

Insights

Creating a Safe Sleep City



"By building this collective energy, we can come together as a city, and eventually as a state, to educate families and prevent infant deaths," says Charlene Collier, MD, MPH, MHS, the perinatal health consultant for Mississippi's Department of Health.

In 2016 in Mississippi, more than [30 healthy babies died in their sleep](#) from accidental suffocation or strangulation. These numbers reflected an increase from the previous year, despite the promising fact that overall [infant mortality rates decreased](#) in the state.

"Understanding infant safe sleep practices isn't always easy; that's why we need to do more to help families," says Charlene Collier, MD, MPH, MHS, the perinatal health consultant for Mississippi's Department of Health. "We've been passionate about safe sleep for years, and prioritized it in our work on the Collaborative Improvement and Innovation Network to Reduce Infant Mortality ([Infant Mortality ColIN](#)),* but we're still seeing too many families suffer the preventable loss of an infant. That tells us we need to change our approach and find innovative ways to raise awareness."

Mississippi is one of four state teams participating on the NICHQ-led Safe Sleep Infant Mortality Collaborative Improvement and Innovation Network ([Safe Sleep IM ColIN](#))—an initiative that seeks to improve infant safe sleep practices and reduce disparities. The Safe Sleep IM ColIN is an opportunity for states to build on the findings and lessons learned from the Infant Mortality ColIN's Safe Sleep Learning Network, both from their own work and from states across the

nation.

Interested in finding out more about the lessons-learned from the Safe Sleep Learning Network? [Click here to view](#) the Infant Mortality Prevention Toolkit, and select Safe Sleep Practices.

“We saw [significant reductions](#) in sudden unexpected infant deaths (SUIDs) in multiple states during the Infant Mortality ColIN,” says NICHQ Executive Project Director, Pat Heinrich, RN, MSN, CLE. “Now states in the Safe Sleep Infant Mortality ColIN are looking at those successes for inspiration in their own work. This shared learning is one of the main benefits of a collaborative approach.”

Mississippi, realizing that statewide approaches were stalling, decided to re-energize their work by creating what they’ve called a “Safe Sleep City” model in Jackson. The model builds on community-based approaches seen in other cities, such as Baltimore and Cincinnati, where a citywide campaign became a catalyst for improving safe sleep practices.

“When our work started at the state-level, we had trouble achieving buy-in,” explains Collier. “Even though SUID is such a personal issue, people weren’t connecting to the messages. Now we’re working to inspire and build on the passions within communities. We want to develop a collective responsibility, a community agreement that everyone—doctors, store owners, daycare staff, restaurateurs, city officials—should care about their community’s babies. By building this collective energy, we can come together as a city, and eventually as a state, to educate families and prevent infant deaths.”

While Jackson’s Safe Sleep City is still in its early stages, the Mississippi team has been busy laying the ground work for success. Interested in developing a safe sleep city in your state? Keep reading for three of Mississippi’s early lessons-learned.

Don’t limit partnerships to the healthcare community

Not surprisingly, pediatric practices and obstetric offices are central targets for promoting safe sleep messaging in Jackson. They’re powerful allies but only one piece of the puzzle. Sparking community-wide investments means finding partners across the community.

Central gathering places, such as churches, restaurants and grocery stores, are opportunities to reaffirm messaging delivered by healthcare staff and to reach a larger audience. Churches can share flyers, handouts, and resources with their congregation and grocery stores and restaurants can hang posters, and display window and floor decals. Their participation can be especially important for ensuring that grandparents, cousins and community members—caregivers who may not always attend medical visits—are all up-to-date on current

recommendations for safe sleep practices.

To maximize their efforts, Mississippi is targeting partnerships in high need areas throughout the city. By mapping which communities in Jackson experience the highest numbers of SUIDs, they can prioritize outreach to the community sites that exist in those neighborhoods.

“Some partners get involved because they are already professionally invested in maternal and infant health,” says Collier. “But just as many, and just as powerful ones, are developed because of their connection to their community. Watching your parishioner suffer the loss of an infant; seeing someone who has bought groceries from you her whole life become a mother—these personal connections are powerful motivators.”

Increase buy-in with visible partners

By developing a partnership with the Jackson mayor and father of two, [Chokwe Antar Lumumba](#), the Mississippi team cemented the campaign as a community movement and inspired other partners to get involved. “The mayor’s endorsement symbolizes a city-wide commitment,” explains Collier. “It says, ‘this is priority for our city; this is something that affects us all personally.’ That’s not something a mandate from the state health department can do.”

Similarly, respected allies in the medical community can provide incentive for local practices to increase their efforts around safe sleep promotion. For example, the Mississippi team reached out to doctors at the University’s local pediatric intensive care unit to help their campaign have a stronger impact.

“These clinicians have seen firsthand the devastating effects of unsafe sleep habits,” says Collier, “which makes them passionate about prevention. They will go door-to-door to pediatric and family practices, offering their personal endorsement, spreading safe-sleep messaging and really amplifying our efforts.”

Tap into existing programs

The Mississippi team also recommends seeking out partnerships with organizations that are already supporting the health and development of families in the community.

“We’re all talking to the same community of families, and we’re sharing similar messages about family health and safety,” explains Collier. “When we work together, we can streamline those efforts and reach more families.”

For instance, they've partnered with their Office of Tobacco because opportunities to promote smoking cessation are also opportunities to both reduce a known risk factor for SIDS and promote safe sleep. Building partnerships and aligning messaging helps the team capitalize on opportunities for collaborative sharing.

Over the next year, the Mississippi team will continue to build partnerships across Jackson, creating a safe sleep city model that can be spread and scaled across the state. Interested in keeping up with their improvement efforts? [Sign up for NICHQ news](#) to stay informed on their progress and lessons-learned. Or [click here](#) to read recent safe-sleep articles.

*The Maternal and Child Health Bureau (MCHB) of the Health Resources and Services Administration (HRSA) funded both the Infant Mortality CoIN and the Safe Sleep Infant Mortality CoIN.