

## Frequently Asked Questions by Parents on Safe Sleep Conditions or Practices for a Baby



### **Q. What are sleep related injury deaths?**

**A.** A sleep-related injury death is the sudden death of a baby less than 1 year old that occurs because of where and/or how they were placed to sleep. In these cases, an item like a loose blanket, pillow or another person caused the baby to suffocate and die. Babies placed to sleep on their stomachs can also suffocate if they get trapped and are unable to move their nose and mouth away from the mattress, soft bedding or other objects in the crib, such as stuffed animals.

Sleep-related infant injury death is not the same as **SIDS (Sudden Infant Death Syndrome)** or “crib death.” SIDS is the natural death of a baby that cannot be explained after a careful medical review of the case. Unlike SIDS, sleep-related infant injury deaths involve accidents that can be explained and are mostly preventable.

All babies, from birth to 12 months old, are at risk for sleep-related injury deaths. However, babies between 1 and 4 months old are at the greatest risk. Around this age, babies’ neck muscles are still very weak and it is hard for them to move out of dangerous situations. Babies also start trying to roll over during this time, but cannot do it well on their own. For these reasons, it is very important to follow infant safe sleep guidelines.

### **Q: How can I reduce my baby’s chances of dying from a sleep-related injury?**

**A:** The best way to reduce your baby’s risk of a sleep-related injury death is to place them — day or night — to sleep alone, on their back, on a firm mattress and in a safety-approved crib, bassinet, portable crib or play yard. Cover the mattress with a fitted sheet only and do not place loose blankets, pillows, toys or bumper pads in the sleep area. To check if your crib meets safety standards, call the Consumer Product Safety Commission (CPSC) at 800-638-2772, or visit [cpsc.gov](http://cpsc.gov) and search for “cribs.”

### **Q: I have poor heating in my apartment/ unit, and I don’t want my baby to be cold in their crib. How do I keep them warm if I don’t sleep with them or cover them with a blanket?**

**A:** If you are worried about your baby getting cold, dress them in a wearable blanket, such as a sleep sack, or in another layer of baby clothing. In general, your baby should be dressed with only one more layer than what you are wearing. If your unit is too cold, speak to your case manager or shelter director.

### **Q: My mother shared a bed with me when I was a baby with no problems. Why should I do anything differently for my baby?**

**A:** What we know about sharing a sleep surface with babies has changed over the years. In the past, many sleep-related injury deaths were thought to be caused by SIDS (a natural cause of death). Now we know that many babies die from accidental suffocation while sleeping in unsafe spaces, especially when sharing a bed with another person. These deaths are mostly preventable.

**Q: Why my baby should sleep on the back for naps and at night?**

**A:** Babies can breathe better on their backs than on their stomach or sides. When babies sleep on their backs and vomit, they naturally swallow or cough up the fluid, and turn their heads so it rolls down the side of their face. When babies sleep on their stomachs and vomit, they can breathe in the vomit and choke.

**Q: I know I shouldn't sleep with my baby, but he/she is fussy. What can I do?**

**A:** Try using the 5 S's<sup>1</sup>:

- 1. Swaddling:** It provides warmth and security – the same way your baby felt in the womb. This is done only when you are holding the baby. Do not put the baby down to sleep swaddled.
- 2. Side/Stomach Position:** Hold your baby on the left side to help with digestion. Once asleep, place your baby on the back in the crib.
- 3. Shushing:** This imitates the noise in the womb, making your baby feel calm and safe. It may work best when done loudly.
- 4. Swinging:** You can gently rock your baby in your arms or use a baby swing.
- 5. Sucking:** It is natural, and babies enjoy sucking even when they are not hungry. A baby cannot cry and suck at the same time!

**Q: I don't drink or use drugs, so aren't I less likely to smother my baby in bed?**

**A:** No. Innocent mistakes can happen. Even parents who do not drink or use drugs can accidentally smother their babies in bed. Bed-sharing can be dangerous for any family.

**Q: How can I breastfeed my baby in the middle of the night if I can't bring him into bed with me?**

**A:** Parents are allowed to have the baby's crib or Pack 'n Play right next to their bed. You may bring your baby into bed with you for feeding or for comfort. However, it is important for you to place your baby back in their own crib or Pack 'n Play before you fall asleep.

**Q: Car seats are safety approved. Can they also be a safe place for my baby to sleep?**

**A:** No. Because babies don't lie flat in car seats, they can suffocate when their heads (which are very heavy compared to the rest of their bodies), tip forward, blocking their airway.

**Q: What if my baby rolls onto his stomach while he's sleeping? Do I need to put him on his back again?**

**A:** Rolling over is an important and natural part of your baby's growth. Most babies start rolling over on their own around 4 to 6 months of age. If your baby rolls onto their stomach on their own during sleep, you do not need to turn them over onto their back. The important thing is for them to start off on their back. However, swaddled babies are at high risk for suffocation if they roll onto their stomachs. Stop swaddling babies as soon as they start trying to roll. This usually begins at around 2 months of age.

**To learn more about Safe Sleep visit [nyc.gov/safesleep](https://www.nyc.gov/safesleep) or call 311.**

Source: NYC Department of Health and Mental Hygiene materials.

<https://www1.nyc.gov/assets/acs/pdf/about/2017/safesleepbrochure0609.pdf>

<sup>1</sup> <https://www.webmd.com/parenting/baby/colic-remedies>