(Revised July 13, 2015)

# **Safe Sleep Environments for Infants**

## 1. POSITION STATEMENT

Toronto Public Health (TPH) promotes safe sleep environments for infants 0 to 12 months of age. Based on the available scientific evidence, TPH recommends that infants are placed to sleep:

- on their backs;
- on a separate sleep surface, like their own crib, bassinet, or cradle that meets current Canadian safety regulations, is appropriate for infant's age and weight, and is free from extra items;
- in the same room as the parent or caregiver for the first six months of life;
- at a comfortable room temperature with no overheating; and,
- in a smoke-free environment.

TPH does not support the practice of infants sharing the same sleep surface with adults, other children or pets because of the potential safety risks. This includes sharing any sleep surface, such as a bed, couch or chair.

This position statement is not intended for infants with a diagnosed health condition, which warrants specific sleep environment as recommended by the infant's health care provider.

## 2. DEFINITIONS AND ACRONYMS

**Bedsharing** is a sleeping arrangement in which an infant shares the same bed as an adult, another child or pet (Canadian Paediatric Society (CPS), 2014; Health Canada, 2012a). It is a common type of shared sleep surface (RNAO, 2014) and can be intentional or unintentional.

**Infant** is a child 0 to 12 months of age.

**Preterm infant** is an infant born before 37 weeks gestation (CPS, 2010). Preterm infants are at increased risk for Sudden Infant Death Syndrome (SIDS) (CPS, 2010; Trifunov, 2009). Safe sleep environment recommendations also apply to healthy preterm infants (CPS, 2010; Perinatal Services B.C., 2011). Preterm infants with health concerns should consult with the infant's primary health care provider to confirm safe sleep environments.

**Room sharing** is a sleep arrangement where an infant and parent or caregiver sleep in the same room, but not on the same sleep surface (e.g., adult bed and crib) (RNAO, 2014).

#### Safe sleep environment for infants includes:

- Positioning to sleep on their backs (CPS, 2014);
- Placing on a separate sleep surface, such as a crib, bassinet, or cradle that meets current Canadian safety regulations and is appropriate for infant's age and weight (RNAO, 2014; CPS, 2014)
- Using a flat and firm surface (BSRC, 2014; RNAO, 2014; CPS, 2014; Health Canada, 2012a)

**Toronto** Public Health

- No extra items, such as toys, loose bedding, bumper pads, pillows in the sleep environment (RNAO, 2014; CPS, 2014; Colvin et al, 2014; Health Canada, 2012b)
- Room sharing with the parent or caregiver for the first six months of life (RNAO, 2014; CPS, 2014; Health Canada, 2012b; Public Health Agency of Canada (PHAC), 2011)
- A comfortable room temperature with no overheating (PHAC, 2011)
- Not being placed to sleep for extended periods of time in carriages, strollers, car seats, infant swings, bouncers, or playpens (Health Canada, 2012b)
- A smoke-free environment (CPS, 2014; RNAO, 2014; Health Canada, 2012b).

**Shared sleep surface** is a sleep arrangement where an infant shares the same sleep surface with another person, child or pet (CPS, 2014; Health Canada, 2012a). It can occur when an adult and infant share the same bed (i.e. bedsharing), but also includes any sleep surface, such as a couch (RNAO, 2014). It can be intentional or unintentional.

Sleep environment is anywhere an infant falls asleep, at any time (RNAO, 2014).

**Sudden Infant Death Syndrome (SIDS)** is the sudden and unexpected death of an apparently healthy infant whose death remains unexplained even after a complete post mortem investigation that includes a full autopsy, an examination of the circumstances of the death, and a review of the case history. In other words, the term SIDS is used when the cause of death cannot be determined (RNAO, 2014).

**Sudden Unexpected Death in Infancy (SUDI or SUD)** is the sudden and unexpected death of an infant who was thought to be healthy (RNAO, 2014). This may be due to:

- SIDS
- Accidental injury
- Non-accidental injury due to neglect or abuse
- A previously undiagnosed natural disease process (Office of the Chief Coroner Province of Ontario, 2011).

## 3. BACKGROUND

Although the incidence of SIDS has decreased since 2000, rates of other sleep-related deaths (i.e. SUDI) have increased (Colvin et al, 2014; Office of the Chief Coroner Province of Ontario, 2011). Unsafe sleep environments, such as bedsharing and sleeping on unsuitable surfaces (e.g., adult bed, couch, car seat), continues to be a major risk factor in unexpected infant deaths (Office of the Chief Coroner of Province of Ontario, 2014).

Based on the current scientific evidence, the safest place for an infant to sleep is on their backs, on their own sleep surface (i.e. crib, bassinet, or cradle that meets current Canadian safety standards), and in the same room as the parent or caregiver for at least the first six months of life (RNAO, 2014; NICE, 2014, UNICEF UK, 2014; PHAC, 2011; Trifunov, 2009). In Canada, this message is supported by leading health authorities, including but not limited to the Public Health Agency of Canada (PHAC), Canadian Pediatric Society (CPS), Canadian Institute for Child Health (CICH), the Canadian Foundation for the Study of Infant Deaths, and the Registered Nurses Association of Ontario (RNAO) (PHAC, 2011; RNAO, 2014).

In an effort to promote public awareness of safe sleep environments, PHAC developed the *Safe Sleep for Your Baby* (2014) booklet which provides information related to SIDS and SUDI as well as strategies on the provision of safe sleep environments for infants. The RNAO also released a Clinical Best Practice Guideline for *Working with Families to Promote Safe Sleep for* 

*Infants 0-12 Months of Age* (2014). The document aims to support nurses working with families with infants 0-12 months of age by providing evidence-informed recommendations to guide nursing process (i.e. assessment, planning, implementation and evaluation) in promoting safe sleep, including minimizing the risks of unintentional injury and death.

TPH recognizes that no sleep environment is completely risk-free (CPS, 2014); however, educating caregivers can help to promote a safer sleeping environment for infants 0 to 12 months of age (CPS, 2014; RNAO, 2014). TPH acknowledges that caregivers' decisions about sleep environments and practices for infants may be influenced by their culture, values, beliefs and socioeconomic circumstances (RNAO, 2014). For example, a family's limited resources and daily living conditions may hinder their ability to create a safe sleep environment. With this in mind, it is critical that the impact of the social determinants of health on an infant's sleep environment be considered and that TPH staff collaborate with families to identify their needs and the best way to facilitate safe sleep environments and practices (RNAO, 2014).

# 4. REFERENCES/SOURCES

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# 5. APPENDICES

N/A

6. FOR MORE INFORMATION

N/A