# Infant Safe Sleep Practices Virginia — PRAMS, 2012-2015

# **Background**

This report contains site-specific data on infant sleep practices as reported in PRAMS 2012-2015 and overall estimates for 34 PRAMS sites for 2015. Progress towards meeting the national infant sleep position goal as specified in Healthy People 2020 is presented.

Every year in the United States there are about 3,500 sleep-related infant deaths, including those from sudden infant death syndrome (SIDS), accidental suffocation and strangulation in bed, and unknown causes. To reduce risk factors for sleep-related infant deaths, recommendations from the American Academy of Pediatrics (AAP) for safe sleep include:

- placing the infant on his or her back on a firm sleep surface such as a mattress in a safety-approved crib or bassinet,
- having the infant and caregivers share a room, but not the same sleeping surface, and
- avoiding the use of soft bedding (e.g., blankets, pillows, and soft objects) in the infant sleep environment.

Additional recommendations to reduce the risk for sleep-related infant deaths include breastfeeding, providing routinely recommended immunizations, and avoiding prenatal and postnatal exposure to tobacco smoke, alcohol, and illicit drugs.<sup>2</sup>

# **Pregnancy Risk Assessment Monitoring System (PRAMS)**

PRAMS collects site-specific, population-based data on maternal attitudes and experiences before, during, and shortly after pregnancy. Mothers are surveyed 2 to 6 months after delivery. PRAMS sites that met or exceeded the response rate thresholds for 2012-2014 (60%) and 2015 (55%) are included in overall estimates. Results presented in this report include both responses to "Core" questions (asked by all PRAMS sites) and to "Standard" questions (optional).

### **National Infant Sleep Position Goals**

The Healthy People 2020 Objective and Title V National Performance Measure on infant sleep position are tracked using PRAMS data.<sup>3,4</sup>

National Goals	Sleep Position		
Healthy People 2020 Objective <sup>3</sup>	MICH-20: Increase the proportion of infants who are put to sleep on their backs from 68.9% to 75.8%		
Title V National Performance Measure⁴	NPM 5: To increase the number of infants placed to sleep on their backs		

Note: The data sources for infant sleep position differ between Healthy People 2010 and Healthy People 2020. The data source for the Healthy People 2010 infant sleep position objective (MICH-16-3) was the National Infant Sleep Study, NIH, NICHD, an annual telephone survey of approximately 1,000 parents of infants. Data for this objective (MICH-20) come from the Pregnancy Risk Assessment Monitoring System and the California Maternal and Infant Health Assessment (MIHA). The baseline estimate was produced from 2007 data from 29 PRAMS sites combined with data from MIHA.<sup>3</sup>

# Virginia PRAMS: Infant Safe Sleep Practices

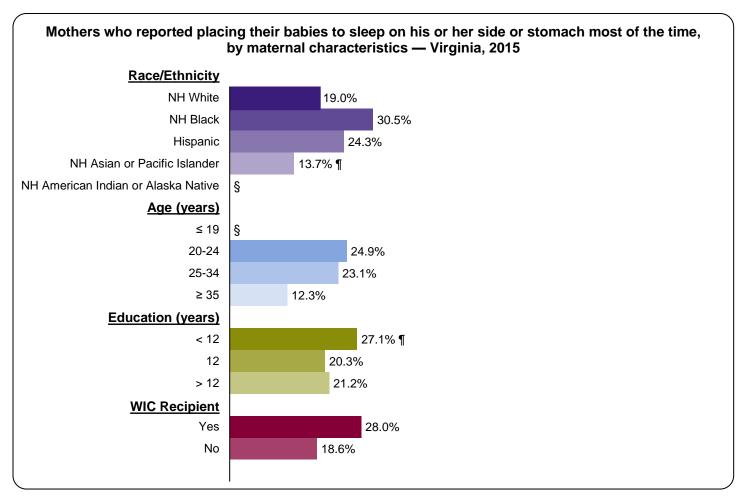
# **Infant Sleep Position**

Core PRAMS Indicator	Virginia % (95% CI)*				34 PRAMS Sites % (95% CI)*
	2012	2013	2014	2015	2015
On his or her side or stomach	†	†	†	22.0 (18.2-26.2)‡	21.6 (20.9-22.3)‡

Question Wording: "In which one position do you most often lay your baby down to sleep now? (check one answer)"

Note: A small percentage of respondents (<4%) selected more than one sleep position and are included in "on his or her side or stomach" category.

# Which mothers placed their baby on their side or stomach to sleep?



Abbreviation: NH = Non-Hispanic; WIC = The Special Supplemental Nutrition Program for Women, Infants, and Children

<sup>&</sup>quot;34 PRAMS Sites" includes AL, AK, AR, CO, CT, DE, HI, IL, IA, LA, ME, MD, MA, MI, MO, NE, NH, NJ, NM, NY (excluding NYC), NYC, OH, OK, OR, PA, TN, TX, UT, VT, VA, WA, WV, WI, and WY

<sup>\*</sup> Weighted Percent (95% Confidence Interval)

<sup>†</sup> PRAMS site-level data unavailable

<sup>‡</sup> Met or exceeded the Healthy People 2020 objective to put 75.8% of infants to sleep on their back

 $<sup>\</sup>P$  < 30 respondents; not reported.

<sup>§ &</sup>lt; 60 respondents; may not be reliable.

# Virginia PRAMS: Infant Safe Sleep Practices

## **Soft Bedding**

Standard PRAMS indicator	Virginia % (95% CI)*				Subset of PRAMS Sites % (95% CI)*
-maioatoi	2012	2013	2014	2015	2015
Any soft bedding**	t	†	†	†	38.5 (37.5-39.5)
Pillows	†	†	†	Ť	7.1 (6.6-7.7)
Plush or thick blankets	†	†	†	†	17.5 (16.8-18.3)
Bumper pads	†	†	†	†	19.1 (18.3-19.9)
Stuffed toys	†	†	†	†	3.1 (2.8-3.5)
Infant positioner	t	†	†	†	6.2 (5.7-6.7)

Question wording: "Listed below are some things that describe how your new baby usually sleeps." Respondents were asked to select "yes" or "no" for the following items: "pillows," "thick or plush blankets," "bumper pads," "stuffed toys" and "infant positioner."

# **Bed Sharing**

Standard PRAMS Indicator	Virginia % (95% CI)*				Subset of PRAMS Sites % (95% CI)*
maicatoi	2012	2013	2014	2015	2015
Any††	†	†	†	63.9 (59.2-68.3)	61.3 (59.9-62.7)
Rarely or sometimes	†	t	†	40.6 (35.9-45.3)	37.0 (35.6-38.4)
Often or always	†	†	†	23.3 (19.5-27.6)	24.3 (23.0-25.6)
Never	†	†	†	36.1 (31.7-40.8)	38.7 (37.3-40.1)

Question wording: "How often does your new baby sleep in the same bed with you or anyone else?"

<sup>&</sup>quot;Subset of PRAMS Sites" estimates include 14 PRAMS sites (AK, IL, IA, LA, MD, MI, MO, NJ, NY [excluding NYC], NYC, PA, TN, WV, and WY); Sites asking some, but not all soft bedding items are excluded from overall estimates (i.e., NM and OK).

<sup>\*\* &</sup>quot;Any soft bedding" defined as infant being placed to sleep with any of the following: pillows, thick or plush blankets, bumper pads, stuffed toys, or an infant positioner

<sup>&</sup>quot;Subset of PRAMS Sites" estimates include 15 PRAMS sites (AK, CT, DE, LA, ME, NE, NJ, PA, TN, TX, VT, VA, WA, WV, and WI)

<sup>†† &</sup>quot;Any" is the sum of "rarely or sometimes" and "often or always"

# Virginia PRAMS: Infant Safe Sleep Practices

#### **Public Health Action**

- In 2015, 7 out of 34 PRAMS sites did not meet the Healthy People 2020 target to put 75.8% of infants to sleep on their back.
- One in five (21.6%) respondents from 33 states and New York City reported placing their baby on their side or stomach to sleep most of the time.
- Two in five (38.5%) respondents from 13 states and New York City reported using soft bedding when placing their baby to sleep.
- Over half (61.3%) of respondents from 15 states reported sharing a bed with their baby.
- Unsafe sleep practices with babies are common. To increase awareness and uptake of AAP safe sleep recommendations public health efforts can:
  - o Improve safe sleep practices in child-care and hospital settings by training providers.
  - Use WIC and other programs that serve mothers and babies to deliver culturally appropriate messaging about safe sleep for babies.
  - Monitor and evaluate safe sleep campaigns and programs.

#### Resources

CDC Vital Signs: https://www.cdc.gov/vitalsigns/safesleep/

**American Academy of Pediatrics:** 

http://pediatrics.aappublications.org/content/early/2016/10/20/peds.2016-2938/

Safe to Sleep Campaign: https://www1.nichd.nih.gov/sts/Pages/default.aspx

#### References:

- Matthews TJ, MacDorman MF, Thoma ME. Infant mortality statistics from the 2013 period linked birth/infant death data set. Natl Vital Stat Rep 2015;64:1–30.
- Moon RY; Task Force on Sudden Infant Death Syndrome. SIDS and other sleep-related infant deaths: evidence base for 2016 updated recommendations for a safe infant sleeping environment. Pediatrics 2016;138:e20162940.
- Healthy People 2020 Objectives. Available at: https://www.healthypeople.gov/2020/topicsobjectives/topic/maternal-infant-and-child-health/objectives
- Title V National Performance Measures. Available at: https://mchb.tvisdata.hrsa.gov/PrioritiesAndMeasures/NPMDistribution

To learn more about PRAMS methods and to see data availability by state and year visit: https://www.cdc.gov/prams

