

Research Snapshot

Long-term effects of controlled comforting on children and families

August 2013

Overview

Many parents consider behavioural strategies like 'controlled comforting' and 'camping out' when managing their child's sleep. Almost 60 studies have shown that behavioural sleep strategies can help most families reduce their baby's sleep problems. Results from the largest of these studies – the *Infant Sleep Study* – conducted in Australia, found that parents who are offered information about these techniques (only suitable for babies older than six months), report improved sleep for their baby and themselves, and that their own wellbeing improved up to when children turned two years of age (Hiscock et al, 2007, 2008).

In 2009-10, Dr Anna Price led the first-ever long-term follow-up of a behavioural sleep program by assessing the *Infant Sleep Study* families when children turned 6 years old. The *Kids Sleep Study* was designed to measure all child and parent factors that are included in the arguments around potential long-lasting harms and benefits of the sleep strategies.

The *Kids Sleep Study* found that the infant sleep program had no lasting harmful or beneficial effects on any child or parent outcome. These findings demonstrate that, not only do behavioural strategies work in the short- to medium-term, they are safe to use in the long-term.

Background

Up to half of all Australian mothers will say their infant's sleep is a problem in the first year of life.

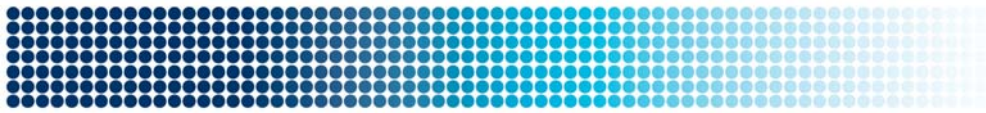
When extrapolated to the current Australian population, this equates to up to 135,000 women per year. Women who report infant sleep problems sleep poorly themselves and have double the standard levels of clinical depression symptoms (30% compared with 15%). Children with sleep problems as infants are more likely to have sleep problems by the time they start school, at which age they are associated with serious negative consequences including poorer emotional, behavioural and cognitive functioning, increased injury and obesity, and poorer parental mental and general health.

Infant sleep is one of the top reasons that parents seek professional medical help. Healthcare system cost data for infant sleep problems are scarce, but data from the *Longitudinal Study of Australian Children* indicate that the estimated additional annual cost to Medicare associated with sleep problems in children aged 0-7 years (estimated population 1.14 million) totals over AUS\$15 million (Quach et al, 2013).

Improving infant sleep is a simple way to improve mothers' own sleep and mental health. It is an important avenue for treating postnatal depression, because women are more likely to identify infant sleep as an issue when speaking with a health professional than their own mental wellbeing. Improving infant sleep in a cost-effective way is thus an important challenge for the Australian system.

What the study did

To help assess whether controlled comforting had any longer-term effects on children and families,



the Kids Sleep Study asked parents to complete established questionnaires to accurately measure children's mental and physical health, behaviour and quality of life; the child-parent relationship; and parents' own mental and general health.

The Kids Sleep Study also:

- visited families in their homes to ask children about their own wellbeing
- collected saliva and blood from children to objectively test whether the early sleep program had long-lasting effects on children's stress levels.

What the study found

The Kids Sleep Study showed that, at six years of age, there were no long-lasting harms or benefits to children or parents who had been offered controlled comforting when the child was a baby (Price et al, 2012).

Implications

For policy

The Kids Sleep Study has shown that much of the information available about the long-term effects of behavioural sleep strategies is inconsistent and out-of-date. This is reassuring for parents who may have been incorrectly told that controlled comforting can cause long-term harm. Parents can be reassured that using these techniques is safe.

For research

The Kids Sleep Study represents the largest number of children ever followed-up for a behavioural infant sleep study and the only one to be evaluated in the 'real world' setting. It may represent the only opportunity to provide objective evidence investigating any lasting harms or benefits of offering behavioural infant sleep interventions. This is because, with their known effectiveness, it would be unethical not to offer effective sleep strategies to parents seeking help in managing their baby's sleep problems. As such, it is unlikely that new trials

with true non-intervention controls and 5-year follow-up will be conducted in the future.

For practitioners

Health professionals can feel confident offering, and parents can feel confident using, behavioural techniques such as controlled comforting and camping out for managing infant sleep and associated postnatal depression. For parents and health professionals who are interested in evidence-based sleep advice, the Australian government-funded, not-for-profit, raisingchildren.net.au gives an excellent summary of infant and child sleep and development, including definitions of techniques like controlled comforting and camping out.

For full details of this study:

Price, Anna M.H., Wake, Melissa, Ukoumunne, Obioha C. and Hiscock, Harriet. (2012). Five year Follow-up of Harms and Benefits of Behavioral Infant Sleep Intervention: Randomized Trial. *Pediatrics* 2012;130;643.

Hiscock H, Bayer J, Hampton A, Ukoumunne O, Wake M. Long-term mother and child mental health effects of a population-based infant sleep intervention: Cluster randomized controlled trial. *Pediatrics* 2008;122:e621-e627

Hiscock H, Bayer J, Hampton A, Ukoumunne O, Wake M. Improving infant sleep and maternal mental health: cluster randomised trial. *Archives of Disease in Childhood* 2007;92:952-958

Readers may also be interested in: Price A, Hiscock H, Gradisar M. Let's help parents help themselves: A Letter to the Editor supporting the safety of behavioural sleep techniques. Early Human Development 2013;89:39-40.

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