Faculty are encouraged to submit an abstract for posters that have already been made.

Abstract Submission Instructions and Forms for Students:

General instructions: Complete a separate abstract submission for each proposed poster. Please save this file as “yourlastname_2013researchabstract.doc”. Instructions and support for poster production will be forthcoming upon acceptance.

Title and authorship: Please list the title, in italics, on one line. Beginning with the second line, list each individual author, with their affiliation (graduate, undergraduate, staff, etc.) and department or track in parentheses. Students should also list their faculty sponsor on a separate line, even if the sponsoring faculty member is already listed as an author. See examples below.

Abstract format: Use one of the following abstract formats (see formats below) for research, program/practice/policy or literature review. Your total abstract should be no more than 250 words.

Submitting your abstract: Send your completed abstract submission form to croye@hunter.cuny.edu no later than April 9, 2013. Abstracts received after this date will only be admitted if space permits.
FORMAT A–Research

**Background:** The study objectives, the hypothesis to be tested, or a description of the problem;
**Methods:** Methods used or approach taken (e.g., research design, sampling, procedures);
**Results:** Specific results in summarized form (with statistical analysis when appropriate, promises such as "to be completed" are not acceptable);
**Conclusions:** Description of the main outcomes of the study and their implications, including suggestions for future research. Concluding statements such as "the results will be discussed" are not acceptable. (Grant acknowledgments should appear, but literature references should not appear in abstracts.)

FORMAT B–Clinical, programmatic, or policy intervention

**Issue:** A concise statement of the issue(s) addressed;
**Description:** A description of the project, experience, service and/or advocacy;
**Lessons learned:** A summary of findings which are supported by your observations or results (statistical analysis used to support the conclusions, where appropriate, should be included). Concluding statements such as "the results will be discussed" are not acceptable.
**Next steps:** Recommendations for future research, clinical or programmatic intervention, or policy change and assessment. (Grant acknowledgments should appear, but literature references should not appear in abstracts.)

FORMAT C–Literature review

**Issue:** A concise statement of the issue under investigation;
**Description:** Specify the rationale for the literature review, type of analysis of studies, what aspects of the topic were investigated, the types of studies reviewed (with search engine queries and inclusion/exclusion criteria, where appropriate);
**Results:** Specific findings;
**Conclusions and recommendations:** A summary of findings and lessons learned, suggestions for future research, assessment/management/clinical practice protocols, or policy. (Grant acknowledgments should appear, but literature references should not appear in abstracts.)
Primary Presenter Contact Information

Name (Primary presenter):

Name (Other presenters)

Address:

Telephone:

E-mail:

Sponsoring faculty member (N/A if faculty only):

Sponsoring faculty member’s e-mail:
Abstract Format Examples

Example One (Format A):

The Influence of Phonotactic Probability on Late Talkers’ Ability to Produce New Words

Background: The purpose was to examine the influence of phonotactic probability on late-talkers’ (LT) and typically developing (TD) toddlers’ speech production skills. Phonotactic probability influences children’s accuracy in word production. Less is known about the influence of phonotactic probability on word production in TD and LT toddlers.

Methods: TD and LT toddlers (24 months) were taught novel words, consisting of high or low phonotactic probability sequences. Toddlers were exposed to the novel words over ten trainings sessions. After the final session, the toddlers were asked to name the novel items. The speech sound accuracies of the toddlers’ productions were calculated.

Results: TD toddlers demonstrated sensitivity to the phonotactic composition of the novel words. They produced high probability forms with greater frequency and accuracy than low probability forms. LT did not show this preference. They produced both high and low probability forms with equal frequency and accuracy.

Conclusions: TD toddlers are sensitive to the phonological regularities in English and use these regularities to produce new words. LT did not take advantage of phonological regularities when learning new words. This may contribute to their difficulty producing new words.

Acknowledgements: This research was supported by the Doctoral Student’s Research Grant, CUNY Graduate Center.

Contact: (email address)

Example Two (Format B):

Corporations and Health Watch: A Resource for Changing Health Harming Corporate Practices

Issue: Corporate practices that harm health are increasingly leading to negative health outcomes and widening health disparities. While advocacy groups have endeavored to expose these corporate practices and reduce the public health impact of the promotion, retailing, design and pricing of products contributing to negative health outcomes, little has been done to document and analyze this work.

Description: Tracking corporate practices that influence health in six major industries—alcohol, automobile, firearm, food and beverage, pharmaceutical, and tobacco—the Corporations and Health Watch (CHW) project documents and analyzes advocacy campaigns that have successfully changed corporate practices and health policies. The CHW website serves as a forum for public health researchers, advocates, students and others to exchange information, identify resources, and establish partnerships. Our poster will summarize our activities and lessons over the last two years.
Lessons Learned: The CWH website provides a simple and effective vehicle for individuals across disciplines to communicate and collaborate in order to advance research and practice in this emerging field.

Next Steps: The CHW project prepares case studies, campaign profiles, industry reviews, and campaign building resources as a tool to improve health outcomes. Future plans for research studies, scientific meetings and courses are described.

Contact: (email address)

Example Three (Format C)

A Literature Review of the Effects of Magnet Designation on Reported Nursing Burnout, Job Satisfaction and Perception of the Work Environment

Student Name (Graduate/Undergraduate, Program)

Name (Faculty Sponsor)

Issue: Although Magnet designation of facilities is considered a gold standard in quality of care, many debates whether achieving Magnet status provides healthier working environments and decreases occupational burnout in nurses. This literature review addressed the following question: Among registered nurses, does working in a Magnet hospital compared to a non-Magnet or Aspiring-Magnet hospital make a difference in the rate of reported nurse burnout, job satisfaction and views of work environment?

Description: This systematic search and limited review of the research literature was conducted using CINAHL, Medline and the Cochrane Database. Keywords used included burnout, magnet hospitals and job satisfaction. Studies found comprised of a systematic review, five cross-sectional secondary data analyses, three descriptive studies, and one qualitative study.

Results: Key findings indicate that nurses in Magnet facilities compared to Non-Magnet and Aspiring-Magnet facilities reported lower rates of nurse burnout, increased job satisfaction and perception of better support from peer nurses, administration and physicians.

Conclusions and recommendations: Nurses who work in Magnet hospitals experience greater job satisfaction and less burnout than nurses who do not. There are advantages for hospitals that make an effort to achieve Magnet status even if Magnet status is not earned immediately. Future research can include longitudinal studies on whether perceptions of nurses from Magnet facilities change over time, as well as whether higher job satisfaction among nurses improves patient outcomes and patient satisfaction. Quality improvement measures such as a structured equation model can be incorporated in the Magnet design that could reflect a standard measure for
improving health care environments, promoting optimal staff satisfaction and quality patient outcomes.

Submit your abstract below. Include title, authors, and affiliations. Limit 200 words, excluding the title/author section.