



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 Indian Health Board 3rd Annual National Tribal Public Health Summit

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Healthy Native Babies Project

A History of this Project:

- Staff from the National Institutes of Health (NIH) met with AI/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.*



Phase I

- **Community-based participatory research included active participation of community at every level.**
- **Convened focus groups and Talking Circles with AI/AN parents.**
- **Social marketing approach utilized for translating findings into education and action plans for messages and materials.**



Focus Group Outcomes

- **Tailor media and materials for Tribal or regional setting.**
- **Integrate stories into educational interventions.**
- **Target important relationships through educational interventions.**



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 Evaluations
- **Train-the-Trainer Sessions**
- **Mini-Grant Implementation and Support**



What is Sudden Unexpected Infant Death (SUID)?

- **SUID refers to infant deaths that occur suddenly and unexpectedly, and whose manner and cause of death are not immediately obvious prior to investigation.**
- **This category excludes death with an obvious cause, such as a motor vehicle accident.**



Incidence of SUID

- **4,600 infants die suddenly in the United States each year of no obvious cause (SUID).**
- **One-half of these deaths are categorized as SIDS.**

Source: Centers for Disease Control and Prevention (CDC), SUID Initiative Update and Progress Toward a National SUID Case Registry, September 2008.



What is SIDS?

SIDS is the sudden death of an infant younger than one 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.**

Source: Willinger M, James LS, & Catz C. *Pediatric Pathology*, 1991.



Incidence of SIDS

- **2,327 infants died from SIDS in the United States in 2006.**
- **SIDS rates are declining in the United States, but disparities still exist among certain populations.**

Source: CDC. Infant Mortality Statistics from the 2006 Period Linked Birth/Infant Death Data Set. *National Vital Statistics Report*, 57(2).



SIDS 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 time to 4 times more likely to occur in AI/AN babies**
- **Not completely preventable**



SIDS is *NOT*...

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



SIDS is *NOT*...

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



SIDS is not caused by 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.





SIDS is not caused by vomiting or choking.

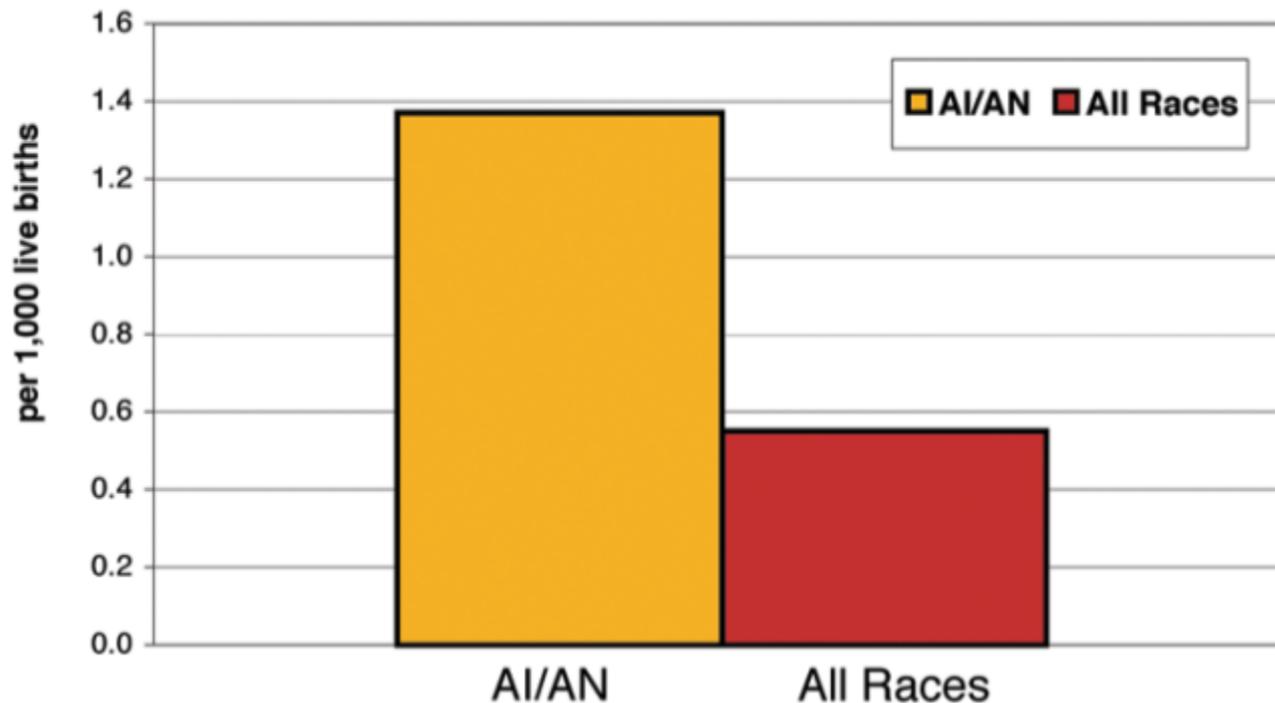
When a baby is in the *stomach sleeping position*, anything regurgitated or refluxed will pool at the opening of the trachea, making it easier for the baby to aspirate or choke.





Proportion of Infant Deaths Due to SIDS

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

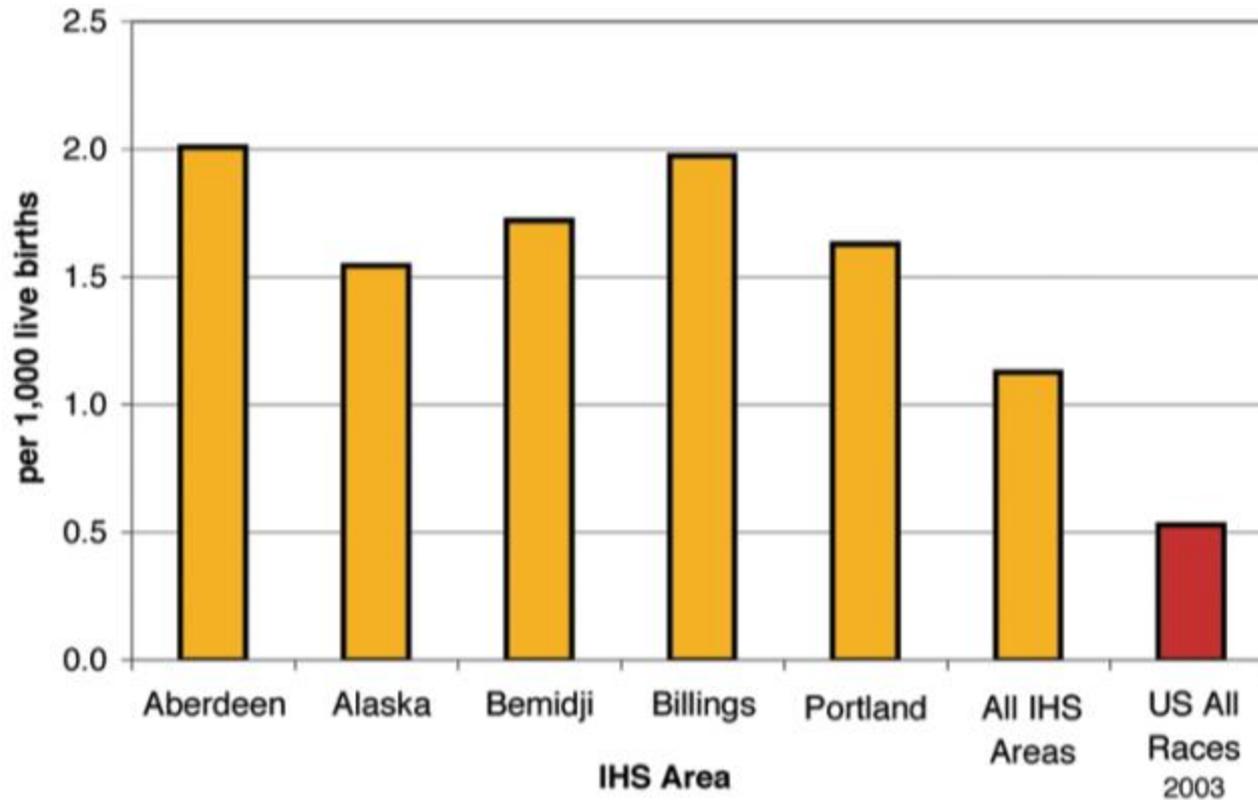


*Data for counties with greater than 250,000 total population only.

Source: National Center for Health Statistics, CDC; prepared by the Urban Indian Health Institute.



AVAN SIDS Rates 2002-2004



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



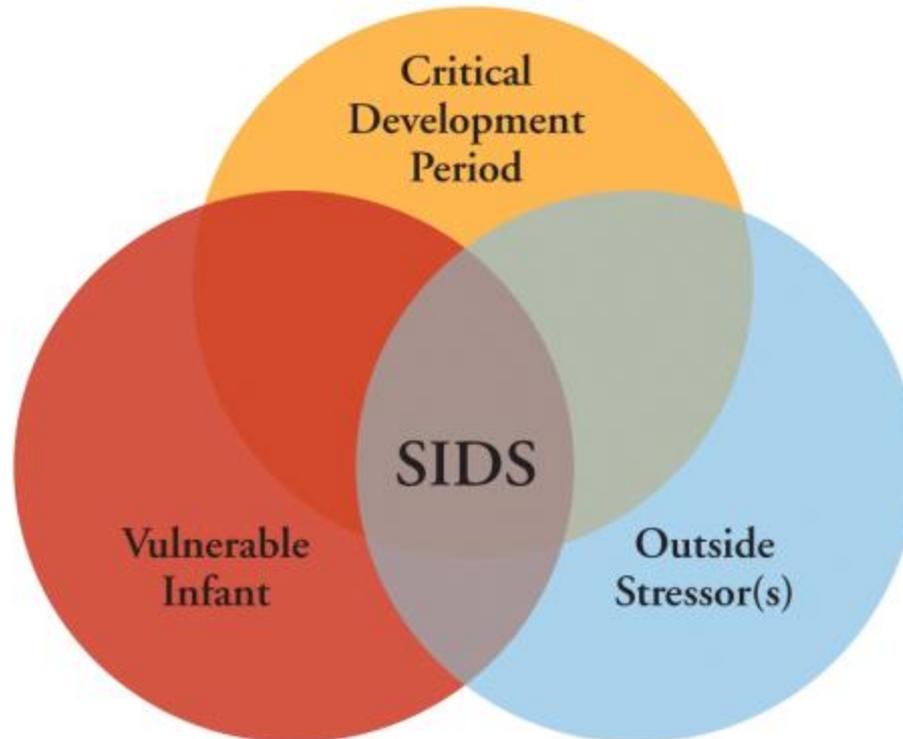
What causes SIDS?

- **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

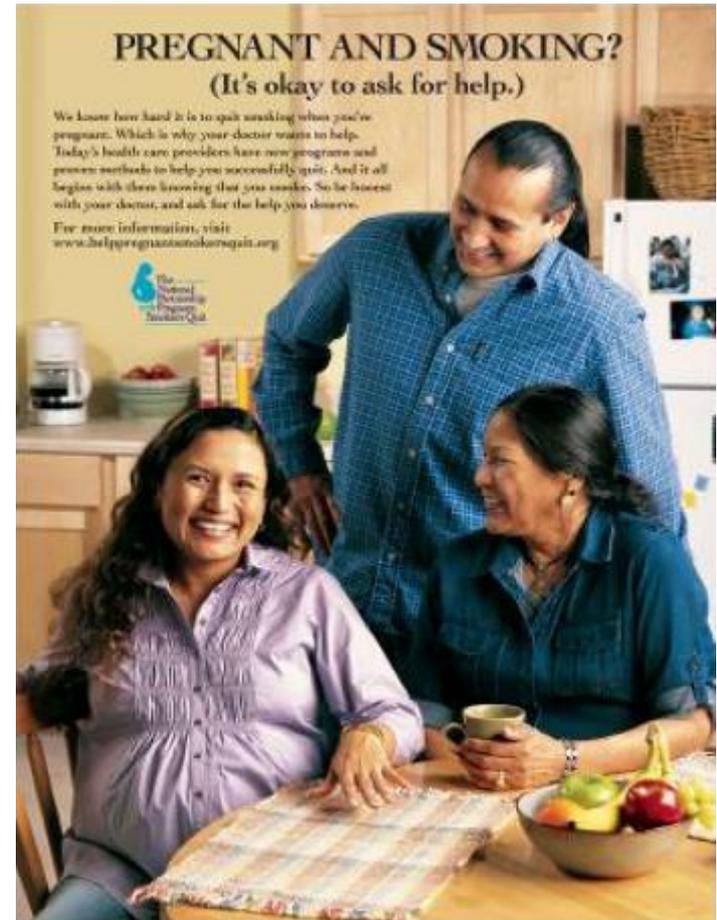


Adapted from Filiano & Kinney 1994.



SIDS Risk Factors

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





Lowering SIDS Risk

- **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!**



Lowering SIDS Risk

- **Sleep Surface and Sleep Environment**
 - Firm sleep surface
 - No objects, toys, or loose bedding
 - No crib bumpers
- **Baby in Light Sleep Clothing (to prevent overheating)**





Lowering SIDS Risk

- **If using a blanket, do “feet to foot” method**
 - **Feet at end of crib**
 - **Blanket tucked under mattress**
 - **Blanket no higher than chest**
 - **Light sleep clothing**





Lowering SIDS Risk

Alternative Sleep Surfaces

Basket



Box or Carton



Drawer



Wash Tub





Lowering SIDS Risk

- **Choose safe sleep locations.**
- **Use separate sleep area near mother or caregiver.**





Lowering SIDS Risk

Reduce the other SIDS risks *if* bed sharing:

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



Lowering SIDS Risk

Reduce the other SIDS risks *if* bed sharing:

- **Use only light sleep clothing for the baby.**
- **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.**



Lowering SIDS Risk

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.**



Lowering SIDS Risk

- **Breast is best:
Breastfeed your
baby.**
- **Use a clean, dry
pacifier.**





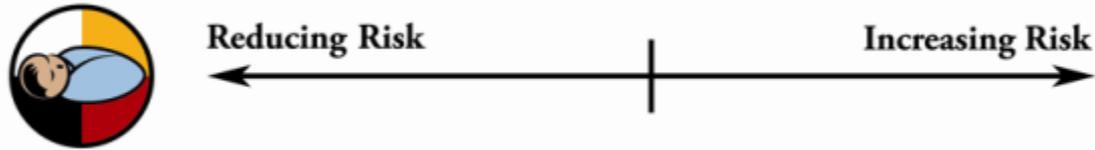
Lowering SIDS Risk

- **Have Public Health Nurse visit the home.**
- **Avoid commercial products that claim to reduce SIDS.**
- **Avoid using home monitors 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



Remember Tummy Time!

Back to Sleep, Tummy to Play!





Who needs SIDS education?

- **Parents, Parents-to-Be**
- **Foster Parents, Families**
- **Elders, Youth, Other family and friends**
- **Child care providers**
- **Emergency responders and other medical personnel**
- **The Entire Community!**





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”)!**



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 and those who are hard to reach like those who are using substances or who are homeless.**



Activity: Safe Sleep Environment





Activity: Safe Sleep Messages





Resources:

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

