

THE YOUNG AND THE SLEEPLESS

THE ISSUES OF SLEEP . . . If your baby is at least five or six months of age and continues to wake up several times a night, you are ready for a good night of sleep. Remember, you are your child's expert. You need to determine if your child's night wakings are from a medical problem or just the sleep pattern he has established. This sleep pattern may include a "crutch" which your child has come to depend on to help him get to sleep. Crutches may include having a bottle, music playing, rocking, patting, etc.

SEPARATIONS . . . Many families choose to have their babies sleep with them in the "family bed." If you have decided that you want to teach your baby to sleep alone, you need to think about the issues involved. The issue of having your baby sleep alone all night long is about more than just sleep. It is also about being able to separate from your baby for the whole night. It will be important to examine your feelings about your child needing you in the middle of the night and responding to his cries of attention.

"I actually remember feeling delight, at two o'clock in the morning, when the baby woke for his feed, because I so longed to have another look at him."

~ Margaret Drabble

THE WHOLE HOUSEHOLD . . . Helping your baby sleep through the night will take the cooperation of the whole household. Is everyone ready to make a commitment to this cause? This process will involve some crying. You need to decide if your household is ready for several nights of crying to establish a new pattern of sleeping for its youngest member.

HOW TO GET YOUR BABY TO SLEEP? . . . The following suggestions for helping your baby sleep through the night are taken from Dr. Richard Ferber's book, *Solve Your Child's Sleep Problem*, Simon & Schuster, Inc., 1986. This method is often referred to as the "Ferber Method."



Photo by Howard G. Buffett

It has been researched, tested and proven to be successful as one way to help a child relearn a sleep pattern when he has become dependent on a "crutch" at bedtime. Dr. Ferber outlines solutions to many sleep challenges in his book. We will discuss the challenge of wrong sleep associations. Everyone learns to associate certain conditions with falling asleep. We are all accustomed to certain conditions that offer us comfort and enable us to relax and fall asleep.

For adults, it may mean the same side of the bed, the same pillow, watching TV or reading. For babies, it may mean rocking, sucking their thumb or sucking the breast or a bottle. For toddlers, it may mean lying in a certain crib, a night-light, being sung to or the same stuffed toy.

During the night-time periods of light sleep, awakenings take place. If the sleeping conditions we need for comfort are still in place, everything feels "right" and we are able to go back to sleep. If the conditions have changed (the bottle is gone, no more rocking, not in Mom's arms, etc.), it feels "wrong" and it will be difficult to go back to sleep.

A SOLUTION . . . If you want your child to sleep well at night, he must learn to fall asleep alone in his crib. He must also fall asleep under conditions that he can re-establish for himself after waking at night. This may mean that you will need to help your child learn a new set of sleep associations. (NOTE: This does NOT mean you should NOT rock your baby, sing to him, read him a book, give him a bottle, nurse him or cuddle with him at bedtime. It simply means to put him to bed relaxed and comfortable, but not yet asleep.)

THE STEPS OF THE "FERBER METHOD"

1. Each night at bedtime and after nighttime wakings, begin to encourage your child to fall asleep alone, without you being in his room.
2. After a pleasant bedtime routine, put your child in his crib when he is quiet but not yet asleep.
3. Leave the room. No doubt your baby will immediately begin to cry when you leave.
4. If after five minutes he is still vigorously crying, go back into his room. **DO NOT PICK YOUR CHILD UP.** Stay for about two-three minutes. Talk softly, pat him a few times and reassure him that you have not abandoned him.
5. Leave again even if his crying intensifies. This time wait 10 minutes before returning to reassure him.
6. Repeat the same reassurance. You do not want your child to fall asleep when you are present. The goal is for him to find his own self-comforting pattern. You may want to encourage a "lovey" such as a blanket or stuffed toy.
7. Leave again and return after 15 minutes if crying persists. This is the maximum waiting time for the first night. Continue to wait 15 minutes before returning to offer reassurance in the same manner. As you feel more comfortable with these time limits you may increase them on future nights.
8. If the crying stops or subsides to only whimpering, do not go back into your child's room.
9. Each time your child wakes up in the middle of the night begin the same process working up to the 15 minute wait. Continue this routine until his usual waking time.

10. Use this same routine for naptimes. If your child has not fallen asleep after one hour, end the naptime. Or if he is awake and crying after getting a small amount of sleep, end the naptime. If he falls asleep later on the floor or playing, that's okay. Continue to encourage him to sleep in his crib at naptime.

Number of minutes to wait before going to your child briefly.

| DAY | AT FIRST WAIT | SECOND WAIT* | THIRD WAIT* | SUBSEQUENT WAITS* |
|-----|---------------|--------------|-------------|-------------------|
| 1 | 5 | 10 | 15 | 15 |
| 2 | 10 | 15 | 20 | 20 |
| 3 | 15 | 20 | 25 | 25 |
| 4 | 20 | 25 | 30 | 30 |
| 5 | 25 | 30 | 35 | 35 |
| 6 | 30 | 35 | 40 | 40 |
| 7 | 35 | 40 | 45 | 45 |

*If your child is still crying.

CHART RESOURCE:

Solve Your Child's Sleep Problems, Richard Ferber, M.D.

POINTS TO REMEMBER:

This gradual approach will lessen the anxiety you feel about hearing your child cry. He will begin to learn some new rules; however, he won't understand them at first. You want him to know you are still there caring for him. He will quickly learn you are still there, but the reward of rocking, a bottle or holding will not come at this time. This technique helps you with babies 5 months or older who are unable to fall asleep on their own because they associate something you do (such as rocking or singing) with going to sleep.

Your baby's crying will not lead to a better sleeping pattern. You may have already tried several nights of long periods of crying. They probably resulted in frustration and falling back into an old sleeping pattern. Your baby's sleeping pattern will change as she practices falling asleep by herself.

Make sure your baby's doctor has not recommended further nighttime feedings for your baby.

Make sure your child is not crying because of an illness.

Make sure your child is not suffering from severe fears or anxieties. You will know a baby has separation anxiety if she can't stand to be apart from you during the day and cries out for you to come in-but not necessarily do anything at night.

Once you decide on a routine to help your baby sleep through the night, you will need to be consistent. You may feel very determined at 10:00 pm and very tired at 2:00 am.

When you have helped your baby finally sleep through the night, she may return to nighttime wakings for several reasons: sleeping in a strange environment, new developmental skills, illness, etc. After the passing of the temporary disruption, go back to the progressive waiting routine if your child continues to wake in the middle of the night.

What about the other members of the household or neighbors if you live in an apartment? Won't the crying keep them awake? You may want to explain to everyone including neighbors what you are going to do. Start the program at the most convenient time. A few nights of lost sleep will be worth the many nights of uninterrupted sleep to come.