

ACCC consultation – Infant Inclined Products Issues Paper Submission

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Queensland Family and Child Commission

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Submission summary

The Queensland Family and Child Commission (QFCC) welcomes the opportunity to make a submission to the Australian Competition and Consumer Commission (ACCC) in relation to the market review into the safety of infant inclined products.

The QFCC seeks to give practical effect to the rights of children and young people in Queensland through advocacy, awareness and accountability. We advocate for systemic change where children and young people experience inequity, vulnerability and marginalisation in Queensland.

The QFCC has a statutory responsibility to maintain the Queensland Child Death Register (CDR), which contains information relating to the deaths of all children and young people in Queensland since 1 January 2004, and report annually on trends and risk factors. The QFCC also has functions to reduce the likelihood of child deaths including making recommendations, arising from keeping the CDR and conducting research about laws, policies, practices and services.

In response to the opportunities to improve the safety of infant products, the QFCC supports:

- A combination of the mandatory safety standard and mandatory information standard for Inclined Sleep Products and Inclined Non-Sleep Products. The QFCC considers that this approach would ensure infant products meet certain standards to reduce the risk of sudden unexpected deaths in infancy as much as possible.

Data for prevention activities

The QFCC collects, analyses and publishes information about child deaths to help prevent future deaths and serious injuries. We work with researchers and other agencies to raise community awareness and develop prevention programs and policies, by identifying risk factors, trends and emerging safety hazards. The QFCC can provide detailed child death data to researchers and organisations. Contact for enquiries child_death_prevention@qfcc.qld.gov.au.

Data from the Queensland Child Death Register

Sudden unexpected deaths in infancy

Sudden Unexpected Death in Infancy (SUDI) is a category of deaths where an infant dies suddenly, usually during sleep, and with no immediately obvious cause. Classifying deaths in this way assists in the identification of possible risk factors for, and associations with, sudden infant death and, most significantly, those factors which may be preventable or amenable to change.

A number of factors have been associated with an increased risk of SUDI deaths, including factors associated with the infant, the family and the sleep environment. Risk factors identified in Queensland SUDIs in the five years to 30 June 2020 include:¹

Infant and family factors

- 64% were aged under 4 months
- 31% were born with low birth weight or pre-term
- 60% resided in areas of low to very low socio-economic status

Sleep environment

- 61% non-infant sleep surface
- 48% on side or in prone position when found
- 28% pillows in the sleep environment.

In the period January 2004 to June 2021 (17.5 years) there were 707 SUDI deaths in Queensland.²

Of the 707 SUDI deaths, 82 were known to have occurred on an inclined surface. This includes where the surface was inclined, involved either a product designed with an inclined surface or use of items such as pillows to elevate the infant's head/shoulders.

- In 14 SUDIs, the infant was in/on an inclined non-sleep product.
- In 68 SUDIs the infant was placed on an inclined surface improvised with pillows or other items.

Table 1 provides cause of death data for SUDIs that occurred on an inclined surface. The relevance of an inclined sleep surface to the mechanism of death can range from a known risk factor to causative involvement. Placing an infant in a chin to chest position, particularly during sleep, increases the risk of airway compromise. This risk can be further increased if the infant is more vulnerable due to respiratory infection. Deaths attributed to SIDS and undetermined causes should not be discounted. Pathologists may be unable to differentiate between SIDS and asphyxial deaths due to the similarities in pathological findings at autopsy, relying on the circumstances of the death to make a finding of asphyxia. Where a cause cannot be determined and mechanical asphyxia or suffocation by overlaying cannot be excluded, deaths are often attributed to SIDS (Category II).

Where a death is identified as accidental asphyxia, the inclined sleep surface is believed to have been causatively linked to the death. In the remaining deaths (excluding some Other diseases and morbid conditions), an inclined sleep surface is recognised as a known risk factor for sudden unexpected death in infancy.

Ten SUDIs involved an anti-roll pillow or sleep positioner wedge. No causative links to the products were identified.

Where a causative link was suggested for infant non-sleep products, the issue was generally user error and not a fault in the design of the product itself.

¹ QFCC 2021, [Annual Report: Deaths of children and young people, Queensland, 2019–20](#).

² SUDI data in this submission excludes a small number of SUDI deaths from non-accidental injury (Fatal Assault and Neglect).

Table 1: SUDIs involving an inclined surface or relevant infant products by cause of death, Queensland, 2004 to June 2021

	Accidental asphyxia	Accidental aspiration	Respiratory infection	Unexplained (SIDS & Undetermined)	Other diseases & morbid conditions ^a	Cause of death pending	Total
Infant on inclined surface							
Infant product - inclined surface	3	1	1	6	2	1	14
<i>Baby capsule/car seat</i>		1		2	1	1	5
<i>Infant swing/rocker</i>			1	3			4
<i>Pram/stroller</i>	1			1			2
<i>Sling/baby carrier</i>	2						2
<i>Bouncer</i>					1		1
Propped on pillows	2		8	47	3	1	61
Propped on other items ^b				4	1		5
Cot elevated (tilted)					1		1
Beanbag				1			1
Total deaths on inclined surface	5	1	9	58	7	2	82
Other relevant infant product							
Anti-roll pillow or sleep positioner wedge			1	9			10

Source: Queensland Child Death Register (at August 2021)

^a Includes sepsis/septicaemia and other infections, congenital anomalies and gastro-oesophageal reflux.

^b Includes other linen/manchester items, furniture and caregiver arm.

Notes: Excludes SUDIs from non-accidental injury. Incidents involving propped or inclined position, other than an inclined product, were identified through a text search for relevant terms. As such, the numbers are likely to be under-estimates.

Response to consultation questions

Question 11

Do you consider that any of the following regulatory responses would prevent injuries or fatalities from Inclined Infant Products in Australia, either on their own or as part of a combined approach? Please provide the reasons for your response:

- a. a prohibition on the sale of Inclined Sleep Products (either temporary or permanent)
- b. a mandatory safety standard for Inclined Sleep Products and/or Inclined Non-Sleep Products
- c. a mandatory information standard for Inclined Sleep Products and/or Inclined Non-Sleep Products

In response to the question 11, the QFCC supports:

- A combination of the mandatory safety standard and mandatory information standard for Inclined Sleep Products and Inclined Non-Sleep Products.

Evidence from the Queensland Child Death Register clearly establishes that the risk of sudden unexpected death in infancy is ongoing, especially in unsafe sleep environments. Despite guidance on inclined products such as infant swings/rockers as not being suitable for infant sleep, these products are nonetheless often used for infant sleep. For families who are socially disadvantaged, such products may be used as the primary sleeping place for infants. It is therefore vital that infant products which could reasonably be expected to be used for infant sleep meet certain standards to reduce SUDI risk as much as possible.

Mandatory information standards should describe safe use and reinforce safe sleep messages. Close to two thirds of the SUDI incidents were in families from low-to-very-low socio-economic areas, so accessibility and ease of understanding needs to be considered to support prevention. Further, it's important to understand the reason why caregivers are using particular products and whether using an inclined surface to try to address those concerns increases the risk of SUDI. Prominent messages on safe use would also assist new or expecting parents unaware of safe sleep guidelines at the time of purchasing products for their infant.