

FAMILY RESOURCE

C O N N E C T I O N

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In her classic book, *Your Baby & Child*, Penelope Leach states an enduring truth: "Being a parent means broken nights." How "broken" those nights will be and how long they will last are variables that are foremost on the mind of every new parent.



Expert Advice on Helping Your Baby Fall to Sleep at Night

As much as new parents want (and need) more sleep, typical babies are not programmed to accommodate this need. They are simply too small and need to eat too frequently to sleep through the night before they are four to five months old or have doubled their body weight. Four to five months? That can seem like an eternity to bleary-eyed parents who cannot even imagine how they will make it through the next day, never mind another few months.

According to the National Sleep Foundation, the average adult needs seven to nine hours of sleep per night. These days, most adults get by with just under seven hours per night, and one third of adults sleep six and a half hours or less per night. Most parents of newborns get considerably less sleep than that. While this may not have much impact in the short run, cheating your body in this way builds up a sleep deficit that eventually will come due. Research confirms what we already know: people who are well rested are able to concentrate more fully, produce more quickly, and handle stress better. In contrast, those who are sleep deprived can have difficulty performing even the simplest of tasks. Tasks requiring logical reasoning and memory are especially hard hit by lack of sleep, which just might explain why new parents seem to have such a hard time keeping track of car keys and eyeglasses!

There is hope, however, for sleep-deprived parents. It comes in the form of advice by a few experts. While the advice varies greatly, one thing everyone seems to agree on is this: it is critical that babies learn to distinguish day from night. Fortunately, there is much parents can do to help babies understand when it is time to play and when it is time for rest.

Here are a few suggestions:

- Have baby sleep in a portable crib or bassinet during the day.
- Do not make the room completely dark while baby naps.
- Provide stimulation when baby awakens from her daytime nap; be boring as dry toast when she awakens at night.

Beyond this, there is no one "rule of thumb" for getting your baby to sleep through the night. What works great for one child has the opposite effect on another. "It is important for parents to know that there is not one right way for children to sleep that will fit for every family, or even for every child in one family," cautions Janis Keyser, co-author of *Becoming the Parent You Want to Be*. "Rather, most families explore different solutions until they find one that works best for all involved," she says.

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To open "New Horizons" of self-esteem and potential for the little people entrusted to our care, their families, and our employees by providing and continuously improving the best child development on the planet!



The Dr. Sears "No Wait" Route. Dr. William Sears, an advocate of attachment parenting, is a well-known and well-respected pediatrician and author of *Nighttime Parenting*, as well as several other parenting books. Dr. Sears does not teach how to make children sleep, but rather helps parents accept that children will sleep through the night when they are biologically capable of doing so. Part of treating your child with respect, kindness, and understanding, according to Sears, is not allowing your child to "cry it out." He supports parents sleeping with their children and, in fact, asserts that they are biologically designed to do so. He does not suggest that putting children to sleep with their parents will solve sleep problems, but rather says that infants that sleep with their parents, because they are following a natural process by doing so, tend to develop better sleeping patterns in the first place.



Dr. Ferber's Progressive Waiting (and Impressive Crying) Approach. Dr. Richard Ferber, Director of the Center for Pediatric Sleep Disorders at Children's Hospital in Boston, wrote the popular book, *Solve Your Child's Sleep Problems*. His technique, known as "Ferberizing," involves establishing a soothing, pre-bedtime ritual, then putting the baby into the crib while she is still awake. She may cry or fuss at first, but only by putting her into the crib while awake can she learn to get to sleep on her own. Once you have laid her down, be firm and matter-of-fact. Tuck her in, kiss her good night, and leave the room. If she cries (and yes, she likely will), wait a predetermined amount of time before going in to check on her. Most parents choose to start with five minutes. Wait your allotted time before going in to check on your child. Speak to her, comfort her, but do not pick her up. Once this is done, leave the room. Yes, she will still be crying and will likely raise the decibel levels. (It is helpful for parents to warn nearby neighbors before they begin the "Ferberizing" process.) Increase your waiting time by five minutes. If you can not bear the sound of your child crying (and



what parent can?), this will be a long ten minutes. Once ten minutes have passed, go back in and do just what you did before. Talk with your child, rub her back, but do not pick her up. Leave the room and do not come back for 15 minutes, then do not come back for 20 minutes, etc. Continue this process until, eventually, your child falls asleep.

Repeat the process the next night and the next until your child can fall asleep on her own, shedding nary a tear. Sound impossible? According to Dr. Ferber, it should only take about one week. (But what a week it will be!)

The Delayed Gratification Approach. Dr. T. Berry Brazelton, arguably the foremost child development expert in the United States and author of many parenting books, recommends parents develop bedtime rituals that are conducive to sleep, such as reading a quiet story, listening to soothing music, and/or giving baby a warm bath. He does not recommend letting babies "cry it out" a la Ferber, but he does suggest parents not jump at their baby's first cry or whimper. Parents who interact with the baby at the first cry do not give baby time to develop his own settling strategies. Instead of being the solution, parents who respond too quickly can actually become part of the problem. "As I see it," says Brazelton, "the task for parents is to develop a supportive bedtime ritual and to learn not to jump at the first whimper. And to help the baby discover his own style of settling himself back down into sleep."

Dr. Paula, the on-line pediatrician, also advocates a bedtime ritual to help make the transition from playtime to bedtime. You choose the ritual, whether it be a bath, a special song, a story, or all of the above, but try not to change the sequence or deviate from the routine too much. Be sure to put the baby to bed before she is fast asleep. Even if she is in the "falling asleep phase" with body twitching and eyelids fluttering, she is still technically not asleep, though fast on her way to getting there. Get her in bed quickly. It is normal for a baby to fuss and whimper after you leave the room. After all, you cannot blame her for wanting to be with you. Dr. Paula suggests waiting ten minutes before going back in, five if you cannot bear to wait a minute longer. Return at five to ten minute intervals, but make these visits as uneventful as possible. The goal is to say little (simple "shhhhhing" noises will suffice) and do even less. This is not playtime, after all, but bedtime. Try to be so dull that your child falls asleep out of sheer boredom!



There is nothing for frazzled parents to do but take a systematic approach to reviewing each of the popular methods, combine the recommendations with their own good judgment, and hope for the best. Parents often do know best, though they may be too tired to realize it.

Resources: *Touchpoints: Your Child's Emotional and Behavioral Development* by T. Berry Brazelton, M.D. 1994; *Your Baby and Child: From Birth to Age Five* by Penelope Leach 1997; *The Self-Calmed Baby* by William A. H. Sammons and T. Berry Brazelton 1991

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