Delaware Addresses Safe Sleep to Bring Down Infant Mortality Rates

In 2010, Sudden Infant Death Syndrome (SIDS) accounted for 12.5 percent of African American infant deaths and 8.8 percent of white infant deaths in Delaware. The Long Live Dreams campaign was designed to address some of the social determinants of health that can lead to poor birth outcomes, including death in the first year of life.

The Delaware Healthy Mother and Infant Consortium (DHMIC) is a statewide maternal and child health collaborative that has been working to improve Delaware’s birth outcomes for about a decade by addressing both the clinical and social root causes of infant mortality. Safe sleep is one of DHMIC’s focus areas; others include improving access to mental health, encouraging breastfeeding, and adopting a statewide life course model.

After prematurity/low birth weight and birth defects, SIDS was the third leading cause of infant death in Delaware in 2006-2010. Because the state already had several programs involving clinical interventions for prematurity/low birth weight and birth defects, the safe sleep campaign was designed to impact the SIDS rate. The messages were developed to reach new parents with simple safe sleep messages.

Of the infant deaths in Delaware between 2006 and 2010, 37 percent were associated with unsafe sleep environments, including co-sleeping and sleeping on soft surfaces. In total, unsafe sleeping practices led to 8.5 percent of the infant deaths between 2006 and 2010.

Steps Taken:

- The Long Live Dreams safe sleep campaign was launched at the state’s 2013 annual maternal and child health summit, where champions wrote messages about their dreams for the state’s children on a dream wall. The virtual dream wall is now available on the DE Thrives website, a site co-hosted by the Delaware Division of Public Health, DHMIC, and partner organizations.
- Lt. Gov. Matt Denn helped launch the Long Live Dreams Campaign by signing the wall and becoming a champion. Other champions include Karyl Rattay, the director of the Delaware Division of Public Health, and DHMIC Co-Chairs Jacqueline Gorum and David Paul.
- The campaign includes a safe sleep pledge, which anyone can sign onto via the internet. Supporters can also post a dream for babies to the virtual wall, which is a visual representation of the state’s vision for a future in which all children live long enough to realize the dreams their caregivers have for them.
- Delaware also launched a “how to” component of the Long Live Dreams Campaign, which included several safe sleep activities and materials aimed at helping clinical providers educate the public. Materials are as follows:

  - Delaware’s infant mortality rate declined 13.7 percent between 2005 and 2010.
  - In 2010, the infant mortality rate was 8 deaths per 1,000 live births.
  - Long Live Dreams is designed to address the social factors leading to infant mortality.
Clinicians can download a flipbook that they can use with patients to talk through how parents can create safe sleep environments. The flipbook helps clinicians answer questions and address misperceptions about safe sleep environments.

Community resources available on the DE Thrives website include short videos about safe sleep, print materials, and links to resources from other organizations.

The DE Thrives blog is regularly updated with safe sleep information and other resources on parenting topics and health department programs. All materials focus on four core messages:
- Babies should sleep alone.
- On their backs.
- In an empty crib.
- In a smoke-free environment.

To further support the campaign, the state imported two programs—Cribs for Kids and the Direct On-Site Education Program—to serve families whose infants do not have a safe sleeping space because they cannot afford to purchase a crib. The Cribs for Kids program provides portal cribs to needy families. The Direct On-Site Education Program trains first responders to look for unsafe sleep conditions when they are called into a home and educate families as needed. The firemen and EMTs have a supply of portable cribs that they can give to families, if necessary, as they train them on safe sleep conditions.

Delaware focused its efforts on addressing the racial disparities present in infant mortality and SIDS rates. Although the campaign’s educational materials are appropriate for any new family, they are particularly targeted to African Americans. The people who appear in the videos and print materials are African American. The clinicians who received campaign materials to educate patients serve large proportions of the Medicaid population, who are disproportionately African American.

One of the ways that Delaware tailored its materials to African Americans was by including grandmothers in public health messages. In some cultures, grandmothers strongly influence parenting habits or are caregivers for infants. Consequently, public health messages may need to address some grandmothers’ preexisting ideas about sleep practices, such as believing it’s safe to put babies to sleep on their stomachs. Thus, one Delaware safe sleep video shows a new mother and her mother putting the baby to sleep together and the grandmother laying the infant down on her back.

Results:

- Part of the safe sleep campaign’s design includes a plan for evaluation. Currently, the program tracks process measures. Initially, 80 first responders were trained. Currently, several fire departments have trainers and the state fire school has incorporated safe sleep training in their curriculum. DHMIC plans to measure behavioral changes within the community and will gather data along the way and offer results in October 2015.
- In the two years since Cribs for Kids began, Delaware provided an average of 150 portable cribs a year.
- Under the Direct On-Site Education Program, the health department trained the state’s current first responders. Additionally, the safe sleep curriculum is now part of the professional training new recruits will receive.

Lessons Learned:
• Seek input from the target demographic to improve the quality of your materials and generate buy-in. Delaware faced an interesting dynamic—wanting input from the African Americans target population, but not wanting them to feel targeted—as they developed materials. The state tried to engage people widely and talk through issues, so that no one felt singled out for intervention. Delaware shared data with African American communities and sought input on how to frame safe sleep messages.

• Some parents need additional information and coaching beyond the four key messages of the campaign. For example, some parents may not feel comfortable having their children sleep separate rooms because they live in neighborhoods with a history of violent incidents, or they may not have separate rooms available because space in their homes is limited. In those cases, clinicians are equipped to offer alternatives, such as having the baby in the same room with parents but in his or her own bed or portable crib. To address this challenge, one campaign video message says, “Babies can share a room, but not a bed. Babies should sleep alone.”

• Work with influential community members so they can educate their communities and act as champions. The state is recruiting well-respected champions from within the African American community to bring visibility and a face to the campaign.

• Leverage your resources and partners’ to increase your message’s media outreach. Delaware is relying on its collaborative partners to access media they otherwise could not. This is helping them overcome the challenge of distributing its materials, including expensive airtime costs in a small television market.

For More Information:

Mawuna Gardesey
Chief
Center for Family Health Research and Epidemiology
State of Delaware
Email: Mawuna.gardesey@state.de.us
http://dethrives.com/safe-sleep/overview

Ellen Schleicher Pliska, MHS, CPH
Family and Child Health Director
Association of State and Territorial Health Officials
Email: epliska@astho.org