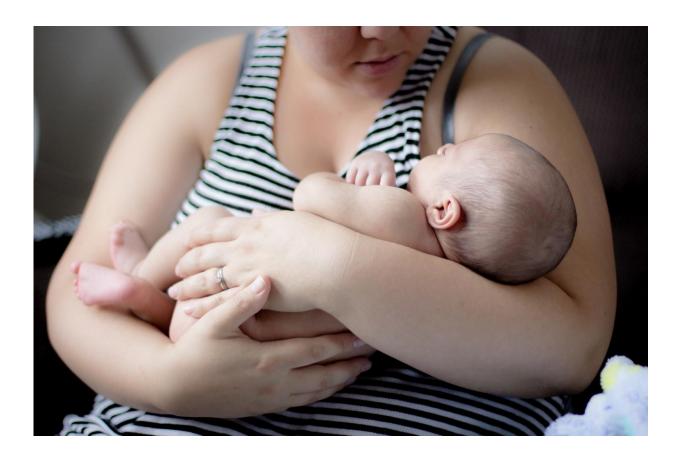


Study shows baby boxes and sleep education reduced bed-sharing in first week of infancy

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Bed-sharing, the unsafe practice in which parents sleep in the same bed as their babies, is associated with sleep-related deaths in infants, including sudden infant death syndrome (SIDS) and accidental



suffocation and strangulation in bed. However, a research team at Temple University Hospital (TUH) has now found that face-to-face postpartum education about safe infant sleep, combined with the distribution of a baby box, which is a cardboard bassinet, reduced the rates of bed-sharing during babies' first 8 days of life. The research was presented May 6 at the Pediatric Academic Societies Meeting in San Francisco.

To promote a safe sleeping environment for babies, the American Academy of Pediatrics (AAP) recommends room-sharing without bedsharing, a firm mattress, breastfeeding, baby sleeping on the back and avoidance of exposure to smoking, alcohol and other drugs.

"In an effort to address the common high-risk behaviors associated with <u>infant mortality</u>, we created the Sleep Awareness Family Education at Temple, or SAFE-T, program," says Megan Heere, MD, Assistant Professor of Pediatrics at the Lewis Katz School of Medicine at Temple University and Medical Director of the Well Baby Nursery at TUH. "The program seeks to use education and baby boxes to curb those high risk behaviors."

TUH is located in North Philadelphia, an area that has one of the highest <u>infant mortality rates</u> in the United States with many babies born into poverty and to young <u>mothers</u> who do not have adequate resources to care for a newborn.

In order to determine if TUH's SAFE-T program was effective in reducing the rates of bed-sharing, the Temple research team performed a prospective, controlled, interrupted time series study utilizing mothers and infants who were discharged together between January 1, 2015 and November 15, 2016. Within 72 hours after discharge the mother was contacted by phone for a standard post-discharge interview to assess sleep environment for the <u>babies</u>, including where their baby sleeps.



Baby box was added as a response option after May 3, 2016, the date that Temple began providing baby boxes free of charge to all mothers who delivered at TUH.

The study was divided into two groups. The control group, whose data was collected between January 1, 2015 and February 7, 2016, received standard nursing discharge instructions which included instructions on safe infant sleep. Data for the <u>intervention group</u> was collected between February 8, 2016 and November 15, 2016. The intervention group received education that included AAP safe infant sleep recommendations delivered in person by a select group of registered nurses, under the direction of a pediatrician. Each mother was also given a summary of the teaching points on a laminated door hanger. The intervention group also received a baby box, complete with a foam mattress, cotton fitted sheet and baby supplies. Each mother also watched a 3-minute instructional video on the use of the baby box as a bassinet.

Temple contacted 5,187 mothers for a post-discharge interview between January 1, 2015 and November 15, 2016. A total of 2,763 mothers completed the interview, with a response rate of 54% for the control group and 52% for the intervention group.

The research team found that:

- Face-to-face sleep education and providing a baby box with a firm mattress and fitted sheet reduced the rate of bed-sharing by 25% in the first eight days of life.
- For exclusively breastfed infants, a population at increased risk of bed-sharing, bed-sharing was reduced by 50%.
- Of the mothers who received the baby box, a majority said they used the box as a sleeping place for their infants.
- Of the mothers who received the baby box, 12% said they used



the box as the primary or usual sleeping space for their infants.

• Of the mothers who exclusively breastfed and also used the box as a sleeping space, 59% said the box made breastfeeding easier.

"We are pleased with the results of this first-of-its-kind study," adds Dr. Heere, who was also lead investigator. "Future studies are needed to determine if the effect of this intervention is sustainable through the first 6 to 12 months of life, and if this intervention can significantly reduce the incidence of sleep-related death in large populations over time."

"The SAFE-T program is a total team effort with a high level of collaboration between Temple nurses and physicians, and it's inspiring to see the impact that this program is having on the well-being of our patients and their families," says Jennifer Rodriguez, BSN, RN, Director of Nursing Services at TUH.

Provided by Temple University

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