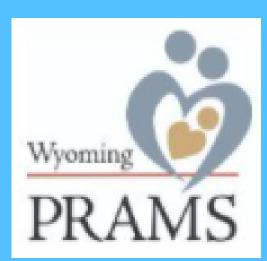
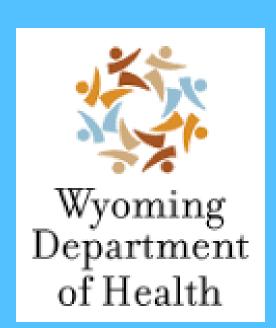
Wyoming Infant Safe Sleep Practices





PRAMS (2016-2020)

Unsafe sleep practices are a risk factor for infant mortality. Approximately 3,400 sudden unexpected infant deaths (SUID) occur each year in the United States. SUID includes: sudden infant death syndrome (SIDS), accidental suffocation and strangulation in bed, and unknown causes of death among infants less than one year old.1

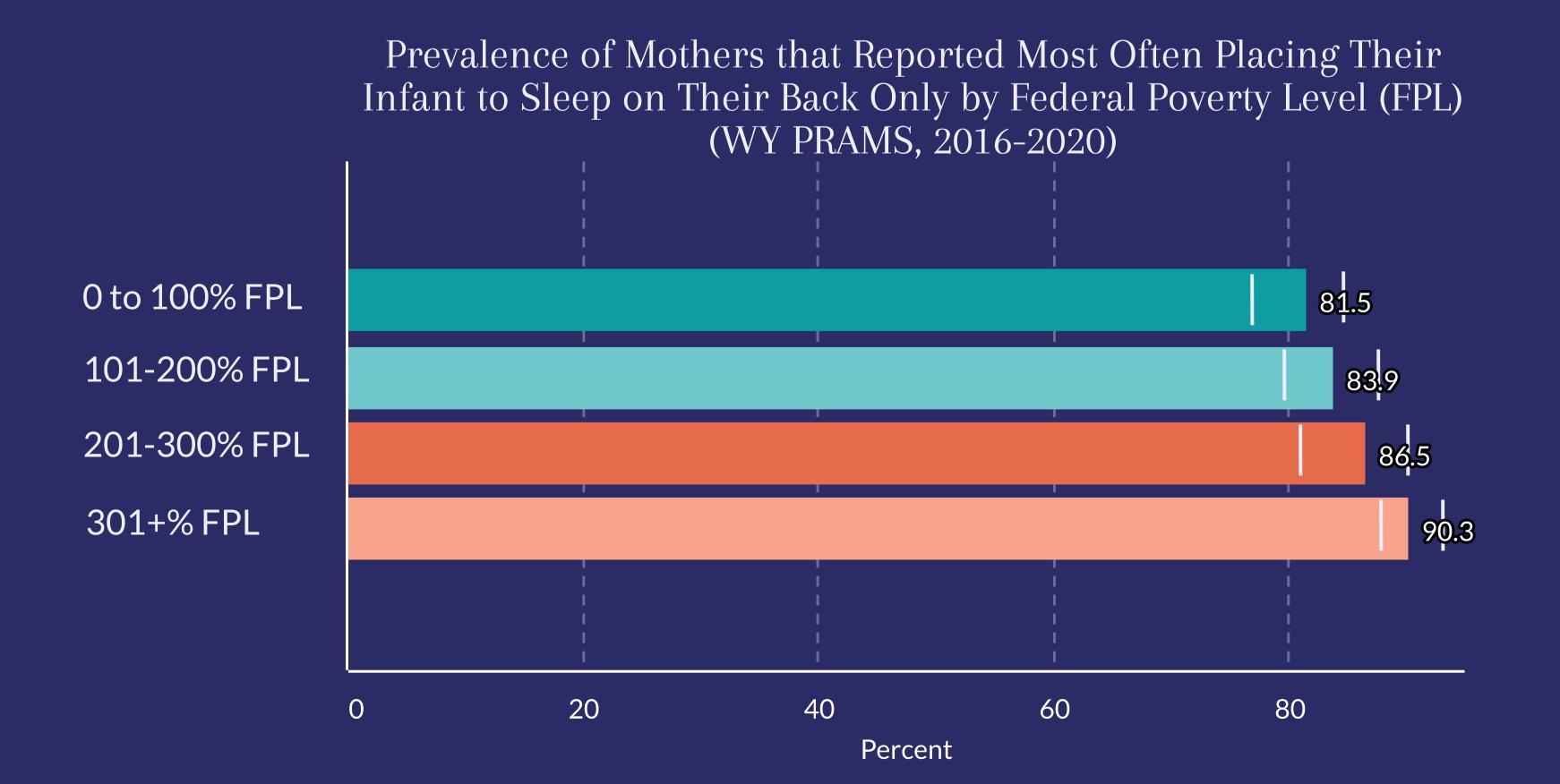
In Wyoming from 2016-2020, 21.3% (n=38) of infant deaths were due to SUID, the second leading cause of infant death during this time. Of these SUID deaths, the majority (57.9%) were due to accidental suffocation and strangulation in bed and 34.2% were due to SIDS (WY VSS). In comparison, 28% of SUID deaths in the U.S. in 2019 were due to accidental suffocation and strangulation in bed and 37% were due to SIDS¹. Following safe sleep practices (commonly referred to as the <u>ABC</u>s of sleep; <u>A</u>lone, on their <u>Back</u> and in a <u>Crib</u>) ²can reduce the risk of sleep related deaths among infants.¹

The Pregnancy Risk Assessment Monitoring System (PRAMS) survey collects responses from mothers who have given birth in the past 3 to 6 months. This includes data on safe sleep behaviors that fall under the ABCs of sleep. The prevalence of mothers in Wyoming responding that they place their infant to sleep on their back, do not leave loose bedding or soft objects with their infant while sleeping, and who place their infant to sleep on a separate, approved surface are examined below. In addition, disparities among responses from women of different Maternal Age and Federal Poverty Level (FPL) groups were examined, and significant differences are noted.

Safe sleep was chosen as a Title V priority from the Wyoming Maternal and Child Health Unit's Women and Infant Health Program. Wyoming PRAMS will continue to monitor the Title V National Performance Measures (NPMs) around safe sleep (NPM 5a: sleeping on back; NPM 5b: sleeping on separate/approved surface; and NPM 5c: sleep with out loose blankets/blankets), of which national PRAMS data is the source.3

Sleeping on Back 2 **85%** of Wyoming mothers reported that their It is infant was most often recommended placed to sleep on their back only (WY that infants are PRAMS, 2016-2020). Nationally, 79.9% placed to sleep on their of mothers reported backs to reduce that their infant the risk of was most often SUID.4 placed to sleep on their back only in 2019.

The percent of Wyoming mothers who reported that they most often placed their infant to sleep on their back only is greater than the most recent reported national average of mothers. Within Wyoming, disparities were seen among mothers of different Federal Poverty Levels (FPLs). However, the prevalence among all FPLs in Wyoming was still higher than the national prevalence.



A significantly smaller proportion of Wyoming mothers living at both 0-100% and 100-201% FPL reported their infant was most often placed to sleep on back compared to those new mothers living at 301+% FPL.

Sleeping without Soft Objects and Loose

Bedding

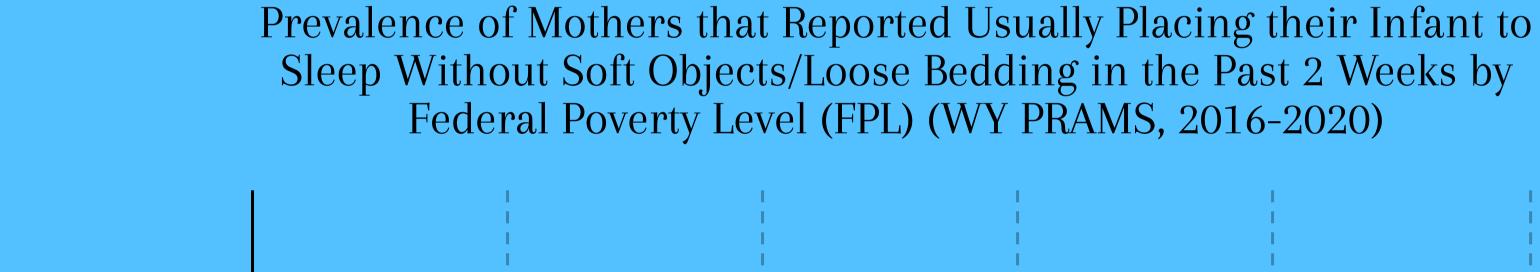
It is recommended that infants do not sleep with soft objects/loose bedding to reduce the risk of SUID.⁵

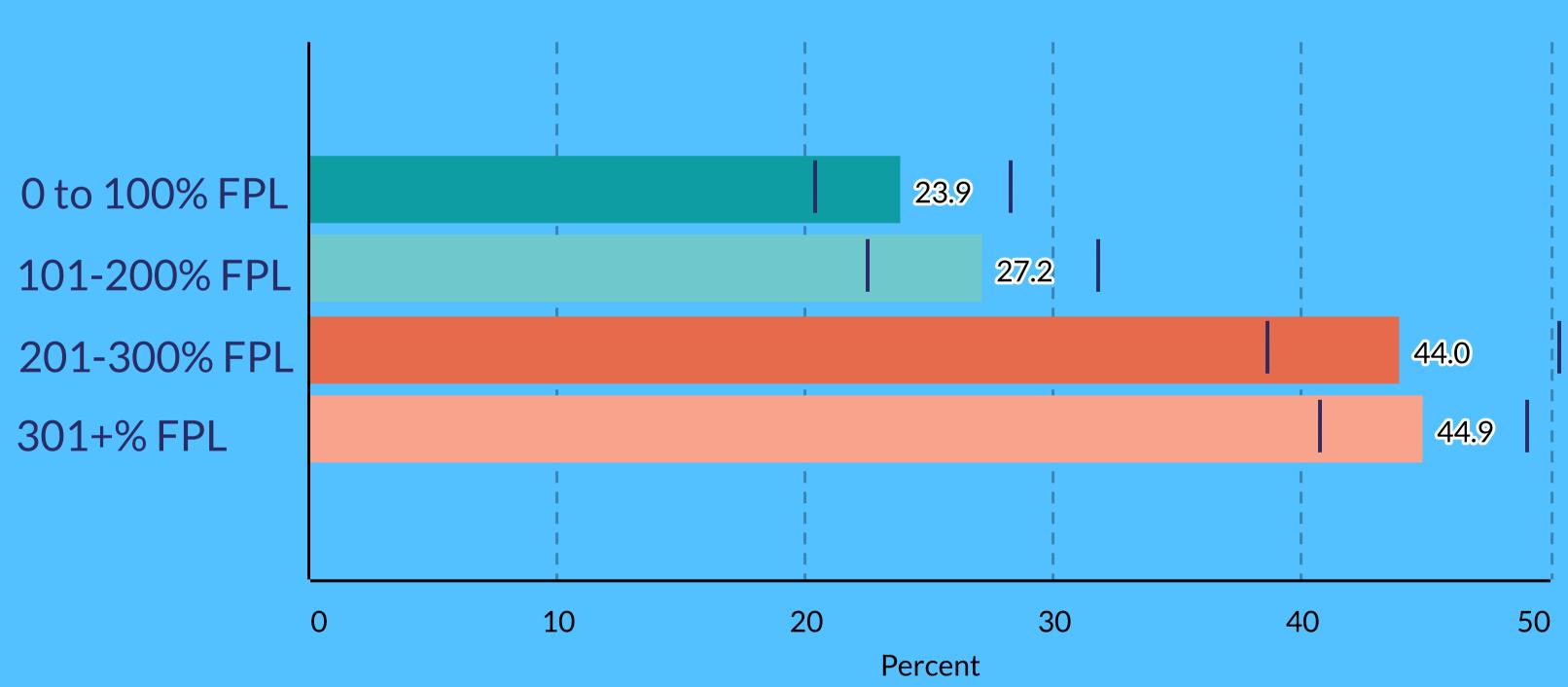
Nationally, 50.9% of mothers reported that their infant was usually placed to sleep without soft objects/loose bedding in 2019.³

34.1%

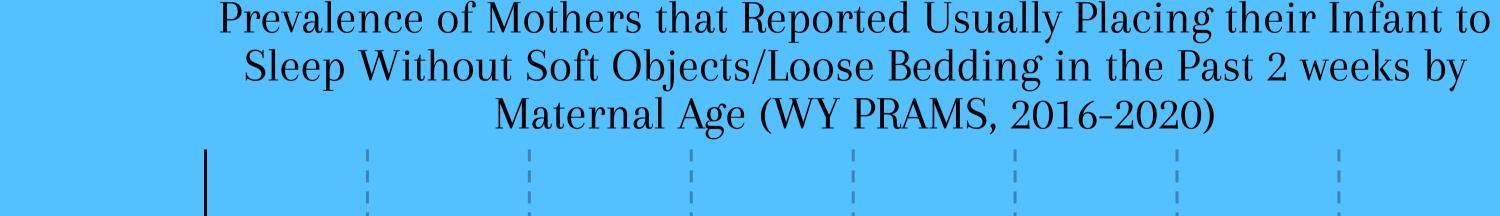
of Wyoming mothers reported that in the past 2 weeks their infant was usually placed to sleep without soft objects/loose bedding (WY PRAMS, 2016-2020).*

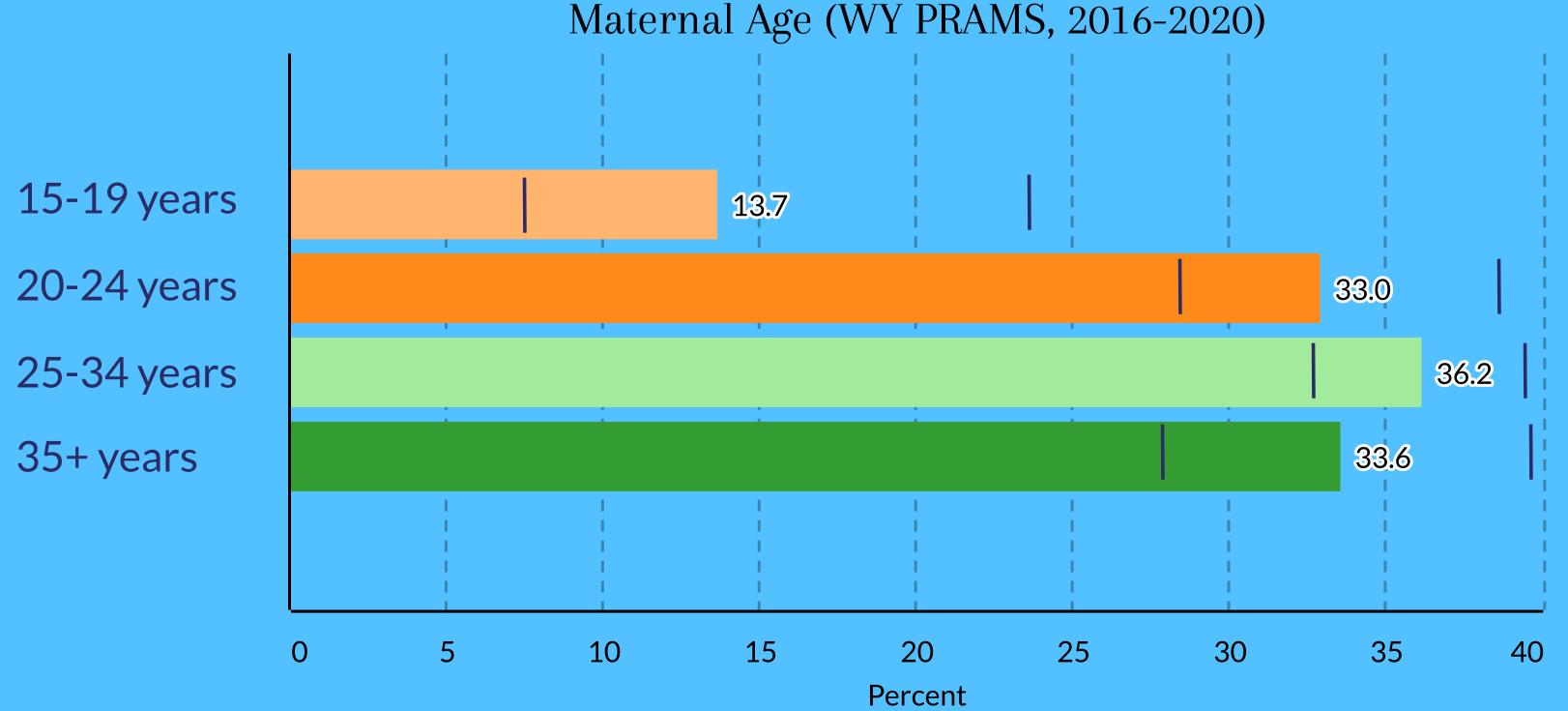
The percent of Wyoming mothers who report that their infant did not usually sleep with blankets, toys, cushions, pillows, or crib bumper pads in the past two weeks is lower than the most recent national average. Within Wyoming, significant disparities in mothers' responses were seen by Maternal Age groups and Federal Poverty Levels. Mothers living at the two higher FPLs reported that they placed their infant to sleep without soft objects or loose bedding at rates almost twice as much as those mothers living at the lower two FPLs.





A significantly smaller proportion of Wyoming mothers living at both 0-100% and 101-200% FPL reported that their infant was usually placed to sleep without soft objects or lose bedding compared to those mothers living at 201-300% and 301+% FPL.



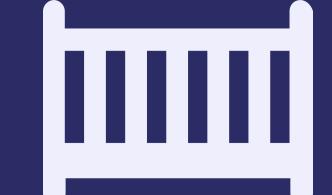


A significantly smaller proportion of Wyoming mothers aged 15-19 years old reported their infant was usually placed to sleep without soft objects or lose bedding compared to those mothers 20-24, 25-34 and more than 35 years old.

^{*}This is based on mothers who reported that their infant did not usually sleep with blankets, toys, cushions, pillows, or crib bumper pads in the past two weeks.

Sleeping on separate, approved surfaces

recommended that infants do not sleep on soft surfaces to reduce the risk of SUID.⁵



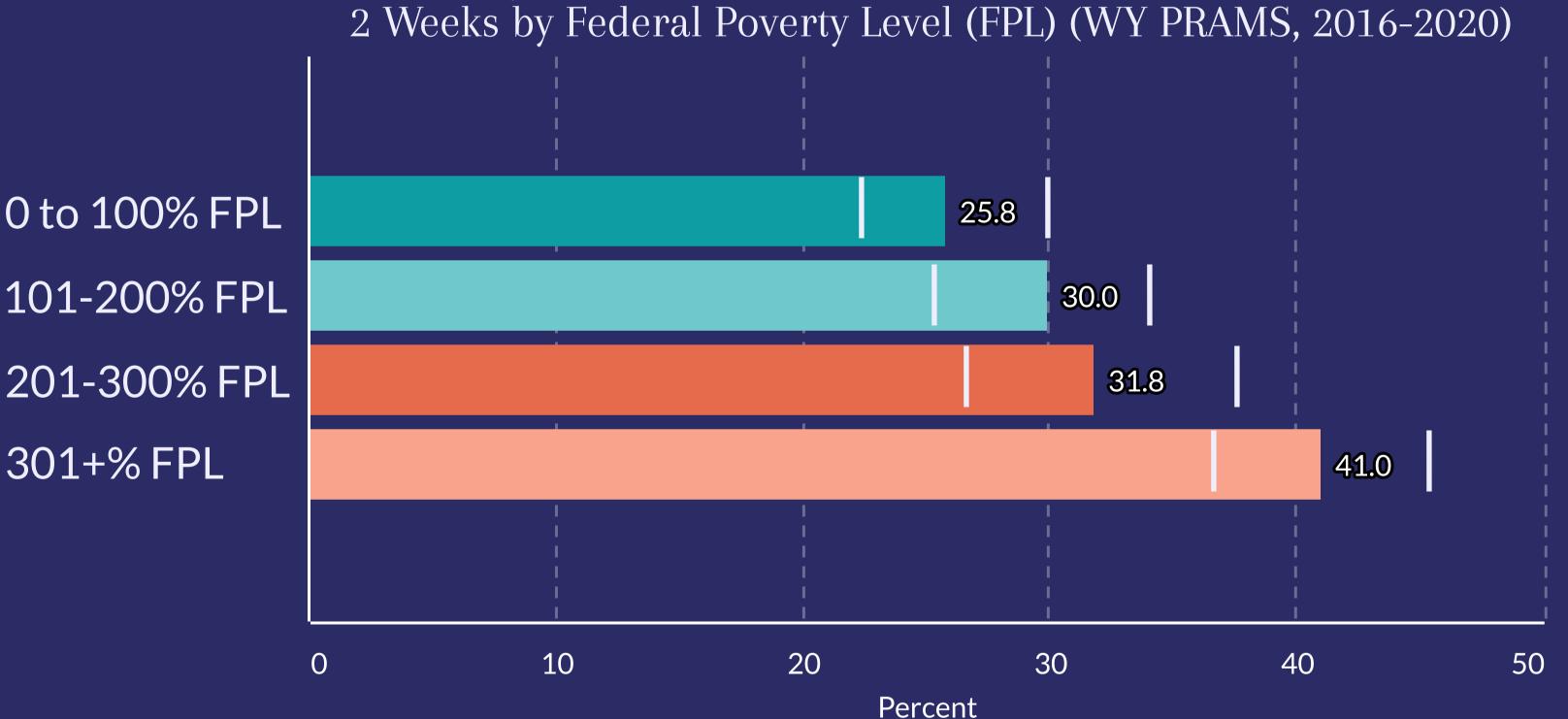
Nationally, 35.9% of mothers reported that their infant was usually placed to sleep always or often on a <u>separate</u>, <u>approved</u> surfaces in the past 2 weeks in 2019.³

32.2%

of Wyoming mothers reported that their infant was usually placed to sleep always or often on a separate, approved surfaces in the past 2 weeks (WY PRAMS 2016) 2020).*

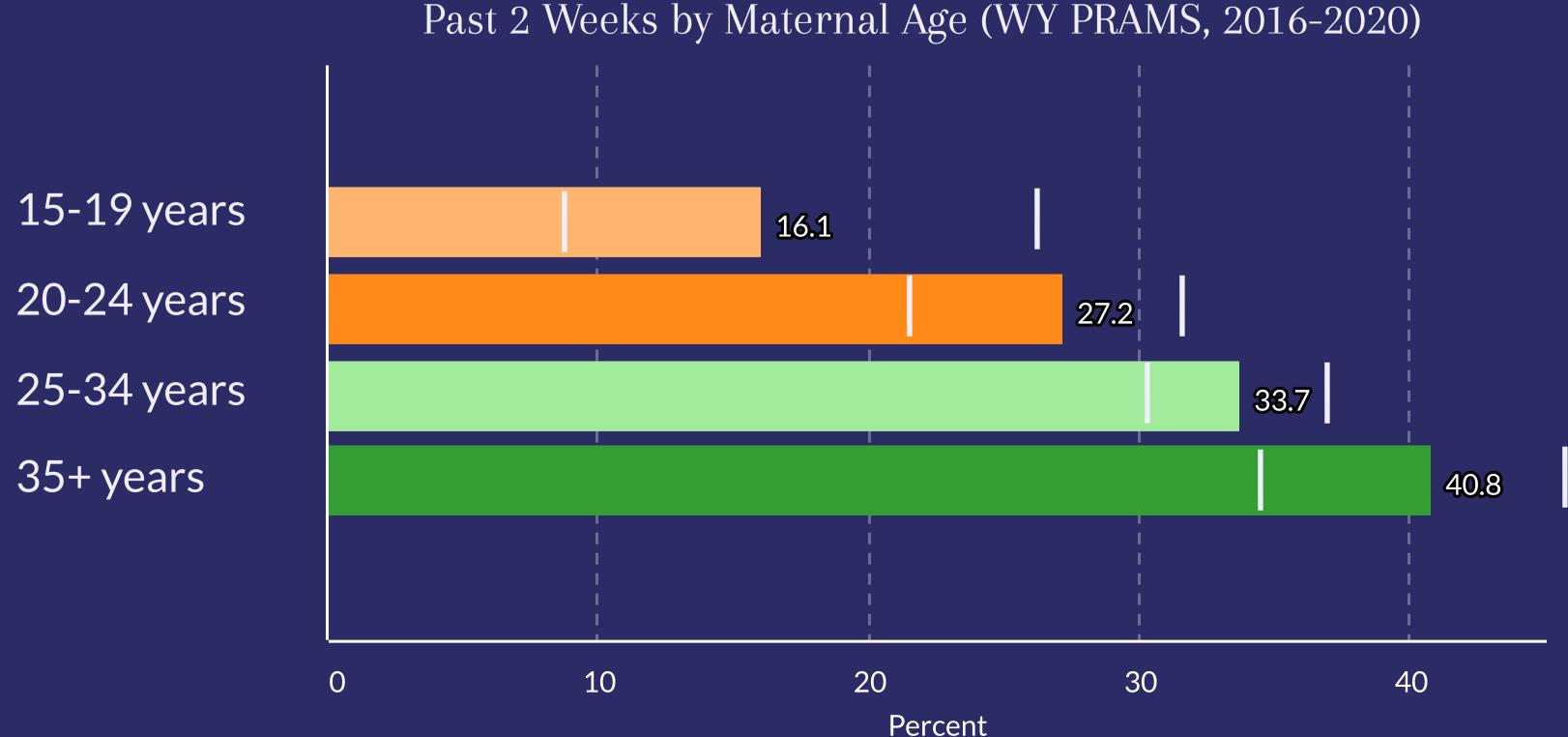
The percent of Wyoming mothers who report that their infant was placed to sleep always/often alone, usually in a crib, bassinet, or pack & play, is slightly smaller than the most recent reported national average of mothers. Within Wyoming there are significant disparities seen in responses from mothers by both Maternal Age and the Federal Poverty Level.

Prevalence of Mothers that Reported Usually Placing Their Infant to Sleep Always or Often on a Separate, Approved Surfaces in the Past 2 Weeks by Federal Poverty Level (FPL) (WY PRAMS, 2016-2020)



A significantly smaller proportion of Wyoming mothers living at 0-100% and 101-200% FPL reported their infant was always/often placed to sleep on a separate, approved surface compared to mothers living at 300+% FPL.

Prevalence of Mothers that Reported Usually Placing Their Infant to Sleep Always or Often on a Separate, Approved Surfaces in the Past 2 Weeks by Maternal Age (WY PRAMS, 2016-2020)



A significantly smaller proportion of Wyoming mothers aged 15-19 years old and 20-24 years old reported their infant was always/often placed to sleep on a separate, approved surface compared to those mothers more than 35 years old.

^{*}This is based on mothers who reported their infant always/often slept alone usually in a crib, bassinet, or pack and play, and not usually in a standard bed, couch, sofa, armchair, car seat, or swing in the past two weeks.

Infants that Slept in Same Room as Mother

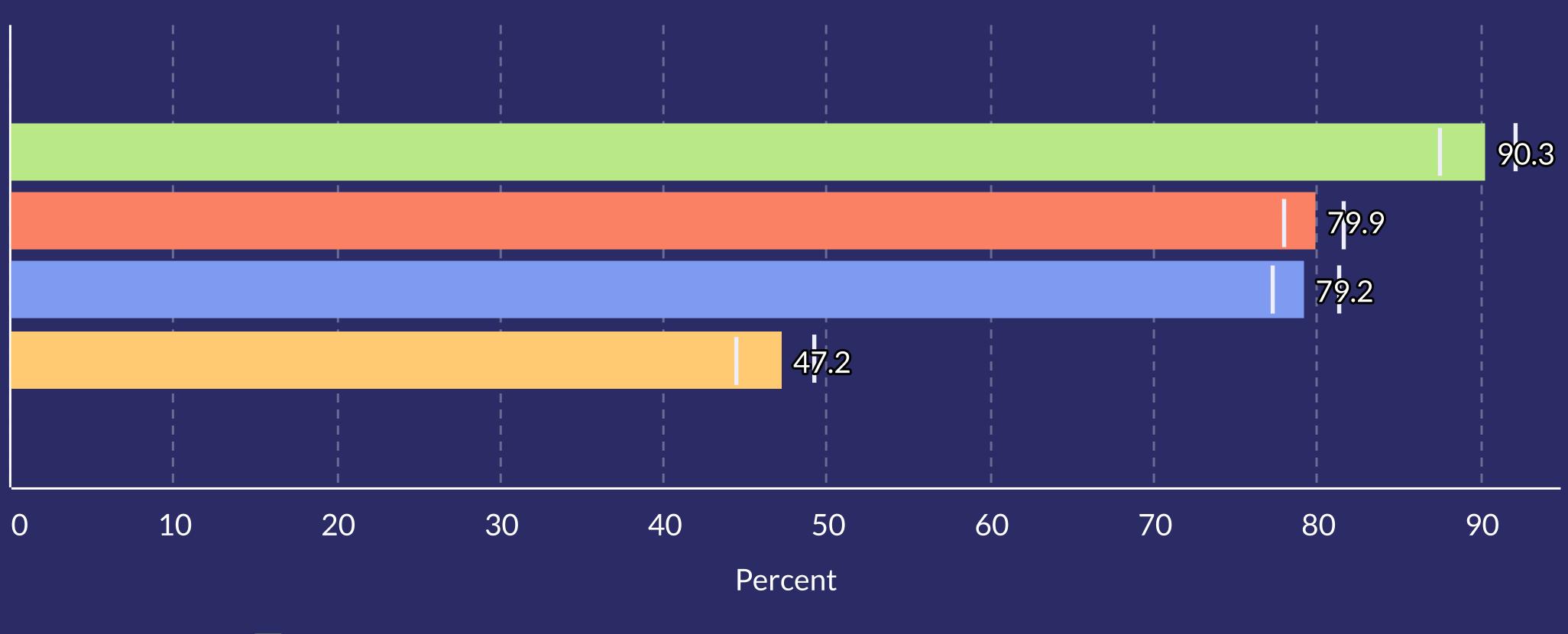
CDC recommends that infants should sleep in the same room as their parents in the first 6 months. However, the ABC's of Safe Sleep address that the infant should not share the same bed with their parents.²

It is recommended that for at least the first six months, the infant should be in the same room as parents but on a separate, approved surface, alone and on their back. 78.6%

of Wyoming mothers
reported that their infant
was placed to sleep
alone, in his or her crib
or bed in the same room
where they sleep (WY
PRAMS 2016-2020).

Did a doctor, nurse, or other healthcare worker inform you of safe sleep practices?

Prevalence of Wyoming Mothers who Reported that Their Doctor Discussed Proper Safe Sleep Environments with Them After Birth by Topic Area (WY PRAMS, 2016-2020)



- Providers Discussed Placing Their Infant to Sleep on Their Back
- Providers Discussed what Items Should and Should Not go Into Bed
- Providers Discussed Placing Infant in Crib, Bassinet, or Pack and Play
- Providers Discussed Placing Infant in Crib or Bed in the Same Room as Them

What is being done now?

Currently, Wyoming PRAMS provides information on safe sleep with the inclusion of a Women, Infant and Children (WIC) brochure and a 211 brochure, a Wyoming Community Resource, in PRAMS mailings. In addition, Wyoming PRAMS offers a Sleepsack as an option for a reward when completing the survey. With this sleepsack is sent an instructional brochure on how to properly use the sleepsack and information on other safe sleep practice. Regardless of chosen award, Wyoming PRAMS also includes a Safe Sleep Practice factsheet and a Wyoming PRAMS factsheet on current safe sleep practices in Wyoming.

The data above helped drive Maternal Child Health (MCH) Unit in deciding to improve safe sleep practice in Wyoming as a Title V priority. The MCH Unit's Women and Infant Health Program is working with Wyoming PRAMS, part of Wyoming MCH Epidemiology Program, to ensure that developed strategies to improve safe sleep practices in Wyoming are data informed and are continuously monitored for progress.

What is PRAMS?



Wyoming Pregnancy Risk Assessment Monitoring System (PRAMS) is a surveillance project of the Wyoming Department of Health and the Centers for Disease Control and Prevention (CDC). Wyoming PRAMS collects Wyoming-specific, population-based data on maternal attitudes and experiences before, during and shortly after pregnancy. The goal of the PRAMS project is to improve the health of mothers and infants by reducing adverse outcomes such as low birth weight, infant mortality and morbidity, and maternal morbidity.



To learn more about Wyoming PRAMS visit our websites: https://health.wyo.gov/publichealth/chronic-disease-and-maternal-child-health-epidemiology-unit/mch-epi/pregnancy-risk-assessment-monitoring-system-prams/

Wyoming Women Infant and Health Program: https://health.wyo.gov/publichealth/mch/womenandinfanthealth/

Wyoming's MCH Title V National Outcome and Performance measures: https://sites.google.com/wyo.gov/title-v-national-om-pm/home

Wyoming PRAMS estimates are computed using sampling weights. Statistical significance between weighted estimates was established utilizing chi square tests with a 0.05 significance level. 95% confidence intervals are displayed by two bars on either side of the estimates in the bar graphs.

References:

- 1. U.S. Department of Health and Human Services. Reproductive Health: Helping Babies Sleep Safely. Centers for Disease Control and Prevention. 2021 [accessed 2022 January 12].
- 2. Pathways. The ABC's of Safe Sleep. Pathways. 2022 [accessed 2022 January 12].
- 3. Maternal and Child Health Bureau. Federally Available Data (FAD) Resource Document. September 28, 2021; Rockville, MD: Health Resources and Services Administration. Available at: https://mchb.tvisdata.hrsa.gov/PrioritiesAndMeasures/NationalPerformanceMeasures
- 4. U.S. Department of Health and Human Services. Sudden Unexpected Infant Death and Sudden Infant Death Syndrome: Data and Statistics. Centers for Disease Control and Prevention. 2021 [accessed 2021 August 31].
- 5. U.S. Department of Health and Human Services. Sudden Vital Signs: Safe Sleep for Babies. Centers for Disease Control and Prevention. 2018 [accessed 2021 August 31].