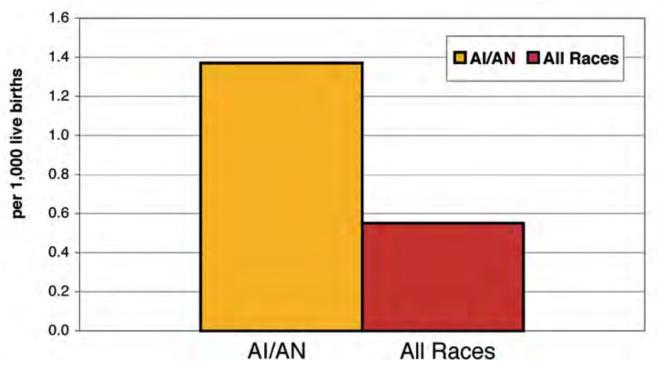
When a baby is in the stomach sleeping position, anything regurgitated or refluxed will pool at the opening of the trachea, making it easier for the baby to aspirate or choke.





Proportion of Infant Deaths Due to SIDS

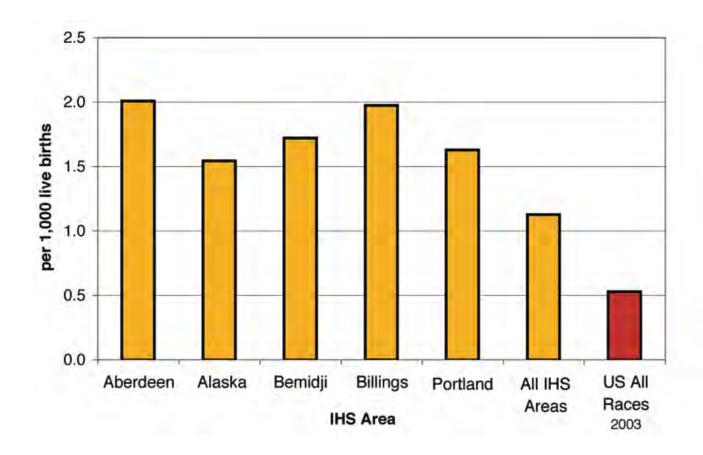
Al/AN SIDS Rates for Urban Indian Health Organization Counties 1997-2003*



^{*}Data for counties with greater than 250,000 total population only.
Source: National Center for Health Statistics, CDC; prepared by the Urban Indian Health Institute.



AVANSIDS Rates 2002-2004



Source: National Center for Health Statistics, CDC; prepared by the Indian Health Service (IHS) Office of Program Statistics



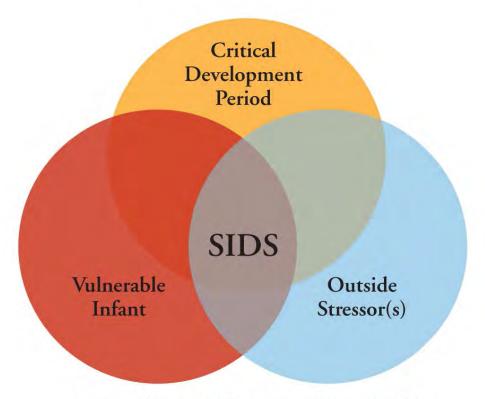
What causes SIDS?

- Biological Basis for SIDS:
 - Brainstem abnormalities
 - Genetic susceptibility
 - Affected infants may lack coordination of vital systems: breathing, blood pressure, temperature, reflexes, waking, and sleeping
- But these alone aren't likely to cause death.



What causes SIDS?

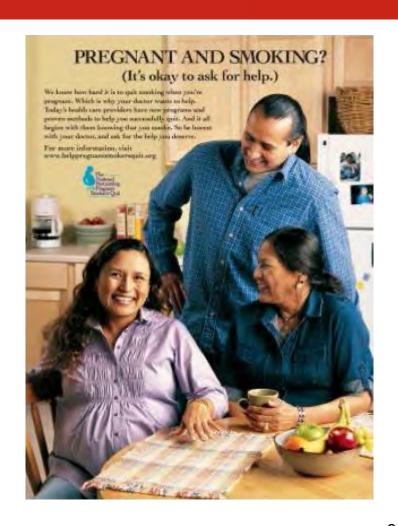
Triple Risk Theory



Adapted from Filiano & Kinney 1994.



- Overheating
- Alcohol Use
- Commercial Tobacco Use
- Pregnancy-Related Factors
- Sleep Position
- Soft Sleeping Surfaces and Loose, Fluffy Bedding
- Bed Sharing





Overheating

- Increases chance baby will sleep too deeply
- Can occur if:
 - Baby is overdressed;
 - Room is too warm; or
 - Baby is covered in too many blankets.
- Check for signs: sweating, damp hair, flushed cheeks, heat rash, rapid breathing



Alcohol Use (during pregnancy & after baby's birth)

- One binge episode during first 3 months of pregnancy increases risk of SIDS 8 times.
- Any drinking 3 months prior to and during first
 3 months of pregnancy increases risk 6 times.
- Alcohol use during breastfeeding can cause drowsiness, deeper sleep, weakness, and decreased growth in the infant.



Commercial Tobacco Use (during pregnancy & in baby's living environment)

- Tobacco decreases growth and function of baby's developing brain, nerves, and organs.
- Infants who die of SIDS have higher levels of nicotine in their lungs than infants who die from other causes.



Pregnancy-Related Factors

- Not receiving early regular prenatal care
- Preterm labor/birth and low birth weight



- Sleep Position
 - The most effective action that parents and caregivers can take to lower the risk for SIDS is to always place the baby on his or her back to sleep, for naps and at night.
 - Every sleep time counts!

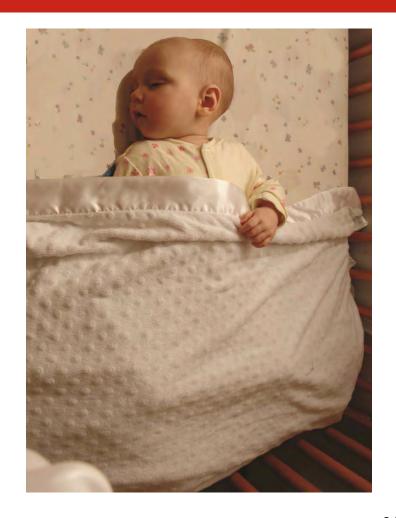


- Sleep Surface and Sleep Environment
 - Firm sleep surface
 - No objects, toys, or loose bedding
 - No crib bumpers
- Overheating
 - No more than 1 layer more than what an adult would wear to be comfortable





- A blanket is not recommended, but if using a blanket, use "feet to foot" method:
 - Feet at end of crib
 - Blanket tucked under mattress
 - Blanket no higher than chest
 - Sleep clothing that is appropriate to room temperature





Alternative Sleep Surfaces*



^{*} Babies should be placed on their backs. No data exists on the safety of these items. Caregivers must be careful about baby turning over and flipping the basket/box.



- Choose safe sleep locations.
- Use separate sleep area in the same room as parent or caregiver.





- Always place baby on his or her back to sleep—for naps and at night.
- Never place a baby to sleep or sleep with the baby on an armchair, couch, sofa, or waterbed.
- Remove soft items (pillows, toys, quilts, comforters, sheepskins) from the sleep area.



- Do not cover the baby with adult bedding.
- Do not sleep with baby if you have had alcohol, smoke tobacco, or take drugs or medicines that make you sleepy.



Some health care providers in Al/AN communities suggest these actions* *might reduce the risk of accidental suffocation*:

- Move bed away from walls and other furniture.
- Place mattress low to or on the floor.
- Place baby in the area just above where adult heads are in the bed.
- Do not allow siblings, other children, or pets in the bed.

^{*}Remember, though, that the safest option for baby is a sleep area close to but separate from where others sleep.



Lowering SIDS Risk

- Breastfeeding has a protective effect against SIDS.
- Give your baby a dry pacifier that is not attached to a string for naps and at night.





Lowering SIDS Risk

- Have Public Health Nurse visit the home.
 - Aberdeen Area Infant Mortality Study showed that infants were less likely to die of SIDS if their mothers received visits from a Public Health Nurse before and after giving birth.



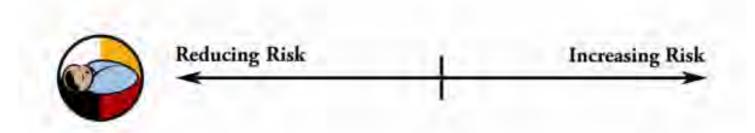


The Following Do Not Reduce the Risk of SIDS

- These items should be avoided for use to reduce the risk of SIDS.
 - Commercial products (e.g., wedges, positioners) that claim to reduce SIDS.
 - Home health monitors that claim to reduce the risk of SIDS.



Risk Reduction



- Risk reduction is a behavioral change concept.
- Individuals make their own choices about what they are willing/able to change.
- Informed choice is our goal.



Understanding the Messages Activity

Workstations:

- Learn how to put information into action:
 - Safe Sleep Environment
 - Safe Sleep Messages





Remember Tummy Time!

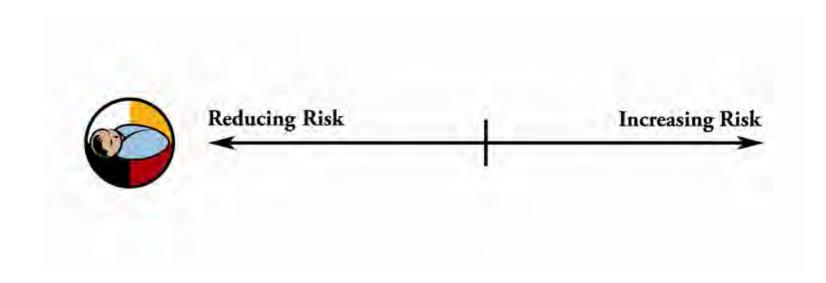
 Give babies plenty of tummy time when they are awake and someone is watching.





Risk Continuum Activity

Learn about the Risk Continuum.





Barriers and Challenges Activity

Brainstorming:

• What are the barriers and challenges that you might encounter when spreading safe sleep messages in your community?





Enjoy your lunch!

The afternoon session will begin after lunch.





Workbook Chapters 3, 4, and 5

- Strategies for Reaching Communities:
 - Knowing your audiences
 - Taking action
 - Planning and sustaining your project





Who needs SIDS education?

- Parents and Parents-to-Be
- Foster Parents and Families
- The Community
 - Elders
 - Youth
 - Other Family and Friends





Who needs SIDS education?

 Child care providers are a critical audience for SIDS riskreduction information.





Who needs SIDS education?

- Health Care Providers
 - Doctors
 - Dentists
 - Nurses
 - Midwives
 - Pharmacists
 - Public Health Educators
- Emergency Personnel and First Responders
- All Community Members





Good Relationships





Be consistent!

- It is important to be consistent with your safe sleep messages:
 - Same information
 - Same messages
 - Same images and methods
- Why is it important? SIDS risk is 8 times higher when a baby used to sleeping on her/his back is placed on tummy to sleep (even for "just a nap")!



Be effective.

- Use of fear, guilt, and shame is usually not effective in sustaining new desirable behaviors.
- Focusing on effective actions that people can take to reduce the risk of SIDS is a more effective and respectful tactic.





Special Audiences

Hard-to-Reach Groups

- Remember to consider "hidden" groups that need SIDS information.
- Go to them if they are unable to come to classes, health fairs, and gatherings.
- Collaborate with community outreach services to reach out to them.



Special Audiences

- Homeless
- The Incarcerated
- Those Using Alcohol or Substances
- Families Affected by Mental Health Problems
- Families Affected by Fetal Alcohol Spectrum Disorders (FASD), Fetal Alcohol Syndrome (FAS), or Learning Disabilities



Reaching Out

When reaching out, be persistent.

- Go to where the people are!
- Use community outreach services.
- Provide additional support for those affected by FASD, FAS, or other learning impairments.

















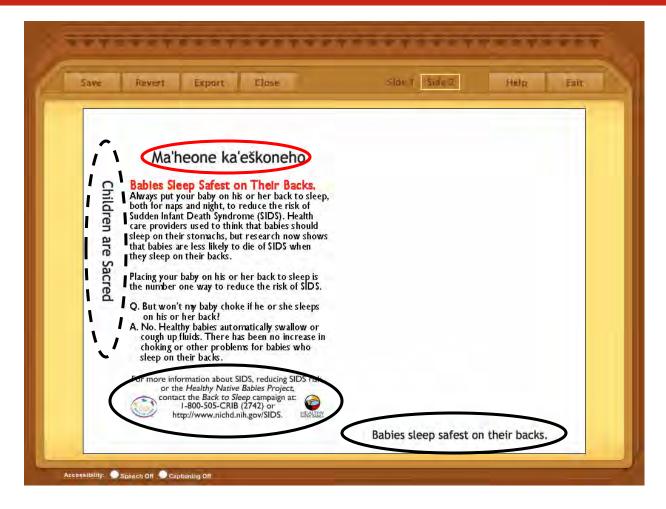




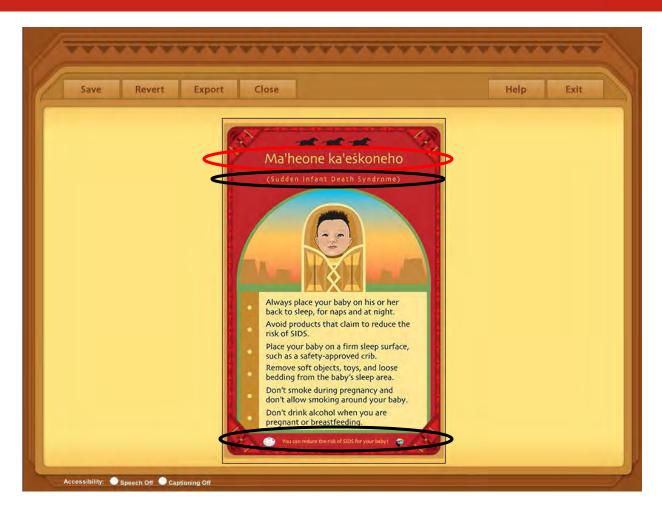














Problem - Solving Activity

 Use what you know to address special issues and audiences.





Healthy Native Babies Project Challenge Activity

Show what you have learned about SIDS, SIDS risk reduction, and spreading safe infant sleep messages in your community.





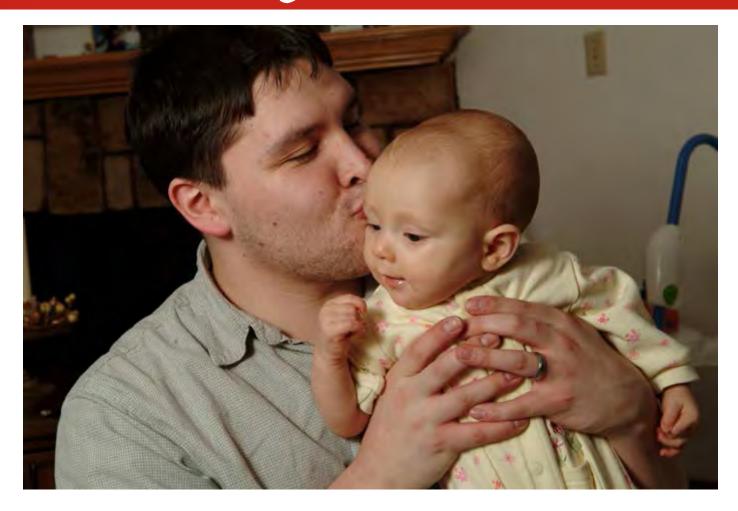
Round Dance Review Activity

 Review what you have learned and ask any questions you may have.





Commitment To Use Healthy Native Babies





Celebrate successes!









Thank you!





Resources

http://www.nichd.nih.gov/sids



