



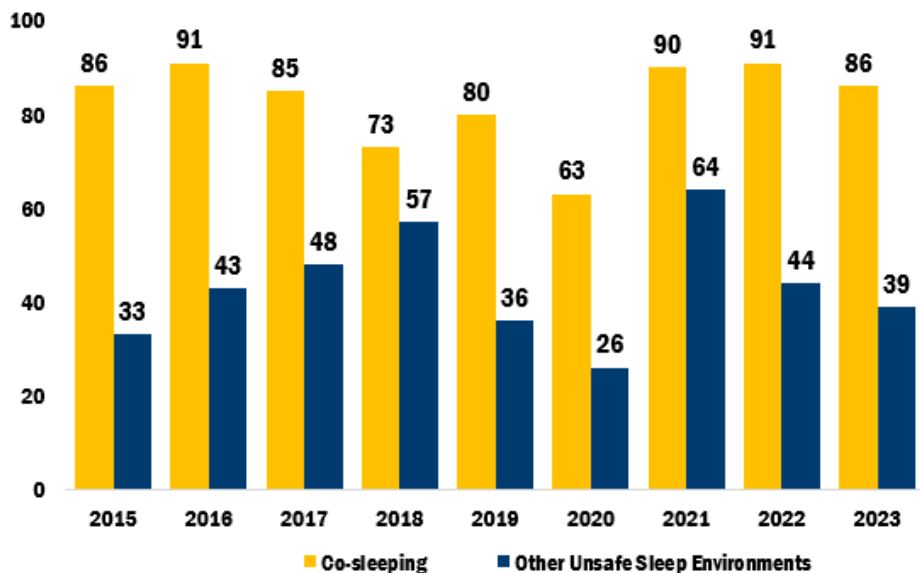
Child Fatality Task Force Recommendation

Support recurring funding of \$250K for the infant safe sleep program to prevent sleep-related infant deaths.

Unsafe sleep is a leading cause of infant death in North Carolina and these deaths are largely preventable.

In North Carolina, an infant dies every three days in an unsafe sleep environment, and Black infants are twice as likely as white infants to die in unsafe sleep environments. More than 120,000 babies are born each year in North Carolina and sustained, adequate funding is essential for an effective statewide initiative to ensure that these babies are not lost to unsafe sleep.

**In nine years between 2015 and 2023:
1,135 North Carolina infants died in unsafe sleep environments¹**

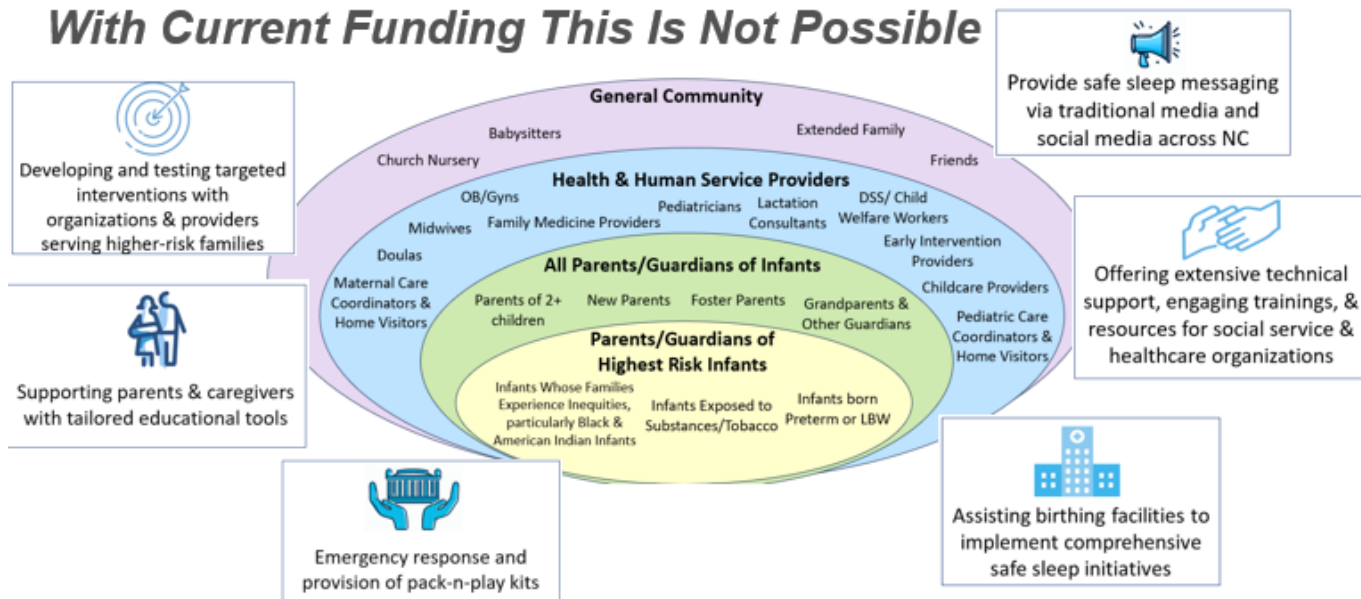


[Guidelines from the American Academy of Pediatrics to create a safe sleep environment](#) and reduce risk of infant death have evolved during the past decade, with the most recent updates made in 2022. Studies show that unsafe sleep practices are common and that parents and caregivers are not always receiving correct advice or education, even from health and childcare providers. In fact, **one study found that nearly half of caregivers did not receive correct advice from healthcare providers.²**

Examples of an unsafe sleep environment include sleeping on a soft surface (e.g., couch, adult mattress); sleeping with toys, blankets, pillows or crib bumpers; sleeping on the stomach or on an inclined surface; or sharing a sleep space with another individual, sometimes called “bed sharing” or “co-sleeping.” Co-sleeping is unsafe, and the risks significantly increase for some infants such as those born too soon, too small, or who are in households where tobacco or other substances are used.³

Prevention requires a multifaceted approach with a broad reach to connect not only with parents and caregivers, but with healthcare providers and others who educate them and reinforce consistent, accurate messaging about safe sleep repeatedly, not just once at hospital discharge after birth.

Safe Sleep Requires a Multifaceted, Evidence-Based Approach With Current Funding This Is Not Possible



Evidence shows that this type of multi-level approach to prevention is essential and effective. For example, Sacramento County California’s Safe Babies Initiative reduced their sleep-related infant death rate by 54% and their Black/white disparities rate by 66% over 5 years.⁴

Teams that review child deaths in North Carolina continually identify the need to expand statewide efforts with safe sleep education to prevent these deaths. State funding to prevent these deaths has never been more important because the federal office dedicated to this work was shut down on April 1, 2025.⁵ Current funding for statewide prevention efforts of only \$97,000 is via the MCH Block Grant, and this funding is insufficient for an effective initiative in a state with 120,000 babies born each year.

The Child Fatality Task Force is a legislative study commission that recommends policy solutions to prevent child death, prevent abuse and neglect, and support the health and safety of children.

Website: <https://sites.ncleg.gov/nccftf/> **Executive Director:** Kella Hatcher, kella.hatcher@dhhs.nc.gov

Co-Chairs: Karen McLeod, kmcleod@benchmarksnc.org & Jill Cox, JCox@cisnc.org

¹ Death Data Source: Medical Examiner Information System, 2015-2023. The data presented reflect finalized infant fatality cases within the Medical Examiner (ME) system’s jurisdiction in which the certifying pathologist identified the infant’s sleep environment, sleep position, or both as contributing risk factors to the death.

² Colson ER, Geller NL, Heeren T, et al. Factors Associated With Choice of Infant Sleep Position. *Pediatrics*. 2017;140(3):e20170596.

³ See: Rachel Y. Moon, Rebecca F. Carlin, Ivan Hand, THE TASK FORCE ON SUDDEN INFANT DEATH SYNDROME AND THE COMMITTEE ON FETUS AND NEWBORN; Sleep-Related Infant Deaths: Updated 2022 Recommendations for Reducing Infant Deaths in the Sleep Environment. *Pediatrics* July 2022; 150 (1): e2022057990. 10.1542/peds.2022-057990

⁴ First 5 Sacramento Reduction of African American Perinatal & Infant Deaths, Final Evaluation Report, July 1, 2015-June 30, 2018. [Microsoft Word - Final Evaluation Report_181128.docx](#)

⁵ See this May 6, 2025 [article from the American Academy of Pediatrics](#), and this [article from WFMY News2 in Greensboro](#) related to impacts in North Carolina.