

A support package for parents of excessively crying infants: development and feasibility study

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Disclaimer: This report contains transcripts of interviews conducted in the course of the research and contains language that may offend some readers.

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Plain English summary

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This study is a first step in developing evidence-based NHS services to support parents whose babies cry excessively.

Background

Around one-fifth of babies cry a lot without an apparent reason. This 'excessive' infant crying used to be known as 'colic' and was blamed on indigestion pain. Recent evidence suggests that only 5% of infants taken to the doctor because of excessive crying are actually unwell. The crying peak and 'unsoothable' crying bouts that alarm parents in early infancy usually stop by themselves once the baby is 5 months old and are probably attributable to normal developmental processes.

Although most babies who cry a lot are well, the crying can distress parents and lead to poor consequences; these include overfeeding, stopping breastfeeding, maternal depression, poor parent-child relationships, problems with child development and, in extreme cases, infant abuse. By developing NHS services that support parents to manage excessive infant crying, this project aimed to improve parents' well-being, long-term outcomes and how NHS money is spent.

Findings

In stage 1 of the study (development of an intervention package), the research evidence was reviewed and parents whose babies previously cried excessively and NHS health visitors (HVs) and specialist community public health nurses (SCPHNs) were involved to develop evidence-based support materials. These included a website, a printed booklet and support sessions with a qualified practitioner.

In stage 2 (a feasibility study of package implementation in the NHS), HVs/SCPHNs helped to recruit 57 parents whose babies were currently excessively crying. On average, these babies cried for 6.9 hours per day. Most parents accessed the website or booklet and half attended the practitioner sessions. The package was associated with reduced parental anxiety and depression, and all 52 parents and 85% of HVs/SCPHNs who gave an opinion considered that it should be included in the NHS. Findings for the cost of each package element and suggestions for future services were provided.

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This report

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