

Preventing Infant mortality & Sudden Infant Death Syndrome In Nunavik

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RÉGIE RÉGIONALE DE LA NUNAVIK REGIONAL SANTÉ ET DES SERVICES BOARD OF HEALTH SOCIAUX DU NUNAVIK AND SOCIAL SERVICES

Public Health Department

Recent article published in Le Devoir

"The police found 12 lifeless infants in Nunavik last year. Shocked by this number of deaths (...) the chief of the police of the region alerted the office of the coroner of Quebec. Responsible for all these files, coroner Geneviève Thériault believes that there is cause for concern".





Answering your questions



What is the **regional situation** with regards to Infant mortality and Sudden Infant Death Syndrom? Ų

What are the best clinical practices for prevention of SIDS and how they are applied in the region?

How can I help support families with young children in Nunavik?



What is SIDS? What are the stats telling us?

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How can SIDS be prevented? What is done in Nunavik?

What else should be done to support families?

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What are Infant Mortality Rates?

Infant mortality rate, 2005 to 2014



What are the main IM causes in Nunavik?

1. Perinatal causes (50%)

Birth defects Pregnancy/delivery complications

2. SIDS (30%)

- Remaining 20% mix of infectious, respiratory, nervous system conditions, trauma, etc.
- Injury not a common cause



SIDS has decreased in the last decades in Canada

Postneonatal mortality rate (PNMR) per 1,000 neonatal survivors due to SIDS and other causes (excluding SIDS and congenital anomalies) in Canada (excluding Newfoundland and Ontario), 1985-1998



Sudden infant death syndrome in Canada: - Canada.ca



Sudden Infant Death Syndrome

Definition?

- "Unexpected death of an infant <1 year of age, occurring during sleep, remains unexplained after a thorough investigation"
- Complete investigation necessary to R/O suffocation or injury

Cause? Overlap of multiple factors

SLEEP ENVIRONMENT Position, smoking, room t°C Bed Surface / sharing

CHILD VULNERABILITY Family Hx, age & sex Health status **PREGNANCY** Health behaviour Quality of follow up



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Rectifying some misconceptions



What is SIDS? What are the stats telling us?

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How can SIDS be prevented? What is done in Nunavik?

What else should be done to support families?

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Factors « associated » with SIDS

SLEEP ENVIRONMENT

Sleep stomach/side*

Passive Smoking*

Object in bed* /Soft Surface/Bed sharing

Overheating

BIO VULNERABILITY CNS malformation* Fam hx*

Infections* LBW/prem /

2 to 4 months

PREGNANCY

Alcohol or opiate use*

Smoking *

Absence of prenatal care



- We don't know the "cause of SIDS"
- Some factors appear to be more frequent in SIDS, but we cannot say they "cause" SIDS

Well Documented Factors * Factors ($RR \ge 3$)

The factors contributing to the risk of sudden infant death syndrome (nih.gov) Risk and protective factors for sudden infant death syndrome - PubMed (nih.gov)

SIDS in racialized populations



"Concentrated in areas experiencing racial and economic marginalization, (...) including low access to health care, safe housing, and economic security" Boyer et al., (2022)

Racial and ethnic disparities of sudden unexpected infant death in large US cities: a descriptive epidemiological study | Injury Epidemiology | (biomedcentral.com)



SIDS in Indigenous populations

Higher rates in indigenous peoples around the world

Australia, New Zealand, North America

In Australia, factors were:

- LBW / preterm births,
- Maternal health behaviors (smoking, alcohol)
- Low socioeconomic status
- Reduced access to health services

Western initiatives preventing SIDS

- Conflict with cultural practices (co-sleeping)
- Too costly for families (buying "approved" cots



Figure 16.5: SUDI mortality rates in Indigenous populations 1998-2015. (Source: (44). Licensed from the Commonwealth of Australia under a Creative Commons Attribution 3.0 Australia Licence.)



2011-Report-Breastfeeding-among-Inuit-in-Canada.pdf (itk.ca) An Australian Perspective - SIDS Sudden Infant and Early Childhood Death - NCBI Bookshelf (nih.gov)

SIDS in Inuit populations



Figure 4: Bed-Sharing.

rigure 3: sleep position of inuit infants.

when Inuit infants do bed-share, they are less likely to be placed in the back position.

© Inuit Tapiriit Kanatami, 2018 (revised)

2011-Report-Breastfeeding-among-Inuit-in-Canada.pdf (itk.ca)

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Preventing SIDS Reinforcing protective factors

PROMOTING SAFE SLEEP

ABC (Alone on my Back in my Crib) Flat, firm surface, free of anything else Smoke free environment (tobacco, cannabis, vaping too!)

REDUCING VULNERABLITLY TO INFECTIONS Breast feeding Immunization

PROMOTING HEALTHY PREGNANCY

Avoid smoking, alcohol and drug use



joint-statement-on-safe-sleep-eng.pdf (canada.ca)

Impact of these recommendations on SIDS mortality rates in Canada



Sudden infant death syndrome in Canada: - Canada.ca

- 1993, publication of recommendations
- Decrease began years before
- Decline "steepened" after
 1993
- Similar trends in other countries
- Decline mostly due to decrease in infant sleeping position

What is SIDS? What are the stats telling us? How can SIDS be prevented?

What is done in Nunavik?

What else could be done to support families?

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What is being done?



Collective preventive services

Individual (Clinical) services

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Culturally safe counselling Motivational interviewing values & approach

Collaboration

- A partnership is established where it is recognized that the client is also an expert on themselves, their histories and their prior efforts at change.
- Evocation
 - The goal is to draw out from the clients their reasons and potential methods for change and to offer ideas, as appropriate, for clients' consideration.

Autonomy

• Never forget that the final decision making is left to the client. They must eventually argue for their own change.

Fostering trust is key & It goes both ways



Respect & empathy means having reasonable expectations

- If they have limited income, can they really afford a crib?
- If their house is overcrowded, is there room for a crib?
- If they live with many other people, can they really impose a « no smoking indoors » to everyone?
- Prioritizing with them
- Celebrating (even small) successes



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Inuit Traditional practices

"after the baby was born, the child assumed its place on the family sleeping platform next to the mother. We were told to put the baby on top of us.

You never breastfed the baby while the baby was lying on the bed. This was the advice of the grandmothers and mothers"

Safe bed-sharing guidelines

- Place Baby on their back on Firm, flat surface
- No loose bedding / toys
- Do not overdress / overheat
- Do not use alcohol or drugs



SIDS and grief

- SIDS is not the parent's or family's fault. Parents should not blame themselves
- The cause of SIDS is unknown. SIDS risk factors 'associated" with, but are NOT the actual cause of SIDS.
- It is normal for parents to feel sad, confused, or angry. They must be reassured that they are not alone.

Baby's Breath Canada (babysbreathcanada.ca)

Important points to remember :

- SIDS is not caused by suffocation, • vomiting or choking, bottle-feeding, immunizations, nor child abuse or neglect
- SIDS is not contagious
- SIDS does not cause pain or suffering to the infant

Some (of many) available resources

Is Your

Child Safe? Sleep Time

- Atii! Reduce Second-Hand Smoke Pauktuutit
 - Poster, Brochure, Facilitator's Guide, Client's Handbook

- Safe sleep tips pdf (canada.ca)
- <u>Reducing risk in the circle of life (First Nation) video</u>



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Reduce Second-Hand Smok





Thank you!

