## PERINATAL/INFANT HEALTH

**Toward reducing infant mortality related to sleep environment and position.**

**Priority Need:** Bolster local level capacity to promote and protect health and well-being of children, caregivers and families.

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| 1. Reduce parents’ and influencers’ perceived barriers/resistance points to creating and using a safe sleep environment by 10% from baseline each year for 5 years. | - Conduct baseline market research to measure variables such as barriers and resistance points to safe sleep.  
- Implement social marketing and media campaign strategies statewide, targeting areas of high need/vulnerability.  
- Target influencers: grandparents and fathers as part of planned, current and ongoing BFH efforts.  
- Work with breastfeeding advocates to develop/or adopt a shared position statement regarding breastfeeding and safe sleep. Provide statement to hospitals, internal, and external stakeholders.  
- Develop consistent messaging across agencies such as WIC/DCFS, etc. that address caregiver barriers, including caregiver impairment.  
- Maintain partnerships with hospitals statewide to continue to support their focus on SIDS/Safe Sleep. | Infant mortality per 1000 live births  
Post-neonatal mortality per 1000 live births  
Sleep-related SUID per 100,000 live births | NPM 4: Safe sleep (percent of infants placed to sleep on their backs) | |
| 2. Increase by 5 the number of coroners who will accurately code SIDS/SUIDS, each year, for 5 years. | - Develop and implement a Quality Assurance protocol for coroners that determines accuracy of coding.  
- Provide training to coroners and death scene investigators, including on how to have difficult, honest conversations with families about the role of accidental suffocation and strangulation in bed in the child’s death. | | | |
| 3. A minimum of 50 professionals (individuals or facilities) will be trained to recognize, identify, model safe sleep environments, and educate parents, as part of their work, each year, for 5 years. | - Continue to train firefighters and Emergency Medical Services (EMS) with Direct On-Scene Education (DOSE)™.  
- Create and/or update a compelling presentation(s)/training template for professionals.  
- Work with LA Child Care Health Consultants (CCHCs) so that they encourage/recommend and provide SIDS/Safe Sleep training to the daycare facilities they serve (as part of their licensure requirement).  
- Work with the Department of Education to design and implement strategy around audits or periodic monitoring to make sure child care centers are in compliance with new licensure requirements for safe sleep. | | | |
4. By the end of 5 years, five (5) Consumer business partners will change their policy related to the manner in which they promote, advertise, and display products related to safe sleep environments.

- Develop a strategic plan that includes the assessment of current policy/practices of potential target business, and identifies strategies and tactics to engage targeted businesses.
- Determine current nationwide efforts to influence the entertainment industry’s depiction of safe sleep environments (Hollywood product placement) and explore opportunities to contribute to such efforts.
- Collaborate with the Consumer Product Safety Council to review protective legislation from other states that would be feasible in Louisiana, i.e. restrictions on sale of unsafe bedding.

5. At minimum in the next year, 5 local programs will integrate PRAMS/SUIDS data to develop target interventions. (1 additional program each year until 2020)

- Analyze PRAMS/SUIDS-CDR data to identify program targets, inform interventions, develop fact sheets
- Develop a dashboard that features relevant data.
- Provide info and resources to partner agencies who have touchpoints with families such as (DSFS, WIC, Bayou Health Plans, Centering Pregnancy, Head Start, Early Start) and coordinate activities & messaging around SIDS/safe sleep