



FAQs – Brief sleep intervention: Controlled crying

Here are the most commonly asked questions about controlled crying

1. Why won't my baby sleep through the night?

Very young babies cannot sleep through the night. They wake up and need a feed before they can settle back to sleep. A New Zealand study found that the average age a baby 'slept through' the night (ie slept for eight hours without calling out or crying) was at three months of age.¹

It is generally accepted that most babies will wake and feed up to six months of age. After this, a healthy baby who is growing normally does not need to feed during the night.

2. What is controlled crying?

Controlled crying, also known as 'controlled comforting' or 'graduated extinction', is a technique to help young children six months and older learn how to settle themselves to sleep.

3. What am I supposed to expect with controlled crying?

Controlled crying does not suit every family, so each family needs to decide whether they want to do it or not. It's best to start when the family has a few clear nights with no major commitments. Babies must be well. It takes around five to seven nights to work. The first few nights are often the hardest as the baby may cry/protest for up to two hours before falling asleep. This may happen on the first night but after that, the time taken to fall asleep tends to reduce quite rapidly.

4. Does my baby really learn to sleep?

Yes. Babies are very capable learners and like to get into patterns and routines. You can see this when a baby sits in a high chair and gets excited because they know food is coming. In the same way, they can get used to a bedtime routine and know that, for example, a feed followed by reading time and a cuddle in the bedroom means sleep time.

5. How do I do controlled crying?

1. Once your baby is ready for bed, put them in the cot and either talk/pat them until they are quiet (or after one minute). Say goodnight and leave the bedroom.
2. Stay out of the bedroom and give your baby a chance to settle by themselves.
3. If your baby starts to cry, wait for the set amount of time before going back – for example, two minutes at first. Ignore any grizzling.



4. After the two minutes is up, go to your baby and reassure them by talking (good night, it's sleep time) or patting them for no more than one minute, or until they are quiet but not asleep, depending on your preference. Try to soothe them without picking them up if you can.
5. As soon as your baby is quiet, or after one minute but before they are asleep, leave the room again and wait for the next set time interval. Your baby is getting an opportunity to learn to go to sleep by themselves, knowing that you are not far away and that you will eventually come back.
6. You will continue to go in and out of the bedroom if the baby/child is crying, spending increasing time periods out of the room. Leave the baby/child for a sequence of set time intervals – for example, 2, 4, 6, 8 and 10 minutes, or 5, 10 and 15 minutes.
7. Continue until the baby falls asleep by themselves.
8. When the baby wakes up overnight, follow the same routine.

Controlled crying is different from the technique called 'extinction' or the 'cry it out method'. In this technique, the caregiver never goes back into the bedroom after first settling their baby. *The Infant Sleep eLearning program* – <https://mcri.learnupon.com/store/35721-infant-sleep-elearning-program> does not recommend the extinction technique.

6. Is controlled crying safe?

Yes, controlled crying is safe.

A number of rigorous Australian studies have looked at the safety of controlled crying.

What the research says about controlled crying

Babies with sleep problems who receive settling techniques sleep better

An Australian study followed a group of 328 infants (aged around eight months old) who had sleep problems.² Half of them were managed by techniques which included controlled comforting (some chose camping out) and the other half were not offered these techniques. The researchers followed these babies at age 10 and 12 months, and then again when they were two years old. At all-time points, babies who received the settling techniques slept better than babies who did not.

Mothers report fewer depression symptoms

According to this study, 85% of mothers who had carried out controlled crying or camping out reported that their relationship with their baby was better, while the remaining 15% said it made no difference. No mothers reported that carrying out these techniques made their relationship worse.³

No difference in child behaviour or stress levels

The researchers followed these children up to when they were six years old. By this time, there was no difference in sleep problems between the two groups (most children were sleeping better). There was no difference in the child's behaviour or saliva cortisol levels (a biological indicator of stress), or the parent-child relationship.⁴ In other words, using controlled crying had no effects on the child's later behaviour, cortisol levels, or the parent-child relationship.



Recent Australian studies also indicates controlled crying causes no short-term or long-term harms

A more recent Australian study has looked at the effects of controlled comforting on infant sleep, stress, later child emotional and behavioural problems, and parent stress.⁵ In a group of 43 infants and their parents, 14 received controlled comforting, 15 received a technique known as 'bedtime fading', and 14 received sleep education only. The researchers measured infant sleep and saliva cortisol as well as the mother's cortisol levels at the time of using the techniques and again three months later.

Controlled crying reduces stress levels in infants and their mothers

Compared with those infants whose mothers received sleep education only, those who received the controlled comforting or bedtime fading techniques slept better and cortisol levels of both the infants and their mothers declined, representing less stress.

Controlled crying does not impact on child-parent attachment

At follow-up 12 months later, there were no differences between the three groups in child emotional and behavioural problems or in secure/insecure parent-child attachment (measured by the gold standard 'Strange Situation' test).

This study provides the most robust evidence to date that techniques such as controlled comforting have no short-term or long-term harms as measured by infant cortisol and validated ratings of child emotional and behavioural symptoms and parent-child attachment.

7. Can I try controlled crying with my three-month-old baby? All the mothers in the mothers' group say their babies sleep through – why can't mine?

Babies learn to 'sleep through' at various ages. In fact, we all wake during the night; however, we as adults have (usually) learnt to put ourselves back to sleep. Babies who rely on being fed, or rocked, or bounced or driven to sleep, or need to use a dummy to fall asleep at the start of the night, will naturally call out over night when they wake from their light sleep. If they find they are not being fed, rocked or driven they will cry until you come and do this again. These babies have not learnt to settle themselves to sleep without an adult.

We do not expect babies under three months to settle themselves to sleep – you are lucky if they do! Between three and six months, you can encourage your baby to settle by themselves in the cot. However, we do not advise leaving them to cry for long periods (ie more than a couple of minutes). If you have a good bedtime routine (eg bath, then feed, then quiet play) and then put your baby into the cot drowsy but still awake, they can start to learn to fall asleep without your help. If they learn to do this, then when they wake naturally over night, they will again be able to self-settle without calling out and you will think that they have 'slept through'.

Sleep techniques such as controlled crying **are recommended for babies aged six months and over**. Babies learn best from this age and no longer need to wake up and feed at night, as they can get all their nutritional needs met during the day.



8. How long should I do controlled crying for?

If you are seeing **no improvement** in your baby's sleep **after five to seven nights, seek professional advice**. Controlled crying works in about 80% of babies and the remaining 20% may respond better to other techniques such as 'camping out'. This is especially so if your baby is a bit more anxious or if you feel you cannot manage your baby's crying.

9. Is it okay to stop if controlled crying proves too much for me? What are my alternatives?

Yes – you can stop at any time. It is okay to pick your baby up if they are crying, give them a brief feed or a cuddle and then put them down in the cot again to re-settle or even cuddle them to sleep and try again the next night. Alternatives to controlled crying include camping out (which is also covered in the Infant Sleep eLearning program) or 'adult presence' where you stay in your baby's room for seven consecutive nights until they fall asleep but you try not to touch them. This can work well for babies who are more anxious and want to see you as they fall asleep but works less well for babies who can see their parent but get angry that their parent is not picking them up.

10. Will controlled crying increase the level of cortisol ('stress hormone')?

No – see question 6 above.

11. I heard that controlled crying is unsafe. Is this true?

No – see question 6 above.

12. Will controlled crying affect my child's mental health and wellbeing in the long-term?

No – see question 6 above.

13. Is controlled crying better or more effective than attachment parenting (ie when I attend to my child every time they cry)?

There have been no head-to-head trials of controlled crying vs attachment parenting, so we cannot say. Furthermore, there have been no rigorous trials of attachment parenting techniques in infant sleep, so we cannot say if this approach is effective or not.



References

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