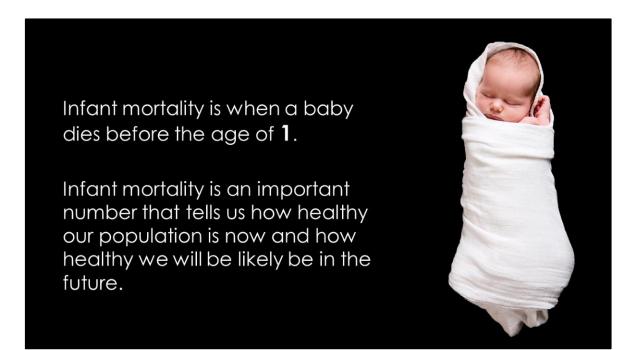


We must improve infant and maternal health in our county. In our work, often times we deal with the reactive side of child wellbeing.

Among other things, you see clients that struggle with mental health issues, chronic health issues, living in poverty, dealing with many different kinds of trauma. Child abuse and neglect is often times interwoven into these very complex issues.

We are here to double down on a couple of key prevention messages



Infant mortality is the death of a baby before the age of 1. Infant mortality is an important number that tells us how healthy our population is now and how healthy we will be likely be in the future.

So, one of the single *best* predictors of the overall health of a community is the health of their babies. And that starts way before a baby is born!



We know that a woman's health before she EVER gets pregnant can prevent or cause birth defects and premature birth. So there are steps can be taken now to lead to a healthier baby.

- Folic acid / prenatal vitamin- which can help to reduce certain birth defects by up to 70%- HHS clinic offers free prenatal vitamins.
- 50% of pregnancies in the US are unplanned. Planning for pregnancy or waiting 18 months between pregnancies can lead to healthier babies and mothers
 - Everyone should know that the HHS Family planning clinic, over at 53 S. French Broad- can help people find a birth control that is right for them. They serve everyone- even men! They can also help anyone sign up for family planning Medicaid which covers family planning services including tubal ligation and vasectomies.
- Immunizations work! Tdap and Flu shots are crucial to vulnerable infants who are still too young to be immunized. It's important for everyone-including pregnant women- be immunized to create a shield of protection.
- Quitting Tobacco- in any form- can make babies healthier. Smoking can

contribute to SIDS and chronic health problems for babies.

All of these can help move the dial on our infant mortality and future health. And we have to do better.

12 infant deaths in Buncombe County in 2015

884 infant deaths in NC in 2015

This ranked NC **42**nd in the nation for infant mortality in 2015



12 infant deaths in Buncombe County in 2015

There are disparities in our community also that we need to know about: In Buncombe County, black babies are dying at 3.1 the rate of white babies and Hispanic babies die at a rate 2.5 times higher than white babies.

Here in North Carolina during 2015, 884 infants died before their first birthday. That many children would fill 43 kindergarten classrooms.

This ranked NC - 42nd in the nation for infant mortality -in 2015

http://www.americashealthrankings.org/explore/2015-annual-report/measure/IMR/state/ALL



While it's important to take steps to improve health before you get pregnant to avoid premature birth or birth defects, there are steps to take after the baby is born- to give them a better shot of living beyond their first birthday. Times have changed and the information that we have all gotten as parents or caregivers has changed with it.

We are learning more every day about what it takes to keep babies safe and healthy, and we are trying reach not only mothers, but **all** people around a babyto share information that helps people to understand that child development and health is not the mystery that it once was.



You might already know the core story of child development and neglect-but it's helpful to see it represented in this way- kind of an inside look at what really happens when children experience neglect and how it affects their health.

This is a video from the Harvard School of Public Health.

Violence During Pregnancy:

- Risk of intimate partner violence increases during pregnancy.
- Every year, as many as 324,000 women in the US experience intimate partner violence during their pregnancy.
- Domestic violence during pregnancy doubles the risk of preterm birth and low birth weight, some of the main causes of infant deaths.



Sometimes in social work, domestic violence prior to the birth of a child isn't necessarily something you would always be involved in, but as you know- it is a widespread and serious problem- so it's worth knowing how it overlaps with pregnancy.

Sadly, the risk of violence during pregnancy increases.

Every year, as many as **324,000 women in the US** experience intimate partner violence **during their pregnancy**.

Domestic violence during pregnancy **doubles** the risk of **preterm birth and low birth weight**, some of the main causes of infant deaths.

Letting people know about the Family Justice Center, located at 35 Woodfin, is important to help stop the cycle of violence and make the environment better for the baby.

We give information about the FJC out regularly at the HHS Clinic. Helping to spread the word is important because you never know whose life will be

changed because of it.

BM Donovan, CN Spracklen, ML Schweizer, KK Ryckman, AF Saftlas. Intimate partner violence during pregnancy and the risk for adverse infant outcomes: a systematic review and meta-analysis. *BJOG: An International Journal of Obstetrics & Gynecology*, 2016; DOI: 10.1111/1471-0528.13928 https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2971723/

Safe Caregiver

- An adult, not a child
- Do they have a short fuse?
- Do they have experience caring for young children?
- Are they strong enough to lift, carry, and play with the child?



Remember- the risk of death for an infant increases under the care of a malenon biological caregiver.

Risk of **abuse** is higher when that caregiver grew up with violence or if the baby has more complex medical needs.

We know that an increasing number of women are working- and, for various reasons- men are home with small children. So, it's important to include men and non-custodial caregivers in this conversation about safely caring for children.

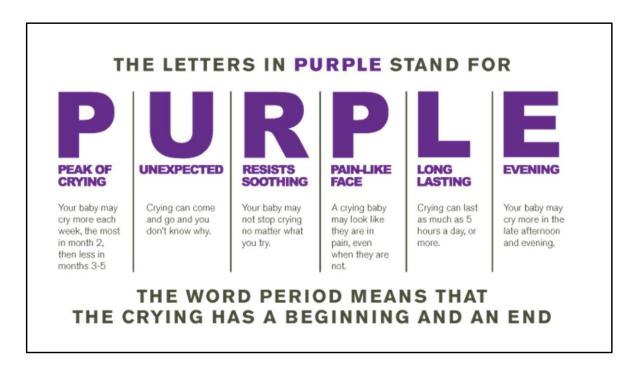


Abusive head trauma is a leading cause of physical child abuse deaths in children under 5 in the United States.¹

While shaken baby abuse is not limited to any special group of people, males tend to predominate as perpetrators in most cases.

A baby's head and neck are especially vulnerable to injury because the head is so large and the neck muscles are still weak. Also- the baby's brain and blood vessels are still very fragile and easily damaged by whiplash motions, such as shaking, and jerking.

One fourth (1/4th) or 25 percent of victims of Shaken Baby Syndrome die and of those who survive, 80% suffer LIFE LONG disabilities.



The #1 trigger for shaken baby syndrome is frustration with a baby's crying.

While its different for everyone- if you are working someone who is frustrated with a screaming baby- be sure to mention the harmful effects of Shaking a baby and that if a baby cries, it isn't bad news. Babies who increase and decrease their crying, have prolonged crying times, and sometimes inconsolable crying periods- are acting like they should, or were designed, to act!

It is not the crying, but the caregivers response to the crying that is the key. That gives us all something important to do; namely, to make sure that we and everyone who takes care of infants knows that, no matter how frustrating it gets to hear crying, **never ever shake an infant**.

The letters in PURPLE stand for common characteristics of persistent crying:

P for peak of crying. Your baby may cry more each week, peaking at about two months and may become less frequent between three months and five months.

U for unexpected crying. Crying comes and goes and you don't know why.

R for resists soothing.

P for **p**ain-like face. Your baby may look as if she's in pain, even when she's not.

L for long-lasting. Crying can last for several hours a day.

E for evening. Your baby may cry more in the late afternoon and evening.

http://www.babycentre.co.uk/x25016357/what-is-purple-crying#ixzz4Xjch8hSJ

Fussy baby: Quick Tips

5 S's can help calm babies:

- · Swaddling
- Side
- Shush
- Swing
- Suck



If a baby is crying- here some things you can try or show your clients.

First- Check to see if they need a diaper change, or they might be hungry, they might be too hot or cold... etc. But, know that it's normal for babies to cry- it's part of their development.

When you are caring for an infant - here are a couple of techniques that you can try to help soothe the baby when they are crying. These techniques might not work and that's perfectly normal- but it's worth a try.

The 1St S: Swaddle

Swaddling recreates the environment in the womb and is the cornerstone of calming. It decreases startling and increases sleep. And, wrapped babies respond faster to the other 4 S's and stay soothed longer because their arms can't wriggle around. To swaddle correctly, wrap arms snug – straight at the side – but let the hips be loose and flexed. Use a large square blanket or a sleep sack, but don't overheat, cover your baby's head or allow unravelling.

Note: Babies shouldn't be swaddled all day, just during fussing and sleep.

The 2nd S: Side or Stomach Position

The back is the only safe position for sleeping but it's the worst position for calming fussiness. This "S" can be activated by holding a baby on her side, on her stomach or over your shoulder.

The 3rd S: Shush

Contrary to myth, babies don't need total silence to sleep. In the womb the sound of the blood flow is a shush louder than a vacuum cleaner! The best way to imitate these magic sounds is white noise.

The 4th S: Swing

Life in the womb is very jiggly. While slow rocking is fine for keeping quiet babies calm, you need to use fast, *tiny* motions to soothe a crying infant mid-squawk.

The 5th S: Suck

Sucking is "the icing on the cake" of calming. Many fussy babies relax into a deep tranquility when they suck. Many babies calm easier with a pacifier. You can use a pacifier or even a clean finger.

The number one thing is to NEVER EVER SHAKE A BABY. Put the baby in their safe sleeping space, and take a break / breathe deeply.

If you know of a parent who is having a hard time, check on them regularly.

Nurturing Caregiver

- Serve and Return
- Safe / Stable
- Responsive to cues of child



As you saw in the video earlier, caregivers play a large role in the future health and stability of a child. During the first couple of months, newborns are working on feeling comfortable in their new world, so a responsive caregiver is key to building healthy connections through creating bonds based on safety and stability.

One quick tip for folks is to explain the idea of serve and return- which is the act of exchanging sounds, faces, and smiles with a baby.

As you know, adults might not engage in nurturing behavior due to stresses brought on by financial problems, lack of social connections, or health issues, but helping all caregivers around a baby understand that babies really need this kind of bonding to help them feel safer in the world.

https://www.youtube.com/watch?v=rVwFkcOZHJw 0-3 as a resource for caregivers / parents to help with child development

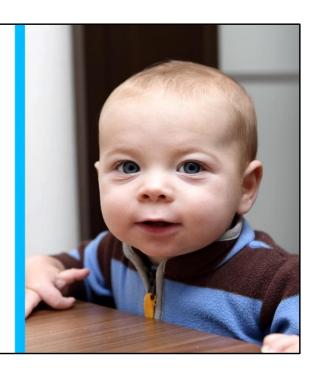


Here is an example of serve and return.. You can also view the Harvard School of Public Health- Series on Child Development

Safe Homes

1 in 3 homes with children have guns- many left unlocked or loaded.

In NC, 82,000 children live in homes with an unlocked and loaded gun.



Nationally: 1 in 3 homes with children have guns- many left unlocked or loaded. In NC, 82,000 children live in homes with an unlocked and loaded gun.

According to recent data from Mission Hospital, there has been a 70% increase in pediatric gunshot wound injuries in <u>WNC</u> over the past 5 years. 6 of 10 were in Buncombe County.

Nationally:

- Among children, the majority of unintentional shooting deaths occur in the home. Most of these deaths occur when children are playing with a loaded gun while unsupervised
- Domestic violence is more likely to turn deadly with a gun in the home.
- A gun in the home increases the chance of suicide.

This is can be an awkward but important conversation parents need to have with other parents and caregivers. A recommended approach for parents is that they ask about a gun in the home in a non-judgmental way. The recommended frame is "I have to be extra careful because my son/daughter gets into everything! So I need to make sure he can't find a loaded weapon."

But the simple step of asking can save a child's life.

http://askingsaveskids.org



poison control hotline 1-800-222-1212

More than 64 pain pills per person were prescribed in Buncombe County in 2015. If you or someone you know has pain medication at home that is expired or no longer needed, it's important to let them know that they should safely dispose of them.

It's shocking to know what teens and their friends are doing these days for fun. We have heard of "pharm parties" where kids take a bunch of pills- throw them in a bowl and blindly take them... not knowing what they are.

Everyone should know about the drop box locations which are at the Buncombe county Sherriff's office- on the first floor of the Court House in downtown Asheville or inside the Asheville Police Department. Items can be dropped off Monday through Friday during regular business hours. Some pharmacies also have unused medication drop off points.

Laundry Pods are also a real hazard for children. Between 2012 - 2013, more than 17,000 children under age 6 ate or inhaled the contents or squirted concentrated liquid from a packet into their eyes. These packets are especially dangerous because if a child chews on them- the contents squirt the liquid

straight into the back of their throat all at once, like an injection of chemicals. So, either keep them out of reach for children or locked up.

AND Every parent needs to know the poison control hotline: 800-222-1212

Safe Sleep

73 infants died from sleeprelated or sudden infant death in North Carolina in 2014.

3,500 sleep-related or sudden infant deaths occur each year in the US



Here in our state: 73 infants died from sleep related or sudden infant death in 2014.

3,500 sleep-related or sudden infant deaths occur each year in the US



It's no wonder we have struggled to get the word out about safe sleep. A quick google search brings up these images- which are all examples of unsafe sleep. One study showed that more than one third of pictures of sleeping infants in magazines geared toward women showed infants in an inappropriate sleep position, and two thirds of pictures of infant sleep environments were not consistent with AAP recommendations. Messages in the media that are inconsistent with health care messages create confusion and misinformation about infant sleep safety and may lead inadvertently to unsafe practices.

Since people have started incorporating safe sleep practices- we have seen a 50 % decrease in SIDS deaths....

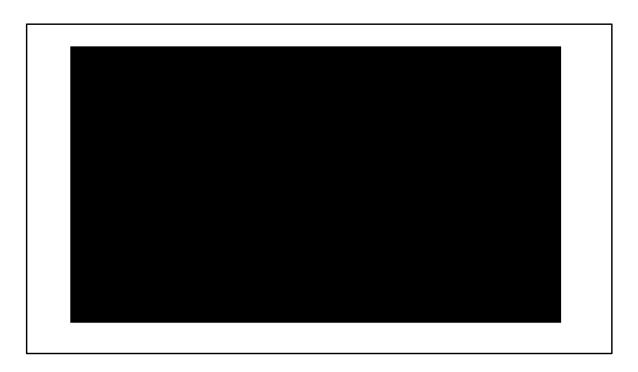
Here is what we know....

Babies don't need blankets in the crib with them to keep them warm. They only need a sleep sack to keep them warm. Blankets are dangerous because they can cause suffocation and also can overheat the baby.

We know that babies can suffocate from toys, blankets, and bumpers. These

things can cover their face and cut off their airflow. In the sleep space, there should only be a fitted sheet. NO toys or blankets!

https://pediatrics.aappublications.org/content/pediatrics/124/3/e416.full.pdf



Also-babies should be placed on their backs to sleep. Often times, parents think that a baby will choke if they are sleeping on their back and spit up. But, this is not true.

https://www.youtube.com/watch?v=RF98bY8eiUo



The new recommendations that just came out are that parents sleep in the same room with children.

Safe sleep comes in many different versions...

Baby box Bassinet Pack and play Crib Co-sleeper

http://pediatrics.aappublications.org/content/early/2016/10/20/peds.2016-2938



Sometimes people think that the baby is too cold if they aren't covered in blankets...

We got feedback that the baby in this picture doesn't look cozy- but overheating is also connected with SIDS.

A quick way you can tell if a baby is hot or cold is by feeling the baby's hands for warmth or coldness to see if they need another layer of clothes under the sleep sack. Or if their hands are really warm, you can take a layer off. But blankets are not the answer.

Times Have Changed:

For grandparents, babysitters, aunts / uncles, and even your friends. Make sure they know about safe sleep. Make sure men know, too!



So we are sharing all of this information with you in hopes that you will share any way you can- even your own social circles

Grandparents, friends, and fathers & mothers. Don't be afraid to have those conversations with those caring for a baby.









Want a presentation? We can help!
Questions about this presentation can be directed to hhscommunications@buncombecounty.org

