



Infant Safe Sleep Practices

South Dakota — PRAMS, 2017

Background

This report contains South Dakota data on infant sleep practices as reported in PRAMS 2017 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.¹ 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.²

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 threshold for 2015 (55%) are included in overall estimates and the South Dakota 2017 weighted response rate was 67%. 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.^{3,4}

National Goals	Sleep Position
Healthy People 2020 Objective ³	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 Measure ⁴	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.³

South Dakota PRAMS: Infant Safe Sleep

Infant Sleep Position

Core PRAMS Indicator	South Dakota* 2017	34 PRAMS Sites* 2015
On his or her side or stomach	12.4 (10.3-14.7)‡	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)"

"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), OH, OK, OR, PA, TN, TX, UT, VT, VA, WA, WV, WI, and WY

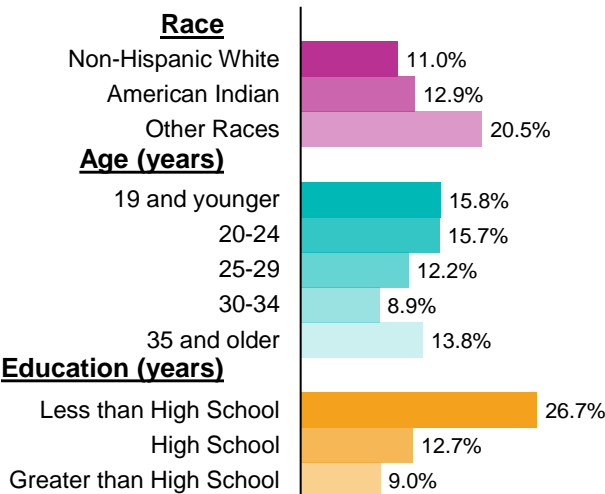
* Weighted Percent (95% Confidence Interval)

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

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?

Mothers who reported placing their babies to sleep on his or her side or stomach most of the time, by maternal characteristics — South Dakota, 2017



Soft Bedding

Standard PRAMS indicator	South Dakota % (95% CI)* 2017
Any soft bedding**	52.3 (48.8-55.8)
With a blanket	47.4 (43.9-50.8)
With toys, cushions, or pillows, including nursing pillows	6.7 (5.0-8.5)
With crib bumper pads (mesh or non-mesh)	10.1 (8.0-12.2)

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: "blanket" "toys, cushions, or pillows, including nursing pillows" and "crib bumper pads (mesh or non-mesh)."

** "Any soft bedding" defined as infant being placed to sleep with any of the following: blankets, toys, cushions, or pillows; or crib bumper pads.

South Dakota PRAMS: Infant Safe Sleep

Infant Sleeping Alone in His or Her Own Crib

Standard PRAMS indicator	South Dakota % (95% CI)* 2017
Always	62.4 (59.1-65.6)
Often/almost always	18.7 (16.0-21.4)
Sometimes	6.9 (5.3-8.5)
Rarely	4.6 (3.2-6.0)
Never	7.4 (5.7-9.1)

Question wording: "In the past 2 weeks, how often has your new baby slept alone in his or her own crib or bed?"

Public Health Action

- In 2017, South Dakota met 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, whereas in South Dakota about one in ten (12.4%) placed their baby on their side or stomach to sleep most of the time.
- About half (52.3%) of South Dakota PRAMS respondents reported using soft bedding when placing their baby to sleep.
- One in five (18.7%) of South Dakota PRAMS respondents reported their infant sometimes, rarely or never slept in his or her own bed.
- Unsafe sleep practices with babies are common. To increase awareness and uptake of AAP safe sleep recommendations public health efforts can:
 - 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/>

References:

1. 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.
2. 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.
3. Healthy People 2020 Objectives. Available at: <https://www.healthpeople.gov/2020/topics-objectives/maternal-infant-and-child-health/objectives>
4. 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>



THE BEST SOURCE OF DATA ON MOTHERS AND BABIES