

Speech

Elizabeth Fraser
Commissioner for Children and Young People and Child Guardian

SIDS Resource Launch

Date: 11 November 2008
Time: 11.30am
Location: Level 1 Atrium
RBWH Butterfield Street, Herston

Acknowledgements

Ladies and gentlemen, I would like to begin this morning by acknowledging the traditional owners of the land on which we stand.

To lose a child is undoubtedly the hardest thing a family will ever go through, but to not understand why the loss occurred is even harder.

That is why the work of Queensland Health and SIDS and Kids in this area is so important – both in providing education to reduce the risk factors for SIDS and in offering bereavement support.

Today is also an example of how different government and non-government agencies can work together successfully to ensure we do everything we can to prevent Queensland children dying.

The Queensland Government's commitment to resource a child death register in 2004 evolved from the recognition that there was no government agency with a dedicated focus on preventing child deaths.

What has occurred since the Government's commitment is that many agencies have provided information and data for the Commission's Child Death Register.

The collaboration between agencies has resulted in a world class evidence base that has allowed the Commission to produce four Annual Reports and make recommendations on how Queensland children can be safer – with the hope that lives may be saved.

One area of focus for the Commission's child death register has been Sudden Unexpected Deaths in Infancy.

The review of these types of deaths has gone some way to help provide an understanding of the reasons why infant deaths occur and the risk factors associated that may help reduce these unexplained deaths.

Our findings have shown that since 1 January 2004 there have been 182 Sudden Unexpected Deaths in Infancy in Queensland. Of these 47% have been certified

as SIDS, 15% due to undetermined causes and 8% due to fatal sleep accidents. These deaths are potentially preventable.

Through our analysis of Sudden Unexpected Deaths in Infancy we've found that in at least 65% of these cases, 1-2 known risk factors for SIDS were present and in more than 40% at least 3 risk factors for SIDS were present.

These most commonly include stomach down (prone) sleep position, parental smoking, unsafe forms of shared sleeping and sleeping on an unsafe sleep surface. With appropriate knowledge and education, all these risk factors are modifiable.

As a result of the information collected in the Child Death Register, the Commission's inaugural report released in November 2005 recommended that Queensland Health develop and implement a state-wide policy regarding the information provided to parents about safe sleeping practices as well as culturally appropriate materials that convey consistent and appropriate messages to all parents, particularly those at high risk.

Today not only are we seeing the implementation of that recommendation, we are also seeing the results of the investment made by the government and non-government sectors in the child death area. To have a suite of documents that has resulted from evidence collected from many agencies, (including the Queensland Police Service, the Office of the State Coroner and Queensland Health) – evidence that was captured, analysed and reported on by the Commission's child death review function is testament to a successful whole of government approach.

The resources launched today, included the detailed and very comprehensive *Safe Infant Care Policy and Guidelines* and the *Safe sleeping for baby, essential care checklist* for nurses, have been developed on the basis of strong evidence indicating the prevalence of risk factors and the need to ensure health professionals are well informed to reduce the risks of infant death. Knowledge of risk factors can help health professionals target infants and families most at risk of SUDI with support, services and education.

The resource for parents, *Safe Sleeping for Babies* should be commended for responding to the reality that many infants do not only sleep in a cot, but sleep in a variety of arrangements and locations and for informing parents about the particular precautions that each sleep setting requires.

The *Baby Help* resource expressly targeting Aboriginal and Torres Strait Islander families also deserves special mention.

Finally, I would like to acknowledge the significant resource commitment of both SIDS and Kids and Queensland Health in developing these resources, and in particular the work of Dr Jeanine Young in researching and developing these important tools and I look forward to continue working with agencies to find ways we can keep Queensland's children safe.

I commend the resources to the relevant client groups and encourage you all to use them in promoting safeguards for children.