



Behavioural intervention: infant sleep problems and maternal mood

Intervention

A brief sleep intervention based on teaching parents techniques of 'controlled crying' or 'camping out'.

Controlled crying

With controlled crying, parents respond to infant's cry at increasing time intervals, allowing the infant to fall asleep alone.

Camping out

Parents sit with infant until infant falls asleep and gradually reduce their presence over a period of 1–3 weeks.

Indication

One-third to one-half of Australian parents report a problem with their infant's sleep in the second 6 months of life.

Infants aged 6–12 months with severe sleep problems according to parents. Problems include waking more than 5 nights a week, waking more than 3 times a night, taking more than 30 minutes to fall asleep or requiring parental presence to fall asleep.

Infants with sleep problems are more likely to sleep in the parental bed, be nursed to sleep, take longer to fall asleep, and wake for often and for longer periods.

The presence of an infant sleep problem is a strong predictor of maternal depression.

Infant sleep problems and postnatal depression are both associated with increased marital stress, family breakdown, child abuse, child behaviour problems and maternal anxiety. Postnatal depression can adversely affect a child's cognitive development.

Adverse effects

Behavioural sleep techniques have no marked long-lasting effects (positive or negative) on children.

Availability

Behavioural sleep interventions can be delivered in a primary care setting by GPs or practice nurses. Training is required (refer to [Training](#)).



Description

Parents attend two or three private sessions with a healthcare professional trained in infant sleep intervention.

Session 1. Education and choice of intervention

Discuss normal sleep cycles, the learned behaviours of sleep (eg falling asleep independently, settling after night waking) and how factors that reinforce sleep problems can be eliminated with appropriate behavioural interventions.

Give parents a choice of intervention (controlled crying or camping out) and techniques to manage other factors that affect infant sleep such as bedtime routine, weaning off overnight feeding and dummy use during the night.

Provide the parents with a sleep management plan, information about the development and management of sleep problems and a sleep diary to monitor progress.

Session 2: Follow-up after 2 weeks

Warn parents about 'extinction bursts'. This is a burst of behaviour that happens 2–4 weeks after the behaviour was extinguished. This occurs in about 20% of infants and takes the form of infants waking again overnight in the absence of an explanation (eg febrile illness).

Advise parents to manage this by re-instating their chosen behavioural technique; infants typically settle back to their good sleep habits after a few nights.

If the sleep problem has not improved, consider possible reasons, such as:

- behavioural technique not being correctly implemented
- parent disagreement about how to manage sleep problem
- maternal or paternal depression.

Tips and challenges

The behavioural intervention is acceptable to parents and reduces the need for other professional sleep services.

Techniques are effective at reducing the short- to medium-term burden of infant sleep problems and maternal depression. While the intervention has shown no long-term (5-year) effect on children, there is a prolonged reduction in maternal depression (2 years).

In choosing between camping out and controlled crying, you should consider the impact of each on the parents.

This intervention is not recommended for use in infants under 6 months of age.

Training

Online training

Cost \$50.

This activity is RACGP approved for 2 Category 2 QI&CPD points.

Register at The Learning Hub. www.learninghub.org.au

Face-to-face training (Victoria only)

\$145 (incl. GST)

9.30 am–1.30 pm

Various dates are available. Register at The Learning Hub. www.learninghub.org.au



Grading

NHMRC Level 1 evidence

References

Hiscock H, Wake M. Randomised controlled trial of behavioural infant sleep intervention to improve infant sleep and maternal mood. *BMJ*, 2002;324(7345): 1062–5.

Hiscock H, Bayer J, Gold L, Hampton A, Ukoumunne O, Wake M. Improving infant sleep and maternal mental health: a cluster randomised trial. *Arch Dis Child*, 2007;92: 952–8.

Price A, Wake M, Ukoumunne O, Hiscock H. Five-year follow-up of harms and benefits of behavioral infant sleep intervention: randomized trial. *Pediatrics*, 2012;130: 643–51.

Consumer resources

Raising Children Network, Guide to solving sleep problems
http://raisingchildren.net.au/articles/about_this_guide.html/context/613

Baby Center, Your baby's sleep
www.babycenter.com.au/c4826/your-babys-sleep

Royal Children's Hospital Sleep for babies and young children
www.rch.org.au/uploadedFiles/Main/Content/ccch/CPR_Vol_19_No_2_Parent_Fact_Sheet_final_web.pdf

Avi Sadeh, a researcher and author on infant sleep, Sleeping Like a Baby
www.tau.ac.il/~sadeh/baby/about_sleep.html

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