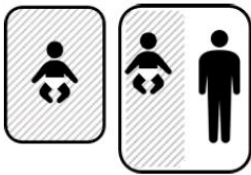


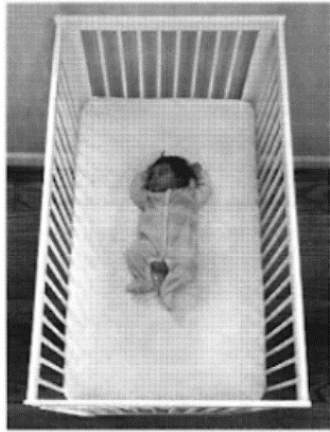
Supplementary Table S1 Survey Form. Questionnaire about Sleep Environment for Infants

The basic characteristics of the participant and their infant	1. How old are you (years)?	<input type="radio"/> 10–19 <input type="radio"/> 20–29 <input type="radio"/> 30–39 <input type="radio"/> 40–49 <input type="radio"/> 50–59 <input type="radio"/> 60–69 <input type="radio"/> 70 or older
	2. What relationship do you have with the infant?	<input type="radio"/> Mother <input type="radio"/> Father <input type="radio"/> Grandmother <input type="radio"/> Grandfather <input type="radio"/> Other: (                                  )
	3. How old is the infant (months)?	<input type="radio"/> 0 <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> 7 <input type="radio"/> 8 <input type="radio"/> 9 <input type="radio"/> 10 <input type="radio"/> 11
The current status of environment	4. Do you and the infant sleep in the same room?	<input type="radio"/> 1. We always sleep in the same room. <input type="radio"/> 2. We usually sleep in the same room. <input type="radio"/> 3. We occasionally sleep in the same room. <input type="radio"/> 4. We sleep separately.
	5. If you selected 1, 2 or 3 in Question 4, why do you sleep with the infant? (Please select all applicable answers or describe your reasons freely.)	<input type="checkbox"/> I can become aware of the condition of the infant. <input type="checkbox"/> It is easy to take care of the infant. <input type="checkbox"/> I want to be close to the infant. <input type="checkbox"/> I do not have enough room to sleep separately. <input type="checkbox"/> Other: (                                  )
	6. If you selected 4 in Question 4, why do you sleep separately? (Please select all	<input type="checkbox"/> Other family member sleeps with the infant in the same room. <input type="checkbox"/> I want to encourage the infant's independence.

	applicable answers or describe your reasons freely.)	<input type="checkbox"/> I have no special reason. <input type="checkbox"/> Other: ( )
	7. What kind of bedding do you use for the infant?	<input type="radio"/> 1. Crib <input type="radio"/> 2. Futon for babies <input type="radio"/> 3. Bed for adults <input type="radio"/> 4. Futon for adults <input type="radio"/> 5. Other: ( )
	8. If you selected 3, 4 or 5 in Question 7, why did you select the answer? (Please select all applicable answers or describe your reasons freely.)	<input type="checkbox"/> I thought a bed for adults would be good. <input type="checkbox"/> Although I wanted to use a crib, we had no space for the crib. <input type="checkbox"/> Although I wanted to use a crib, a crib was expensive. <input type="checkbox"/> Although I initially used a crib, I stopped using the crib. <input type="checkbox"/> Other: ( )
	9. If you selected 3, 4 or 5 in Question 7, does the infant sleep with you or other family member?	<input type="radio"/> The infant always sleeps with me or other family member. <input type="radio"/> The infant usually sleeps with me or other family member. <input type="radio"/> The infant occasionally sleeps with me or other family member. <input type="radio"/> The infant sleeps alone. <input type="radio"/> I share a bed with the infant only when I put the infant to sleep.
	10. If you selected 3, 4 or 5 in Question 7, do you or other family member share (or plan to share) the same bedclothing to cover the infant?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Other: ( )
	11. If you selected 1 or 2 in Question 7, why did you select the answer? (Please select all applicable answers or describe your reasons freely.)	<input type="checkbox"/> For comfort. <input type="checkbox"/> For safety. <input type="checkbox"/> For protection from a pet. <input type="checkbox"/> For individual use among siblings of similar ages. <input type="checkbox"/> The bedding was free (secondhand, etc.). <input type="checkbox"/> Other: ( )
	12. What do you use (or plan to use) as bedclothing to cover the infant in the cold season?	<input type="checkbox"/> Heavy quilt that covers the infant. <input type="checkbox"/> Lightweight quilt that covers the infant. <input type="checkbox"/> Blanket.

	(Please select all applicable answers or describe your answer freely.)	<input type="checkbox"/> None. <input type="checkbox"/> Other: ( )
	13. What do you use (plan to use) as the bedding surface for the infant in the cold season? (Please select all applicable answers or describe your answer freely.)	<input type="checkbox"/> Firm futon/mattress. <input type="checkbox"/> Soft futon/mattress. <input type="checkbox"/> Blanket. <input type="checkbox"/> Other: ( )
	14. Is there something on the futon/bed on which the infant sleeps?	<input type="radio"/> Yes <input type="radio"/> No
	15. If you answered “Yes” in Question 14, what is close to the infant in the shaded area in the figure? (Please select all applicable answers or describe your answer freely.)  	<input type="checkbox"/> A pillow for the infant. <input type="checkbox"/> Items to take care of the infant (towels, cloths, diapers, etc.). <input type="checkbox"/> Stuffed toys/other toys. <input type="checkbox"/> Items for use by individuals other than the infant (cushions, smartphone, etc.). <input type="checkbox"/> Other: ( )
The participant's level of awareness	16. Did you seek sources of information to prepare the sleep environment for the infant before birth (i.e., during pregnancy)?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Did the same caregiving practices as for an older child
	17. If you answered “Yes” in Question 16, What sources of information did you seek to prepare the sleep environment for the infant before birth (i.e., during pregnancy)? (Please select all applicable answers or describe your answer freely.)	<input type="checkbox"/> 1. Advice and experience of familiar people. <input type="checkbox"/> 2. Information obtained from the obstetrics and gynecology hospital (physicians, obstetric nurses, prenatal classes, etc.). <input type="checkbox"/> 3. Information obtained from local or national governments (maternal handbook, leaflets, prenatal classes, etc.). <input type="checkbox"/> 4. Information obtained from sources other than 1–3 (media, SNS, book/magazine about child rearing, personal website, etc.). <input type="checkbox"/> Other: ( )

<p>18. Among your answers for Question 17, select one source to which you referred the most.</p>	<ul style="list-style-type: none"> <li>○ 1. Advice and experience of familiar people.</li> <li>○ 2. Information obtained from the obstetrics and gynecology hospital (physicians, obstetric nurses, prenatal classes, etc.).</li> <li>○ 3. Information obtained from local or national governments (maternal handbook, leaflets, prenatal classes, etc.).</li> <li>○ 4. Information obtained from sources other than 1–3 (media, SNS, book/magazine about child rearing, personal website, etc.).</li> <li>○ Other: ( )</li> </ul>
<p>19. Did you seek sources of information to prepare the sleep environment for the infant after birth?</p>	<ul style="list-style-type: none"> <li>○ Yes</li> <li>○ No</li> <li>○ Did the same caregiving practices as for an older child</li> </ul>
<p>20. If you answered “Yes” in Question 19, What sources of information did you seek to prepare the sleep environment for the infant after birth (i.e., during pregnancy)? (Please select all applicable answers or describe your answer freely.)</p>	<ul style="list-style-type: none"> <li>□ 1. Advice and experience of familiar people.</li> <li>□ 2. Information obtained from the obstetrics and gynecology/pediatrics hospital (physicians, obstetric nurses, prenatal classes, etc.).</li> <li>□ 3. Information obtained from child care facilities (nurses, prenatal classes, etc.).</li> <li>□ 4. Information obtained from local or national governments (maternal handbook, the program to visit all families with infants, prenatal classes, etc.).</li> <li>□ 5. Information obtained from sources other than 1–3 (media, SNS, book/magazine about child rearing, personal website, etc.).</li> <li>□ Other: ( )</li> </ul>
<p>21. Among your answers for Question 20, select one source to which you referred the most.</p>	<ul style="list-style-type: none"> <li>○ 1. Advice and experience of familiar people.</li> <li>○ 2. Information obtained from the obstetrics and gynecology/pediatrics hospital (physicians, obstetric nurses, prenatal classes, etc.).</li> <li>○ 3. Information obtained from child care facilities (nurses, prenatal classes, etc.).</li> <li>○ 4. Information obtained from local or national governments (maternal handbook, the program to visit all families with infants, prenatal classes, etc.).</li> <li>○ 5. Information obtained from sources other than</li> </ul>

		1–3 (media, SNS, book/magazine about child rearing, personal website, etc.). ○ Other: ( )
	22. How much do you care for the safety of the infant in sleep environment?	○ 5 (“Strongly aware”) ○ 4 (“Aware”) ○ 3 (“Neither aware nor unaware”) ○ 2 (“Less aware”) ○ 1 (“Completely unaware”)
	23. A study introduced the ideal sleep environment for babies, as shown in the photo below [27]. Have you seen and/or heard of similar information as this image?  	○ Yes ○ No
	24. Which organization do you think is the most reliable or should be reliable to learn about a safe sleep environment for infants?	○ Obstetrics and gynecology/pediatrics hospital. ○ Local or national governments. ○ Child care facility. ○ None. ○ Other: ( )
	25. Which measure do you think is most desirable to learn about a safe sleep environment for infants?	○ Distributing leaflets or flyers (Internet, books about child rearing, leaflets, etc.). ○ Watching instructional video (TV, YouTube, etc.). ○ Face-to-face verbal instruction (support facility for child rearing, gynecology/pediatrics hospital, etc.). ○ Joining hands-on workshops (prenatal classes, group activities for child rearing, etc.). ○ Other: ( )