

Insights

One Step Closer to the National Norm of Infant Safe Sleep and Breastfeeding



Imagine if families always received consistent, evidence-based

advice about infant safe sleep and breastfeeding—advice that accounts for their beliefs, values, culture and circumstances, and that empowers them as caregivers. Imagine what this might mean for the approximately 3,500 infants that [die from sleep-related causes](#) every year, or for the [thousands of babies](#) and mothers who miss out on the benefits of continued exclusive breastfeeding.

Consistent, evidence-based advice, whether in a hospital or at home, could change these numbers, ultimately improving maternal and infant health outcomes, saving babies' lives, and addressing the significant racial disparities associated with safe sleep and breastfeeding.

This is one of the goals of the National Action Partnership to Promote Safe Sleep Innovation and Improvement Network ([NAPPSS-IIN](#)), funded by the Health Resources and Services Administration Maternal and Child Health Bureau. Over a five-year period, NAPPSS-IIN is working to implement a small set of straightforward evidence-based practices (called safety bundles) in multiple settings that simultaneously support breastfeeding and safe sleep, including prenatal care centers, birthing hospitals, Women Infants and Children (WIC) nutrition centers, and home visiting services. By ensuring families receive consistent and effective messages across these settings—whether in the hospital, in the community or in their homes—NAPPSS-IIN is seizing every opportunity to support caregivers and babies.

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“In the first two years of the project, we piloted the first set of hospital-based safety bundles in five birthing hospitals in five states,” says NICHQ Executive Project Director Pat Heinrich, RN, MSN, CLE. “Now, we’re thrilled to announce the expansion to our second cohort, which includes 15 new hospitals across nine states. This cohort will build off the lessons-learned from the original five hospitals, so they can accelerate the launch of the safety bundles in their hospitals and then move to introduce best practices to the prenatal setting.”

Along with developing the hospital safety bundles, NAPPSS-IIN is working to expand a partnership of over 70 cross-sector, national level organizations that are invested in improving and reducing disparities in infant safe sleep and breastfeeding. Their collaboration is critical to disseminating common messaging and mobilizing their constituencies to make safe sleep and breastfeeding a national norm. Learn more about the initiative and ways to get involved [here](#).

Over the next three years, safety bundles for hospitals and prenatal care centers will continue to be tested and improved. And by the time the final cohort joins the initiative, safety bundles will have spread to community settings through WIC and home visitors. By 2021, hospitals and prenatal care centers, social service agencies, and other community touch points across the country will all be working together to provide consistent, evidence-based instruction about safe sleep and breastfeeding.

“While launching this second cohort, it’s energizing to look back at what the hospitals in the first cohort have already accomplished—the positive changes they’ve implemented have laid the foundation for the next round of hospitals,” says Heinrich. “As we move into the next phase of the initiative, we get one step closer to providing more families with the messages and resources they need to make infant safe sleep and breastfeeding the national norm. Because while this is a pilot project, our ultimate goal is to share the lessons and successes broadly for widespread adoption.”

Building on the successes of Cohort A

The first cohort of hospitals tested ways to improve safe sleep and breastfeeding messages in hospital settings after mothers delivered. Specifically, they implemented two hospital-based safety bundles: the first focused on improving conversations about safe sleep and breastfeeding, and the second implemented a process for ensuring that all babies slept in a safe environment.

“All teams have seen real improvement as they’ve made changes and tested interventions, not only in the number of caregivers receiving safe sleep and breastfeeding information, but in the quality of the conversations they’ve engaged in,” says Heinrich. “We’ve prioritized culturally-appropriate and empathetic safe sleep education, and we know that’s making a difference. And we’ve seen a real push toward evidence-based maternity care, such as mothers 'rooming-in' with their babies after birth and engaging in immediate skin-to-skin contact—two practices we know promote breastfeeding initiation and continuation.”

According to NAPPSS-IIN Project Director Stacy Scott, PhD, MPA, improving conversations with minority populations is critical for addressing safe sleep disparities. [Learn how](#) to develop those conversation from a place of mutual trust.

NAPPSS-IIN's focus on rooming-in and skin-to-skin has important implications for addressing health disparities. According to recent research from [a study published in Pediatrics](#), both practices have the potential to increase breastfeeding rates among African American mothers specifically, a population that has [the lowest rates of breastfeeding](#) among racial and ethnic groups.

Taking the next step: Extending to prenatal care with a focus on disparities

The launch of the second cohort means the launch of a bundle of evidence-based practices to improve safe sleep and breastfeeding messages and advice in the prenatal care setting. The prenatal bundle, which will continue to be tested and refined, seeks to provide expectant mothers with anticipatory guidance and education about safe sleep and breastfeeding, document their feeding and sleeping plans, and connect mothers with pediatric providers who will care for their infants after discharge.

The bundle will also help encourage consistent and relevant educational messaging from prenatal care through discharge; it recommends that prenatal providers, the delivery care team, and the pediatric provider connect during prenatal care to discuss the infant feeding and sleep plans, as well as review any potential red flags the prenatal care team may have identified.

“With the launch of the prenatal bundle, both Cohort A and B teams will take advantage of opportunities to begin this anticipatory guidance sooner in the pregnancy and in a more cohesive way,” says Heinrich. “No matter where families are in their pregnancy, they’ll hear consistent messages that account for their individual goals and proactively work toward solutions to any challenges the families anticipate.”

The launch of Cohort B also represents a purposeful development to addressing safe sleep and breastfeeding disparities among vulnerable populations. Four new hospitals and prenatal teams in four new states have joined the initiative and each serve populations who experience high rates of sleep-related infant deaths and/or low rates of breastfeeding.

“When we opened up recruitment to new hospital teams, we were intentional about targeting hospital and prenatal sites that serve American Indian, Alaska Native, and non-Hispanic black mothers—populations that all [experience high rates of sleep-related infant deaths](#),” says Heinrich. “Addressing these disparities is not only critical to NAPPSS-IIN’s overall project aim of reducing disparities, but an important step towards health equity, which reflects the Healthy People 2020 [national objectives](#) to achieve health equity, eliminate disparities, and improve the health of all groups.”

For the next three years, NAPPSS-IIN teams will continue to test safety bundles across multiple settings, sharing their successes and lessons-learned as they go. [Sign up for NICHQ News](#) to stay informed about their learning network.