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| **Context of Infant Sleep and Physical Sleep Environments of Infants in Georgia, USA** |
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| **Introduction:** The leading causes of post-neonatal infant death in the USA are sleep-related, including SIDS, accidental suffocation and strangulation in bed, and ill-defined deaths. Infant sleep practices (i.e., placing infant back to sleep, on a separate, firm surface, with no additional items/bedding) can reduce the risk of sleep-related infant deaths. Adherence to these recommendations remains low, however. We applied a socio-ecological framework to understanding infant sleep practices, which posits that individuals interact with, and are influenced by, their environment at multiple levels, including the infant, maternal, family, household, societal, and cultural levels.  **Objectives:** To investigate the socio-ecological context of infant sleep among infants in Georgia, USA; specifically, how this context affects parental decision-making around infant sleep practices.  **Materials and Methods:**We are conducting a descriptive qualitative study consisting of in-home interviews. Participants are primary infant caregivers of infants younger than 6 months of age. Interviews include questions about knowledge of safe sleep recommendations; infant temperament and sleep practices; maternal, paternal, and family environment; and perceptions of home and neighborhood environment. Observations of the infant sleep environment are made via photographs and/or sketches. Data collection is slated to end July 2016.  **Results:**Preliminary results are described below; full results will be presented at the time of the conference. The majority of participants have identified as non-Hispanic African American women, and receive services for low-income families, such as the Women, Infant, and Children’s (WIC) nutritional program. Most families have access to a safe infant sleep environment (e.g., crib, portable crib, bassinet, etc.). Common sources of infant sleep information include health care professionals, infant’s grandmother, and the internet. Almost every caregiver accurately defined Sudden Infant Death Syndrome and reported awareness of safe sleep recommendations; however, the majority of observed infant sleep environments included at least one risk factor, such as additional items in the sleep environment like towels, blankets, comforters, or pillows. Most mothers reported placing infants supine, but some also reported propping the infant due to concerns regarding digestive issues and choking. About half of caregivers reported sharing an adult bed with their infants. Reasons for these arrangements included the ability to respond quickly to infant needs or to comfort a crying infant, and breastfeeding convenience. Some caregivers noted that safe sleep recommendations didn’t pertain to their unique situation, or that the recommendations were “impractical.” There did not appear to be a link between concerns with housing or neighborhood safety and sleep arrangements.  **Conclusions:**Despite maternal knowledge of safe sleep recommendations, infants still experienced risk factors in their sleep environment. While caregivers intentionally engaged in some risky practices (such as bed-sharing), others appeared unintentional, despite accurate descriptions of safe sleep recommendations. These findings suggest the need for tailoring educational interventions to increase caregivers’ compliance with them.  **Funding Source:** University of Georgia Office of the Vice President for Research |
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