

Abstract Structure

Type of presentation: Indicate if: Oral, poster, or both

Title:

Authors: Names and degrees. Followed by affiliation of first author only.

Background:

Objectives:

Methods:

Results:

Conclusions:

Funding source:

Author's affiliations:

Author name(s) (Initials and surname) and preferred degree (one only). Affiliation of first author only. The presenting author should be the 1st author, followed by the co-authors.

Formatting the abstract

- Manuscripts should be submitted in English.
- Font should be Arial 12
- All abstracts except Workshop proposals should be less than or equal to 500 words (not counting title and authors).
- Type a single space at the end of each sentence
- Do not use bold face for emphasis within text
- We use a comma before the final "and" or "or" in a list of items
- Numbers one to ten are written out in words unless they are used as a unit of measurement, except in figures and tables
- Use single hard-returns to separate paragraphs. Do not use tabs or indents to start a paragraph.
- Do not use the automated features of your software, such as hyphenation, endnotes, headers, or footers (especially for references). You can use page numbering

EXAMPLE

Type of Presentation: Oral, poster or both

Title: Evaluation of Bedtime Basics for Babies: A U.S. Crib Distribution Program to Reduce the Risk of Sleep-related Sudden Infant Deaths

Authors: FR Hauck, MD, KO Tanabe, MPH, TL McMurry, PhD, RY Moon, MD, University of Virginia, USA

Background: There is growing evidence that roomsharing without bedsharing is associated with a reduced risk of SIDS. Several countries, including the US, recommend that infants sleep in a crib or bassinet next to the parents' bed. However, many parents continue to bedshare for a number of reasons, including lack of access to a safe crib. , A number of free crib distribution programs have been implemented throughout the U.S. However, no large-scale evaluation of the impact of crib distribution programs has been conducted. **Objectives:** To evaluate the effectiveness of Bedtime Basics for Babies (BBB), a national crib donation program, that included distribution of a crib, pacifier, wearable blanket and safe sleep/SIDS and SUID risk reduction education to high-risk families. The specific objectives were to: 1) Compare parental knowledge and practice regarding infant sleep position and location before and after receipt of the BBB materials. 2) Compare bedsharing rates before and after receipt of the crib. 3) Compare use of pacifiers before and after receipt of the BBB materials. **Methods:** A total of 17,243 cribs, pacifiers and wearable blankets were distributed in Washington State, Indiana, and Washington, DC. During the first 2 years of the project, data were collected using a standardized survey before and 1-3 months after crib distribution. Surveys asked about parental beliefs, attitudes and practices with regard to infant sleep and about the impact of receiving a free crib. Bivariate analyses were conducted. **Results:** 3,303 mothers responded to the prenatal survey (conducted prenatally, before distribution of materials); 1,483 responded to the postnatal survey (conducted before distribution of materials in the early postnatal period); and 1,729 responded to the follow-up survey. Knowledge of the recommended sleep position was 76% in the prenatal survey, 77% in the postnatal survey, and 94% in the follow-up survey. The proportion of infants placed supine for sleep "last night" was 80% and 87% in the postnatal and follow-up surveys, respectively ($P < 0.001$). In the prenatal survey, 8% of mothers responded that they would sleep with their baby, compared with 38% in the postnatal survey who reported that they were bedsharing (pre-intervention). However, post-intervention, 16% reported bedsharing compared with 38% in the postnatal survey ($P < 0.001$). Among mothers who reported smoking postnatally, 33% were bedsharing before the intervention and 22% after the intervention ($P < 0.01$). Sleep location in crib/bassinet increased from 51% in the postnatal survey to 90% in the follow-up survey ($P < 0.001$). Pacifier usage was not affected by the intervention, with 71% and 74% of infants reported as using a pacifier in the postnatal survey and the follow-up survey, respectively ($P = 0.17$, NS). **Conclusions:** Receiving free cribs and education about safe sleep recommendations influenced mothers' behavior and thus has the potential to reduce the incidence of sudden sleep related infant deaths in high-risk families. We recommend that all families who would otherwise not be able to afford a crib be provided one and be given consistent safe sleep advice. **Funding:** The Bill and Melinda Gates Foundation and First Candle.