

**STATE OF CONNECTICUT**  
**OFFICE OF THE CHILD ADVOCATE**  
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**Testimony of Sarah Eagan, Child Advocate, State of Connecticut**  
**In Support of Raised Bill 258.**

February 20, 2015

Senator Gerratana, Representative Ritter, distinguished members of the Public Health Committee:

The Office of the Child Advocate appreciates the opportunity to offer this testimony today in support of Senate bill 258, An Act Concerning Infant Safe Sleep Practices.

The mandate of the Office of the Child Advocate (OCA) includes evaluating the delivery of state funded services to children and advocating for policies and practices that promote children's well- being and safety.

In 2014, OCA along with the State Child Fatality Review Panel published a Public Health report alerting the state regarding the following:

**Unsafe sleep related deaths are the leading cause of preventable deaths of infants in Connecticut.**

In fact, according to data compiled by OCA and CFRP, the number of Connecticut infants who died between 2001 and 2013 where unsafe sleep conditions were present was almost **three times the number of infants who died from child abuse.**

*What is an "unsafe sleep related" infant fatality?*

Unsafe sleep related causes of infant death are linked to how or where a baby sleeps. Deaths may be due to blockages of the nose/mouth; entrapment/chest compression (when an infant gets trapped between two objects, such as a mattress and wall, and cannot breathe or overlying); or suffocation from a low oxygen/high carbon dioxide environment (under a blanket).

*How often do infants in Connecticut die from unsafe sleeping conditions?*

Infants in Connecticut are more likely to die from unsafe sleeping conditions than from child abuse, car accidents, choking, drowning, falls, or any other source of accidental injury.

### Infant Fatality Risk Factors

- Sleeping in adult beds with adults and other children
- Sleeping in beds with comforters, blankets and duvets
- Sleeping on couches or chairs when caregivers sleep holding them
- Sleeping in cribs with stuffed animals, blankets, toys and other items
- Overdressing/overheating baby
- Propping bottles

### Research also confirms additional risk factors associated with sudden infant death.

- Mental health challenges, including depression
- Substance use, including alcohol or drugs
- Smoking
- Obesity
- Parental isolation

### *2013 Infant Fatality by the Numbers*

In 2013, there were 23 infants who died where the causes of death were SUID, SIDS, or “undetermined.”<sup>1</sup> Of these 23 unexpected, unexplained deaths, 18 infants had risk factors associated with their sleep environment.

### *Sudden Unexplained or Undetermined Infant Deaths in 2013*

- 17 Boys
- 6 Girls
- Average age of infants: 3 months
- In at least seven cases, the parent(s) had documented histories of substance abuse.

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<sup>1</sup> When infants die unexpectedly, this is called “Sudden Unexpected Infant Death (SUID).” SUID includes all unexpected deaths: Deaths without a clear cause, such as SIDS, and deaths from a known cause, such as suffocation or other sleep-related causes. Sleep-related deaths are not SIDS. SIDS is term for the sudden death of an infant under 1 year of age that cannot be explained, even after a complete death scene investigation, autopsy, and review of the infant's health history.

### *2011 and 2012 Infant Fatality by the Numbers*

Of these 43 unexpected, unexplained infant deaths in 2011 and 2012, 31 infants had risk factors associated with their sleep environment.

#### *Most common unsafe sleep environments in CT fatality cases*

- Co-sleeping in an adult bed with parents or siblings
- Car seat
- In a crib with blanket, pillows, or placed on their stomachs
- Put to sleep with a bottle in an adult bed

#### *Are “unsafe sleep” fatalities trending up or down in CT over the years?*

This is as difficult question to answer. Overall the percentage of infant deaths classified as SIDS has shown a downward trend, but this has not translated into an overall decline in infant deaths. How we categorize findings regarding infant death has changed over time, and fewer infants are now determined to have died from SIDS. More infants are now categorized as having died from SUID--Sudden Unexplained Infant Death-- an umbrella term covering multiple infant death causes, including SIDS and suffocation.

### SENATE BILL 258 INCORPORATE A KEY RECOMMENDATION FOR CHILD FATALITY PREVENTION

Senate Bill 258 will ensure that new parents receive the information, guidance and support to make the safest choices about how to help their baby get healthy sleep. Other states currently incorporate anticipatory guidance from health care providers regarding other aspects of safe infant care and avoidance of Shaken Baby Syndrome.<sup>i</sup>

Guidance regarding safe sleep practices will provide critical opportunity to engage parents and provide information regarding infant needs, resources for caregiver support and risk factors for infant mortality. Providers may also then have the opportunity to explore with parents any barriers or challenges to ensuring a safe sleep environment and assist in identifying and accessing needed resources. Information-sharing allows providers the opportunity to address any concerns a parent may have about infant safe sleep and resolve commonly held misconceptions that include “stomach” or “side” sleep position reducing chances of regurgitation and choking.

### 2011 Recommendations from the American Academic of Pediatrics Regarding Safe Sleep for Infants

- Back to sleep for every sleep
- Use a firm sleep surface
- Room-sharing without bed-sharing is recommended

- Keep soft objects and loose bedding out of the crib
- Pregnant women should receive regular prenatal care
- Avoid smoke exposure during pregnancy and after birth
- Avoid alcohol and illicit drug use during pregnancy and after birth
- Breastfeeding is recommended
- Consider offering a pacifier at nap time and bedtime
- Avoid overheating
- Do not use home cardiorespiratory monitors as a strategy for reducing the risk of SIDS
- Expand the national campaign to reduce the risks of SIDS to include a major focus on the safe sleep environment and ways to reduce the risks of all sleep-related infant deaths, including SIDS, suffocation, and other accidental deaths; **pediatricians, family physicians, and other primary care providers should actively participate in this campaign.**

Sincerely,

Sarah Eagan, JD  
State Child Advocate

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<sup>i</sup> <http://www.ncsl.org/research/human-services/shaken-baby-syndrome-prevention-legislation.aspx>; see also <https://www.medstarhealth.org/Pages/Services/Pediatrics/MedStar-Franklin/Pediatric-Community-Services-and-Events-at-MedStar-Franklin-Square.aspx#Sleep> (outlining Franklin Square Hospital in Baltimore Maryland's affidavit program for both safe sleep and Shaken Baby Syndrome).