

PREGNANCY RISK ASSESSMENT MONITORING SYSTEM

A survey for healthier babies in New Jersey

Safe Sleep Practices Among New Jersey Mothers: The Importance of Examining Practices by Sub-Groups (August 2016)

NJ PRAMS is a joint project of the New Jersey Department of Health and the Centers for Disease Control and Prevention (CDC). Information from PRAMS is used to help plan better health programs for NJ mothers and infants. One out of every 50 mothers are sampled each month, when newborns are 2-6 months old. Survey questions address their feelings and experiences before, during, and after pregnancy. The PRAMS sample design oversamples smokers and minorities. Data are weighted to give representative estimates of proportions in specific categories and of actual persons. Over 20,000 mothers are included between 2002-2013 with an average response rate of 70%.

The American Academy of Pediatrics (AAP) reported in 2011 that the decline in the incidence of sudden infant death syndrome (SIDS) plateaued in recent years. Its task force on SIDS expanded its evidence-based guidelines on a safesleep environment and focused not only on SIDS but on all sleep-related infant deaths. Some of these recommendations include infants sleeping on their backs, using a firm sleep surface, breastfeeding, and avoiding both bed-sharing and exposure to tobacco smoke. While the AAP recommends that mothers sleep in the same room as their infants, bed sharing and including toys or other items in the infant's sleep area are not advised. Weighted data from NJ PRAMS provides insight into NJ mothers' response to the expanded guidelines and identifies target areas for intervention that can improve these rates.

The overall prevalence of infants being put to sleep on their backs increased from 60.6% in 2004 to 69.5% in 2013 and mothers reporting breastfeeding initiation increased from 74.8% in 2004 to 86% in 2013 (Figure 1). Any bed-sharing decreased from 61% in 2004 to 59% in 2013 and current smoking decreased from 12% in 2004 to 10% in 2013.



Asian, non-Hispanic (NH), mothers are most likely to put their infants to sleep on their backs (81.8%) (Figure 2); however, the prevalence of any bed-sharing is high in this group (81.5%).



Adjusting for education and annual household income, the odds of Asian, NH, mothers ever sharing their beds with their infants are 5 times that of White, NH, mothers (Figure 3). Black, NH mothers are also more likely to bed share with an odds ratio (OR) of 4:1 for White, NH mothers.



Both Asian, NH (2.2) and Black, NH (1.5) mothers had odds ratios of infants not sleeping on a firm surface higher than the White, NH reference group (1.0). Hispanic and Black, NH mothers had greater odds of not laying their infants to sleep on their backs (OR=1.5 and 1.6, respectively).

	WIC (% weighted)	Non - WIC (% weighted)
Breastfeeding Initiated	<mark>86.9</mark>	85.4
Sleeps on Back	57.0	77.0
Any Bed-Sharing	66.5	55.8
Sleeps in Crib	86.8	89.7
Sleeps on a Firm Mattress	79.6	82.9
Sleeps with Pillows	14.5	5.0
Sleeps with Bumper Pads	35.5	27.3
Sleeps with Blankets	28.2	20.0
Sleeps with Stuffed Toys	6.0	2.8
Currently Smoking	14.3	7.9

WIC Status and Safe Infant Sleep Practices, PRAMS 2013

Prevalence of breastfeeding initiation is high among mothers who reported using WIC (86.9%). However, they had lower rates of putting their infants to sleep on their backs (57%) and placing infants to sleep on a firm mattress (79.6%). WIC mothers also had high rates of bed-sharing, unsafe items in the infant's sleeping area and current smoking.

Agenda for Action

Many of the sleep practices of New Jersey mothers are moving in the direction of those recommended as safe by AAP. NJ now has one of the lowest sleep-related infant deaths in the nation. However, the analysis of PRAMS data identified two major areas to target future interventions in order to move the needle further towards recommended safe sleep practices in all sub-groups. The increased odds associated with race and ethnicity particularly in Asian, NH, and Black, NH, mothers points to interventions that target what could be long-standing culturally accepted practices that require culturally competent solutions. The best strategies should include working with partners who are experienced at delivering culturally sensitive messages.

The high rates of breastfeeding initiation in WIC mothers demonstrates the success of WIC interventions in breastfeeding education and promotion. Strategies that target WIC mothers should include those mentioned above as well as an emphasis on partnering messages about breastfeeding with those about safe sleep practices.

By looking at the components of the safe sleep environment and examining the prevalence across demographic characteristics and subgroups, services can be customized to meet the unique needs of those groups and minimize potential barriers to a safe sleep environment.

Some of the AAP recommendations include:

- Placing infants to sleep on their back within the first few hours after birth in a safety-approved crib, play yard, or bassinet. Avoid using car seats and other sitting devices for routine sleep.
- Room-sharing without bed-sharing. Avoid devices that are advertised to make bed-sharing 'safe'.
- Pillows, quilts, comforters, and other soft surfaces are hazardous for the infant's sleep environment. Wedges, infant positioners, and bumper pads are not recommended.
- Breastfeeding is recommended, however, if a breastfeeding mother brings her infant into bed with her for feeding or comforting, the infant should be returned to his/her own crib or bassinet when the mother is ready to return to sleep.
- Avoid smoking during pregnancy and in the pregnant woman's or infant's environment.
- Avoid overheating and head covering in infants.

Resources for Additional Guidance

- The SIDS Center of New Jersey (SCNJ), Rutgers-Robert Wood Johnson Medical School (RWJMS) 800.545.7437 <u>http://www.rwjms.rutgers.edu/sids/</u>
- The Eunice Kennedy Shriver National Institute of Child Health and Human Development (NICHD). 800.505.CRIB https://www.nichd.nih.gov/sts/Pages/default.aspx
- The National Action Partnership to Promote Safe Sleep. <u>http://www.nappss.org/</u>
- SIDS and Other Safe Sleep-Related Infant Deaths: Expansion of Recommendations for a Safe Infant Sleeping Environment. <u>http://pediatrics.aappublications.org/content/early</u> /2011/10/12/peds.2011-2285

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