

### Let's Tango:

# Practice encounters policy in North Carolina's statewide Infant/Toddler Safe Sleep and SIDS Risk Reduction in childcare initiative



Christine O'Meara, MA, MPH Campaign Coordinator 1998-2007

www.NCHealthyStart.org





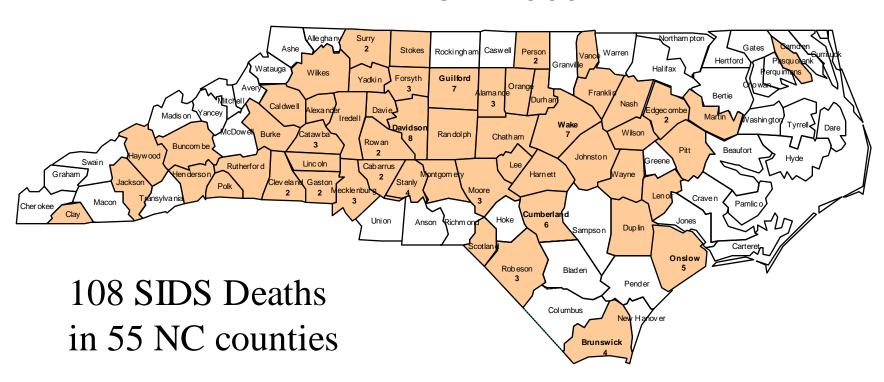


#### **North Carolina**





#### Sudden Infant Death Syndrome (SIDS) NC – 2005



Data Source: State Center for Health Statistics and OCME

Map: North Carolina Healthy Start Foundation 1/07





## Sudden Infant Death Syndrome (SIDS) in North Carolina

- NC exceeds national rate .8 per 1,000 live births vs .5 per 1,000 live births US (2004)
- Leading cause of infant death ages 1-12 months
- 100 SIDS deaths annually



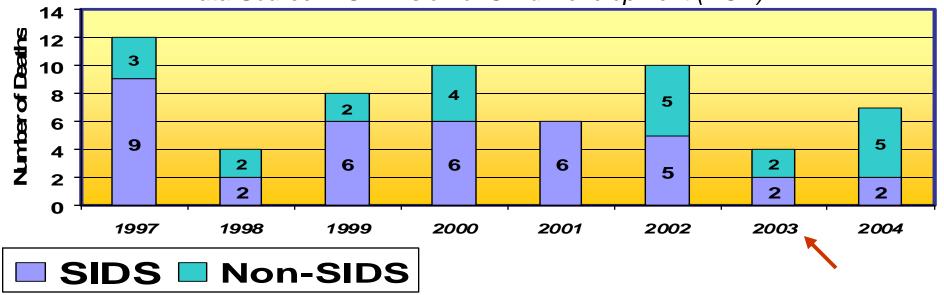
#### **Background:**

Sudden Infant Death Syndrome (SIDS) - leading cause of death in NC child care.

From 1997-2004, of the 61 childcare deaths, 38 or slightly less than two-thirds were SIDS deaths.

## Proportion of SIDS to Non-SIDS Deaths in North Carolina Child Care 1997-2004

Data Source: NC Division of Child Development (DCD)





#### **Background:**

# Three pivotal events impact SIDS risk reduction in NC regulated childcare settings

- Training Project 2002-2006
- Media Raleigh News & Observer (Feb 2003)
  - Deaths in Day Care investigative series
  - Editorial
- Policy G.S. Dec 2003; Regulations May 2004



#### Media is a Catalyst for Policy Change in 2003





#### Strategies for working with policymakers:

- Educate and engage the media and policymakers
- Provide evidence-based research
  - American Academy of Pediatrics (AAP) recommendations
  - Research literature about SIDS in child care
  - National Back To Sleep Campaign & NC BTS data
  - State Center for Health Statistics NC data



#### Strategies for working with policymakers:

- Make public education materials available
- Attend committee hearings; be prepared to provide information and comment
- Bring allies to legislative committee hearings, public hearings or one-on-one meetings
  - NC Pediatric Society and AAP affiliate
  - Tobacco prevention advocates
  - SIDS parents; childcare providers



#### Policy:

- HB152 February 2003
- General Statute 110-91-15 December 1, 2003 "Prevent" SIDS Law
  - back sleep position
    - waiver may apply
  - written safe sleep policy
  - communication inform parents about policy
  - SIDS training



#### **Policy:**

#### Child Care Licensing Rules – May 1, 2004

- back sleep position
  - Alternative Sleep Position Physician Recommendation (< 6 months)</li>
  - Alternative Sleep Position Parent Request (> 6 mo)
- written safe sleep policy communicated to parents prior to enrollment; signed
- ITS-SIDS training
  - within 4 months of employment
  - recertified every 3 years
- Tobacco-use restrictions strengthened in family childcare homes and in all vehicles while children transported





## Infant/Toddler Safe Sleep and SIDS Risk Reduction in Child Care

#### **Background:**

Baseline Data Collection – 2002 and 2003 infant sleep practices in childcare homes and centers

SIDS risk reduction and safe sleep standards initially voluntary





- Establish cadre of certified ITS-SIDS trainers
- Introduce a safe sleep standard of care
  - Provide standardized training to lower SIDS risks in licensed child care
- Contact hour credits for childcare providers
- Educational materials





#### **Methods:**

#### (Critical qualities for success & sustainability)

#### Use a train-the-trainer model

- incorporate principles of public health, epidemiology
  & social marketing
- develop curriculum and training
- develop/distribute supporting educational materials

#### Support trainers

- educational credits for nurses (4.8 hrs)
- technical assistance phone, email
- on-line newsletter updates, Q&A, research articles





#### **Methods:**

#### (Critical qualities for success & sustainability)

- Tap into existing childcare network for trainers and advisors
- Convene Advisory Group quarterly
- Track trainers, assess quotas and evaluate trainings
- Assess project impact
  - Pre-Test and Post-Test observations and survey





#### **Methods:**

#### (Critical qualities for success & sustainability)

- Incorporate findings into further training and intervention
  - Phase 4 In-Depth Technical Assistance (2005-2006)
    - In-depth policy development
    - behavior change policy & practice
    - Tools sleep log/checklist; on-line support





#### **Teaching Modalities:**

- Solicit trainers' SIDS experiences
  - invite elaboration
- Lecture with visual aids
  - SIDS data US and NC
  - Triple Risk Model
  - Definitions glossary





#### **Teaching Modalities:**

- Small group activities
  - SIDS scenarios
  - practice using ed materials
  - problem solving safe and unsafe cribs
  - discussion
- Q & A
- Sharing own experiences



#### Results



#### Phase 1 – Phase 3 (2002-05) Phase 4 (2005-2006)

Project expanded from 2 to 4 years to meet demand

- 256 Certified ITS-SIDS trainers
- 1,713 trainings scheduled/completed
- 30,858 child care providers trained
  - Exceed goal of 14,500 by 112%

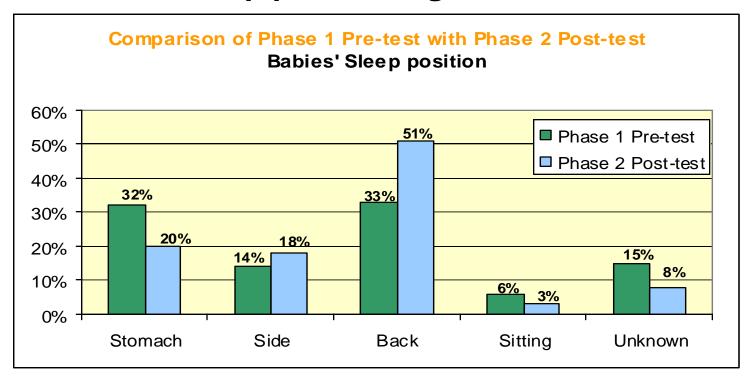


#### Results: Pre-test/Post-test Survey

After training, after NC SIDS Law enacted and child care rules revised

Matched 48 providers' Pre-test and Post-test compared.

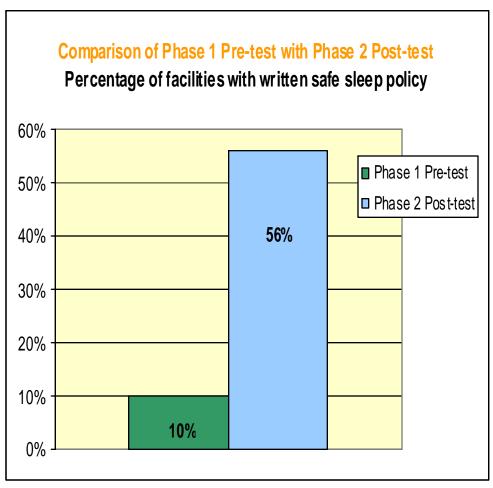
- Providers adopt steps to lower SIDS risks in NC child care after training and policy changes.
- More infants observed on backs and fewer on stomachs for sleeping.
- Increase in side sleep positioning for infants.





#### Results: Pre-test/Post-test Survey

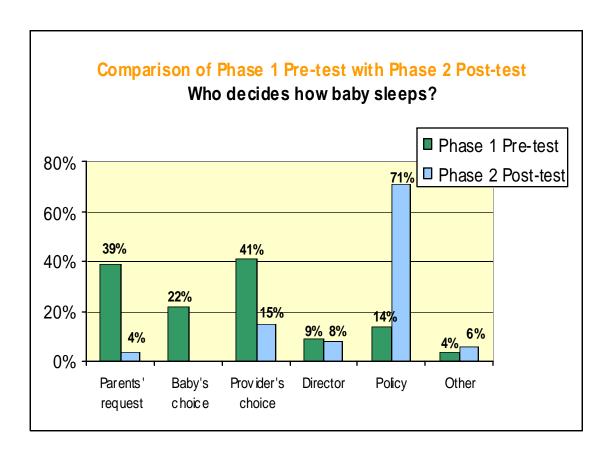
The percentage of childcare facilities with a Safe Sleep Policy increased almost five-fold.





#### Results: Pre-test/Post-test Survey

Policy rather than the childcare providers' or parents' choice became the primary determinant of the baby's sleep position in childcare homes and in centers.







The ITS-SIDS training and the changing SIDS risk reduction landscape (policy) in North Carolina has resulted in positive changes.

- Safer sleep practices and lowered SIDS risks in childcare centers and family childcare homes are now the norm.
- Safe Sleep Policies are being adopted.
- The ITS-SIDS training has been institutionalized and will continue (sustainable).





#### What childcare providers say

As a result of the training, providers intend to put the information learned into practice and:

"Adopt a sleep safe policy in my infant room and educate all my parents on the policy and encourage them to do the back-to-sleep at home."

"Be a better childcare provider."

"Always implement safe sleep practices as a caregiver and a parent."





#### What childcare providers say

As a result of the training I will:

"Do my best to teach others about ITS-SIDS law so that quality care will be provided at all times for the love of the children."

"Pay closer attention. I do smoke in my car on the way to work. I will bring another shirt even though I don't work with infants."





Our data show that despite progress, on-going education and technical assistance is needed to align infant sleep practices with licensing requirements and Safe Sleep Policies designed to lower SIDS risks.





- North Carolina has taken significant steps to lower the risks of SIDS in child care with the ITS-SIDS training and Safe Sleep Policy rules.
- More infants are positioned on their back to sleep and sleep environments are safer.
- Both providers and ITS-SIDS trainers have extended infant sleep safety standards beyond their work environments and incorporated them into their personal lives.





- Safe sleep educational efforts in NC child care will be sustained due to positive regulatory changes.
- Childcare providers and ITS-SIDS trainers now play a vital role in educating parents about infant sleep safety and SIDS.



#### **Addendum:**

# Significant SIDS decline since 2003 attributed to policy changes and training

#### Proportion of SIDS to Non-SIDS Deaths in NC Child Care: 1997 - 2007

Data Source: NC Division of Child Development

