

**Appendix 1 (as supplied by the authors): Scales that measured crying knowledge, shaking knowledge, general responses to crying, responses to inconsolable crying, and self-talk responses to inconsolable crying.**

**Knowledge Scales:**

- Mothers were asked "How much do you agree with each statement about an infant's behaviours and needs in the first few months of life?"

Answers were coded on a scale where 0 = Strongly agree; 1 = Agree; 2 = Disagree; 3 = Strongly disagree (Don't know or Refuse to answer was re-coded as a score of 1.5 out of 3 on the scale)

• **Crying Knowledge Scale.**

- (1) Infants cry more often in the late afternoon and evening.
- (2) Infant crying increases in the first few weeks of life and reaches a peak in the first 2 or 3 months before getting less.
- (3) If an infant is healthy, it should not cry unexpectedly or without a clear reason. (reverse scored)
- (4) When an infant cries it is always a sign that something is wrong. (reverse scored)
- (5) Sometimes a crying infant can look like she/he is in pain even when they are not.
- (6) Sometimes healthy infants can cry for 5 or more hours a day.
- (7) A good parent should be able to soothe his or her crying infant. (reverse scored)
- (8) It is ok to walk away from a crying infant when his or her crying becomes very frustrating.

• **Shaking Knowledge Scale.**

- (1) One important role for parents is to protect their infant by making sure people who take care of their infant know about the dangers of shaking an infant.
- (2) Shaking an infant can cause serious health problems or even death.
- (3) Shaking a baby is a good way to help a baby stop crying. (reverse scored)
- (4) Sometimes infant crying can be so frustrating or upsetting that I can see how someone might shake or hurt an infant.
- (5) Shaking a baby can be very dangerous and can cause serious injuries.

**Behaviour Scales:**

• **Responses to General Crying Scale.**

Mothers were asked, "How often did you do the following things with your infant in the PAST MONTH"?

Answers were coded on a scale where 0 = Did not do it; 1 = Once or twice; 2 = 3-5 times; 3 = 6-10 times; 4 = 11 times to almost everyday. Don't know or Refuse to answer were coded as missing.

- (1) You picked up your infant when she or he fussed or cried.
- (2) You put your infant down in a safe place and walked away when he or she fussed or cried to the point that you were frustrated.
- (3) You told other people who take care of your infant about the characteristics of infant crying.
- (4) You walked around with your infant when he or she fussed or cried.
- (5) You told other people who take care of your infant what to do if they became frustrated with your infant's crying.

• **Response to Inconsolable Crying Scale.**

Mothers were asked, "When your infant's crying was unsoothable, how often did you do the following things with your infant in the PAST MONTH"?

- (1) Pass the baby to someone else for a while.
- (2) Put the baby down in a safe place for a while.
- (3) Took a break from the sound of crying.
- (4) Took the baby for a walk or drive.

• **Self-talk Responses to Inconsolable Crying Scale.**

Mothers were asked, "When your infant's crying was unsoothable, how often did you do the following things with your infant in the PAST MONTH"?

- (1) Told yourself the crying would end.
- (2) Told yourself your baby is ok.
- (3) Told yourself there is nothing you can do.

Told yourself it was not your fault.