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| **ISA ISPID  Abstract Submission  Nº: 239**   |  | | --- | | Topics: **Implementing best practices** | | Type: **Oral** | | **Keeping Baby Safe- a culturally appropriate safe sleeping train the trainer program for health professionals working with Indigenous families.** | | **Volpi-Wise, M. A**1 *1 - Manager Prevention Services SIDS and Kids.* | | **Introduction** **Introduction** Sudden Unexpected Death in Infancy (SUDI) remains the main cause of infant mortality in the post neonatal period for the West Australian (WA) Indigenous population. Whilst SUDI rates have declined amongst non-Indigenous infants, the rates remain disproportionately high for Indigenous infants. In 2012, the WA *Ombudsman Own Motion Investigation* reported that 59% of infant deaths, between 2009 and 2011, had occurred during sleep with contributing factors found to be well known independent risks factors for SUDI. Of these deaths 35% involved Indigenous infants. The report highlighted that the safe sleeping messages were not reaching vulnerable families and strategies for health professionals delivering safe sleeping advice to Indigenous families needed to be addressed. **Objectives** To develop, pilot and evaluate an up to date evidenced based training program for health professionals to increase health provider and community awareness of safe sleeping practices for Indigenous infants.  **Methods** A literature review was conducted to ensure the program contained most recent evidenced based information. A needs assessment of knowledge and awareness of SUDI and SUDI prevention was distributed to target population to identify knowledge gaps and inform content. The program drew on existing strengths from the WA 'Reducing the Risk of SIDS in Aboriginal Communities' (RROSIAC) program which uses a social determinants of health approach. A questionnaire was designed to test pre and post knowledge of the subject. Training was offered to Indigenous and non-Indigenous health professionals working with Indigenous families via the Aboriginal Maternity Services Support Unit networks. The pilot study used qualitative methodology for collecting data and embedded a systematic evaluation mechanism in the process and implementation.  **Results** 30 health professionals participated in the training and 23 answered the pre and post training knowledge test equalling 76%. Ability to accurately conceptualise SUDI pre test was 42% and post test 71% while ability to articulate SUDI was 71% pre test and 96% post test. Testing age risk specificity for SIDS was poor at 33% pre-test while post test showed a significant percentage point improvement of 42%. Ability to recognise the six safe sleeping recommendations pre test was 50% and post test 100%.There was a 21% improvement in excluding extraneous information in known SUDI risk factors. Ability to recognise a safe sleeping environment was 62.5% pre test and training made it perfect at 87.5%. Pre test knowledge on tummy time and wrapping were both strong with training improving tummy time knowledge from 96% to 100% and wrapping from 83% to 92%. Co-sleeping knowledge was poor at pre test (33%) and improved somewhat post (37.5%). Knowledge on key modifiable factors was not strong with 71% pre test however significantly improved post test to 87.5%.  **Conclusion** The Keeping Baby Safe training program met the aims and objectives of the trial and identified co-sleeping as an area that still requires improvement. Overall the program enhanced health professional’s knowledge and confidence in ability to educate Indigenous families on how to reduce the risk of SUDI in Indigenous communities. | |  |  |  |  | | --- | --- | | **CONTACT** | | | Name: | **M. A** | | Lastname: | **Volpi-Wise** | | E-mail: | **monniavolpiwise@sidsandkids.org** | | Country: | **Australia** | | Institution | **Manager Prevention Services SIDS and Kids** | | Cellphone: | **61 0458 888 021** | | City: | **Perth** | |