



# Safe Sleep in Nebraska

## Maternal Child Health Topics in Nebraska

SUIDS/SIDS is the sudden and unexplained death of a baby less than one year old in which the cause was not obvious before investigation.<sup>1</sup> These deaths often happen during sleep or in the baby's sleep area.

Sleep-related infant deaths are the leading cause of infant death after the first month of life and the third leading cause of infant death overall.<sup>2</sup> About 3,500 babies in the United States die suddenly and unexpectedly each year. Over a 5 year time period (2013 to 2017), Nebraska had an average of 24 SUID deaths per year.<sup>3</sup> Even one death is too many.

For a full review of safe sleep practices, refer to the Nebraska Safe Babies campaign brochure, "[ABCs of Safe Sleep](#)."



Safe sleep practices should be recommended to all families by health care workers during appointments.

### National Safe Sleep Goals

Nebraska's Safe Sleep Data* (Nebraska PRAMS 2017-2018)	Title V National Performance Measure <sup>4</sup>	Healthy People 2020 Objective (MICH-20) <sup>5</sup>
86.3% of babies are placed to sleep on their backs	78.4% of babies are placed to sleep on their backs	75.9% of babies are placed to sleep on their backs

\* In Nebraska some race/ethnicity, age, and education demographics are below the Healthy People 2020 Objective.

### The American Academy of Pediatrics recommends...

## The ABCs of Safe Sleep

I sleep safest



A safe sleep environment including supine positioning, the use of a firm sleep surface, room-sharing without bed-sharing, and the avoidance of soft bedding and overheating.

Additional recommendations for SIDS reduction include breastfeeding; regular prenatal care; routine immunization; use of a pacifier; and the avoidance of exposure to smoke, alcohol, and illicit drugs.<sup>6</sup> ([link](#))

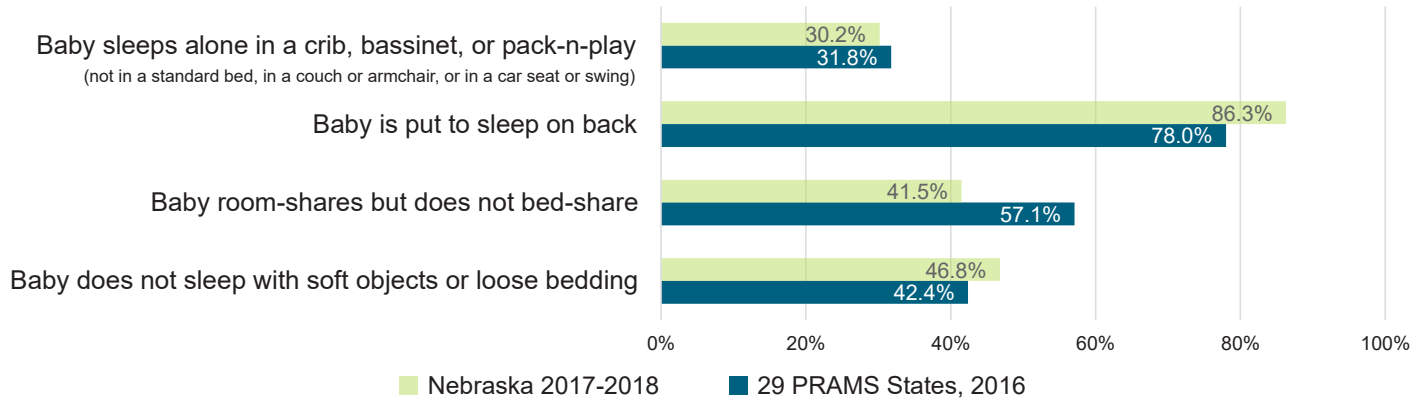
### In This Fact Sheet...

## UP NEXT

In this fact sheet, Nebraska safe sleep data is presented, protective and risk factors are reviewed, and a call to action is recommended.

## Nebraska Safe Sleep Data

Figure 1: Safe Sleep Practices



Source: Nebraska PRAMS 2017-2018;  
2016 PRAMS Data from 29 States taken from Hirai, et al (2019)<sup>7</sup>;  
Measurement of safe sleep practices followed the methods outlined in Hirai, et al (2019).<sup>7</sup>

**In Nebraska, only 12.7% of mothers practice all of these recommended sleep practices**

Demographic disparities by race/ethnicity, mother's education, age, and poverty status are available for each safe sleep practice in Nebraska.

Access this data at: [www.dhhs.ne.gov/PRAMS](http://www.dhhs.ne.gov/PRAMS)

## Protective Factors for Safe Sleep

In 2016, the AAP recommended caregivers engaged in protective factors for safe sleep including breastfeeding; regular prenatal care; routine immunization; use of a pacifier; and the avoidance of exposure to smoke, alcohol, and illicit drugs.

Nebraska mothers with new babies report that...

- 56.6%** were exclusively breastfeeding at 4 weeks postpartum
- 99.3%** had taken their baby for a well-baby checkup
- 87.5%** were not smoking after having their new baby
- 97.7%** had banned smoking anywhere in their house
- 46.0%** were not drinking alcohol after having their new baby



### **Featured Data Sources**

Nebraska Pregnancy Risk Assessment Monitoring System (PRAMS) is an ongoing population-based surveillance system of maternal behavior and experiences before, during, and shortly after pregnancy. Data presented in this publication are based on 2,569 completed surveys representing Nebraska mothers who gave birth to live infants between 2017-2018. PRAMS data is self-reported.

For more information, visit [www.dhhs.ne.gov/PRAMS](http://www.dhhs.ne.gov/PRAMS)

## Call to Action

Health care workers should discuss and recommend safe sleep practices with new mothers and expecting parents.

- Use Nebraska Safe Babies Campaign materials with patients. →
- Babies should be placed to sleep alone, on their back, in a crib, bassinet, or pack-n-play, in the mother's room.
- Sleep sacks are safe and encouraged.
- Daily tummy time helps build baby's muscles.



Encourage the use of protective factors for safe sleep—limit exposure to risk factors.

Explore the NICHD [Safe to Sleep campaign](#). This campaign includes provider training modules with integrated behavior change methods like motivational interviewing and caregiver & family materials.

## What's Happening with Safe Sleep in Nebraska?

*As of January 2020*

- [Nebraska Revised Statute 71-605](#) requires each sudden and unexpected death of a child between the ages of one week and three years to have an autopsy performed to determine cause of death.
- The DCHD Fetal Infant Mortality Review (FIMR) program acts as an agent for the Nebraska Child and Maternal Death Review Team. FIMR gathers, investigates and interprets information on infant deaths, including SIDS/SUID deaths, in Douglas County. For more information, please go to: <https://www.douglascountyhealth.com/infant-and-child-health/fimr>.
- Each potential SIDS death is reviewed statewide by the Child Death Review Team. The team publishes annual recommendations for prevention based on the yearly data review.
- [Nebraska Revised Statute 71-2103](#) requires every hospital, birth center, or other medical facility that discharges a newborn child to provide a video presentation and printed materials on safety measures which can be taken to prevent sudden infant death and the dangers associated with infants sleeping in the same bed with other children or adults.
- Starting in 2017, Nebraska DHHS led the Safe Sleep Campaign with birthing hospitals in Nebraska to educate hospital personnel and parents of new babies about safe sleep recommendations. In 2019, a companion clinic campaign was launched to further awareness.

### References:

1. About SIDS and SUID. (2018, December 31). Retrieved January 31, 2020, from <https://www.cdc.gov/sids/about/index.htm>
2. Task Force on Sudden Infant Death Syndrome. SIDS and Other Sleep-Related Infant Deaths: Expansion of Recommendations for a Safe Infant Sleeping Environment. (2011). *Pediatrics*, 128(5), e1341–e1367. doi: 10.1542/peds.2011-2284
3. Data and Statistics for SIDS and SUID. (2019, September 13). Retrieved January 31, 2020, from <https://www.cdc.gov/sids/data.htm>
4. National Performance Measures. (n.d.). Retrieved January 31, 2020, from <https://mchb.tvisdata.hrsa.gov/PrioritiesAndMeasures/NationalPerformanceMeasures>
5. MICH-20 Data Details. (n.d.). Retrieved January 31, 2020, from [https://www.healthypeople.gov/node/4857/data\\_details](https://www.healthypeople.gov/node/4857/data_details)
6. SIDS and Other Sleep-Related Infant Deaths: Updated 2016 Recommendations for a Safe Infant Sleeping Environment. (2016). *Pediatrics*, 138(5). doi: 10.1542/peds.2016-2938
7. Hirai, A. H., Kortsmitt, K., Kaplan, L., Reiney, E., Warner, L., Parks, S. E., ... Shapiro-Mendoza, C. K. (2019). Prevalence and Factors Associated With Safe Infant Sleep Practices. *Pediatrics*, 144(5). doi: 10.1542/peds.2019-1286