

## 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:**

### 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’ behaviour 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.

**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.