

# Supporting safer sleep for babies in evacuation centres

**Babies need a safe space for every sleep.** When planning, establishing or operating an evacuation centre, special consideration must be given to facilitating the safest possible sleep space for babies 0 to 12 months old. The recommendations in this resource will assist in creating safer sleep spaces for young families seeking shelter with the limited resources available in evacuation conditions.

Sleep is safe for babies when their airway is open and they can easily get oxygen into their lungs. The key safety principle is **'Easy to breathe, safe to sleep'**\*

## How can an airway become blocked?

Airflow can be slowed or blocked if a baby's air tube is:

- **Covered** – Face covered, for example with objects or another person's body
- **Pinched** – Nose pinched or squished in a gap
- **Bent** – Head and neck in chin to chest position
- **Pressed** – Pressure against a small chest that makes it difficult for baby's lungs to expand.

### Covered



### Pinched



### Bent



### Pressed



\* The key safety principle 'Easy to breathe, safe to sleep' and the images above have been adapted from Through the Tubes and the Pēpi-Pod® Program by Change for our Children, New Zealand.

## What does safe sleep for babies look like?

1. Baby on their back
2. On a firm, flat, level surface
3. Head and face uncovered
4. Clear space that is free of objects



Photo by Vida Imges, provided with permission of Professor Jeanine Young.

### Babies can find it hard to breathe if they:

- are placed on their stomach to sleep
- are placed to sleep on their side and they roll onto their stomach
- are laid on a surface that is not flat
- are laid on a slope or curved surface, so their chin drops onto their chest
- have their face or nose covered (e.g. by pillows, loose covers, adult body)
- have objects or people placing pressure on their chest, tummy or neck
- become wedged against a wall, person or object
- become entangled in straps or cords
- become trapped when climbing out of a sleep space.

## Dangerous sleep situations in evacuation centres

Evacuated families with babies may find themselves sleeping in less-than-ideal circumstances, without appropriate baby equipment, and in crowded spaces.

### Look out for these unsafe sleep situations for babies:

- Sleeping in the arms of a carer who is falling asleep themselves
- Sleeping on a surface that is too soft or not flat:
  - a pillow, soft bedding, beanbag, or air mattress that has partly deflated
  - in a car restraint/capsule/hammock, or a pram not laid flat
- Sleeping in an unsafe position (e.g. on tummy or side, or on an incline)
- No clear space around baby on sleep surface (e.g. crowded surface)
- Babies at risk of:
  - being rolled on by others with reduced awareness (e.g. alcohol, medication or drug-affected adults, other children or pets)
  - suffocation (e.g. soft items or plastic bags in baby's sleep space)
  - falling (e.g. if they roll, bounce, or try to climb out)
  - toppling (e.g. portable sleep spaces placed on furniture)
  - strangulation (e.g. by blind cords, dangling straps, teething necklaces)
  - entrapment (e.g. could become wedged in a gap if rolling, tipping or climbing in a sleep space)
  - being stepped on.

## Creating safer sleep spaces for babies in evacuation centres

Evacuation centres are often busy, chaotic environments with limited sleeping options. The key principle to apply in creating the safest possible environment for a baby is:

**'Easy to breathe, safe to sleep'.**

A variety of options can be used in unusual circumstances if the principles of airway protection are considered.

Consider a baby's developmental stage and mobility when setting up a sleep space in an unfamiliar place to ensure the safest possible solution. For all sleep environments, infant teething necklaces, jewellery and strings used for dummies should be removed.

### Using a cot

A cot or portacot that meets Australian standards and is in good working condition can be used for a baby or toddler of any age.

- Set up on a flat, level floor.
- Use a firm, well fitted mattress: no more than a 2 cm gap around the edges and no mattress edges rising up the side.
- Use a well-fitted bottom sheet (fitted sheet or flat sheet tucked firmly).
- Place baby with feet at bottom of cot if using bedding.
- Ensure blankets tucked firmly below shoulders or lower; or use an infant sleep suit or infant sleeping bag with fitted neck and arm holes or sleeves instead of blankets.
- If baby can roll, ensure they are not wrapped or swaddled when placed to sleep.
- Do not place any pillows, toys, bumpers or heavy bedding in the cot.
- Position the cot away from any blind or curtain cords or high traffic areas. For infants old enough to climb, allow a gap of at least 30cm between the cot and walls or furniture to avoid entrapment.
- Remove any cot attachments such as change tables or mobiles.



### Using a bassinet

For infants not yet rolling (under 4 months), a bassinet or portable sleep space may be used.

- Follow the same requirements as for cots.
- Bassinets should not be placed on furniture because of the risk of falls.



## Using a Pēpi-Pod®

A Pēpi-Pod® is a portable sleep space designed for use in shared sleep environments for babies not yet able to roll (up to 4 to 6 months). It is provided as part of a program of education with a safety briefing embossed into the base of the device.

- Follow the safety briefing on the device and the requirements for bassinets and cots.
- Set up on a flat, level floor or on a firm, flat, level mattress (see: [Sharing a sleep surface with baby](#)).



## Using a drawer or box

A container (like a large drawer, or a cardboard or plastic box) can also be used to make a safe sleep space.

- A towel folded to exactly fit the base of the container can be used as a mattress. Do not use a pillow or cushion.
- The container can be placed on the floor away from traffic, or used on a shared sleep surface (see: [Sharing a sleep surface with baby](#))



## Using a pram

Prams are not recommended as a routine sleep space for babies, but may be the safest option available in emergency conditions.

- A pram should only be used for babies who are not yet rolling.
- The base needs to be firm and able to be laid completely flat (not sloping or tilted).
- Ensure the harness is used and firmly secured. Check that baby cannot become entangled.
- Keep the pram brakes on.
- Do not cover the pram with a blanket, sheet or muslin that could become a suffocation or overheating hazard.
- Check baby's temperature often, as padded environments trap heat. Feel the back of baby's neck or chest and remove a layer of bedding or clothing if they feel too warm.
- Older, more mobile babies need to be supervised if sleeping in a pram because of the risks of tilting, tipping and falling, or entrapment when trying to climb out.

Car seats and baby capsules place infants on a slope which may cause a chin-to-chest position. **Infants should never be left to sleep in car seats.**

### Sharing a sleep surface with baby

Parents who usually bed-share with their baby may still appreciate the option of a cot or portacot in an evacuation centre. These devices have been designed with infant safety in mind and provide an easily identifiable infant sleep environment for others, particularly in busy, chaotic environments.

If portable sleep spaces are not available or this won't work for the family, these tips for sharing a sleep surface with a baby will assist families in creating a safer shared sleep environment:

- Mattress must be firm, flat, and level (air mattresses should be avoided if possible)
- Mattress should be placed in a low traffic area where people don't have to step over it
- Gap of 30 cm or more between mattress and furniture or wall
- Baby placed:
  - on their back to sleep
  - with a clear space around them (about 30 cm)
  - next to one adult (not between two adults or next to a child or an animal)
- Adult pillows positioned away from baby
- Adult blanket tucked under parent (if using) and away from baby
- Baby dressed in a sleep suit where possible (or has separate bedding to adult)
- Baby is not wrapped when sharing a sleep surface; they need to be able to freely move their arms and legs
- Adults should tie up long hair
- Single stretchers are not advisable as a shared sleep space for a young baby.



## Supervision

Babies should always be supervised in an evacuation centre. Help with supervising a baby may be required when a sole parent or carer needs to use the bathroom or shower facilities.

**A baby should never be left unattended in an evacuation centre, whether sleeping or awake.**

## Smoke exposure

Babies have an arousal reflex that protects their airway and keeps it open. Arousal includes stirring and shifting position, or waking up. Exposure to cigarette or marijuana smoke and vapes has been shown to reduce a baby's arousal response and can increase risk of infant death. Bushfire smoke may do similar.

Ensure that smoking is not permitted in evacuation centres and during bushfires. Prioritise infants for rooms with reduced or no smoke.

## Temporary housing requirements

Where families with a child under 18 months are directed to temporary housing, it must be ensured that a safe cot, portacot or other portable sleep space that meets their needs is available, and that the housing has sufficient space for safe use.

Ensure information on how to share sleep more safely is provided to all families with young babies, as many share sleep whether they intend to or not. You may want to consider referring the family to the Pēpi-Pod® Program if available in your state or territory.

Providing safe sleep information to address a wide range of circumstances provides parents with practical strategies to make all sleep environments safer for their baby.



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