

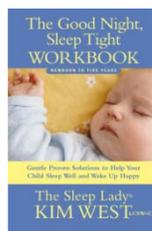


Your Newborn and Sleep

Your newborn baby will probably sleep much of the time, but she won't sleep deeply. Newborn sleep *is not well-organized neurologically, which means it's a very light slumber*. Hold her, rock her, swing her, do what feels right and comfortable for the first two weeks. At the start of the third week, gradually begin applying very gentle Sleep Lady slumber rules to start weaving routines and patterns into her life. This is a gradual process so don't expect huge, dramatic changes in her sleep patterns in week three. But you are laying the groundwork for improvement in the coming weeks and months.

THE SLEEP LADY'S EIGHT RULES OF INFANT SLUMBER

1. Create a flexible feeding and sleeping routine. Not a minute-by-minute schedule but a sensible framework. The predictability is calming for a baby, and will help you get better at reading your baby's signals and clues.
2. Encourage soothing techniques other than nursing.
3. Offer a pacifier for soothing and sucking.
4. Sometimes feed your baby when he wakes up after a nap—not just when you are trying to get him to sleep.
5. Put him down drowsy but awake at least once every 24 hours.
6. Introduce one bottle a day—even if you are committed to breast feeding, as I was with my own children—around the third or fourth week if breastfeeding has been established.
7. Create a quiet, gentle sleep-friendly environment.
8. Carefully think through the question of bedsharing (or co-sleeping) and roomsharing. Know how to co-sleep safely if that's your choice. But if you don't want to co-sleep, don't get into the habit simply because you don't know how to avoid it.





Your Six to Eight Month Old Baby and Sleep

At this age, babies need an average of eleven hours of uninterrupted nighttime sleep and three and a half hours of daytime naps spread over two to three naps.

From six through eight months, babies become more mobile. They roll over, sit up, maybe even stand holding on to something. Many scoot or crawl, and the first teeth come in. Most babies sleep through the night fairly regularly but if yours doesn't, it is still quite easy to get them on track. You may also find that at six or seven months, a baby who had been a good sleeper starts having difficulties. As she experiences her first wave of separation anxiety, she may resist being left in her crib at night, or may start waking up more often to see you

There is no "right" schedule for all babies, but the sample below is a good framework. Some variation is inevitable; a baby who naps for ninety minutes starting at 9:00 a.m. is not going to be on the same clock as one who naps for two hours starting at 9:30. But the starting point, 7:00 or 7:30 a.m., and the end point, 7:00 or 7:30 p.m., should be about the same. Some babies do seem to have internal alarm clocks that go off at 6:00 a.m., so you may have to shift the schedule, particularly morning naps, a little earlier to accommodate. If she's in child care or with a sitter part of the day, make your home schedule conform as much as possible to the child-care feeding and nap times, as long as that routine is a sensible one. Consistency counts.

Sample schedule:

- 7:00 to 7:30 a.m. Wake-up. Upon waking, nurse/bottle feed and solids
(consult your pediatrician about introduction of solid foods).
- 9:00 or 9:30 a.m. Morning nap, 1.5 to 2 hours. Upon waking, nursing/bottle and solids.
- 12:30 or 1:00 p.m. Afternoon nap, 1.5 to 2 hours. Upon waking, nurse/bottle.
- 3:30–4:00 p.m. (depends on previous nap time) Optional third nap, about 45 minutes to an hour.
- 5:00 or 5:30 p.m. Nurse/bottle feed and solids.

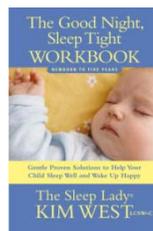
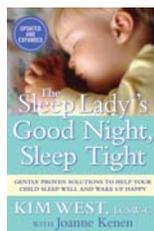
6:00–6:30 p.m. Start bath/bedtime preparations, which may include an additional bottle or nursing.

7:00–7:30 p.m. Asleep.

The trick is to get your child on the right schedule; try to stick to it pretty regularly but know how to read her cues and modify it a little when appropriate. Some days she'll sleep a little more, some a little less, just like you do (and you don't even have growth spurts).

Other helpful tips:

- This is a great age to begin sleep coaching if you your baby is not sleeping well at night and for naps.
- Encourage an attachment to a lovey or security object such as a small stuffed animal.
- Develop a sleep-friendly schedule and introduce appropriate wind-down activities at night; such as, massage, a song or book.
- If your baby is used to being rocked, walked, nursed, or stroked to sleep, or to get back to sleep in the middle of the night, you will need to help her discard those sleep crutches, sometimes called negative associations. If she's spent the first few months sleeping in unconventional places, like swings or car seats, you need to get her into the crib. As you make changes you may have to tolerate some tears—but you don't have to let her cry endlessly or alone. Sit by her as she cries, stroke her head or pat her back a little; whisper soothing words. Her tears are her way of saying she is tired and frustrated, or wary of this change. But if you let her, she will learn to cope, adapt, and soothe herself to sleep—and it won't take as long as you fear.





Your Nine to Twelve Month Old Baby and Sleep

Babies at this age on average need eleven hours of sleep at night and three during the day. At nine months, babies should nap for about an hour and a half in the morning and about one and a half to two hours in the afternoon. Most have given up that brief, third late-afternoon nap. By twelve months, the morning nap is about an hour, and the afternoon nap is about an hour and a half.

These babies are more mobile, crawling and pulling themselves up in their cribs, and can pop up each time you put them down at bedtime. Some walk by their first birthday, a major developmental milestone that can temporarily disrupt sleep. Increased activity can tire them out, so you have to pay very close attention to their sleep window, when they are most ready and able to fall asleep. Some can fight sleep, and conceal that window. If you wean during this period, that can also alter the rhythms of bedtime.

Babies have peaks of separation anxiety at about nine months, when they are crawling and sitting, and at twelve months, when they are standing, walking, and climbing. Those physical leaps often make them wake up more at night, at least temporarily, and the accompanying cognitive leaps make them more aware of strangers, places, and change.

Most babies can now pull themselves up and stand—which creates some new twists at bedtime or naptime when you put them down in the crib and they can pop back up again. I usually tell parents not to intervene (if the baby knows how to get down), or to put the baby down once, but only once. While you are sitting next to the crib, pat the mattress and encourage your baby to lie down. If you sit, he will be more likely to sit down to be on your level. Babies do tend to learn how to get up before they can get back down, so let her practice during the day. Let her stand up and try to get down holding on to the coffee table—after you baby proof the corners and put some pillows around if needed. Games like ring-around-the-rosy are also good for developing up-and-down motions. But do the practicing games out of the crib, during awake time, not at naps or bedtime.

Introduce a cup before the first birthday, even if you are still nursing, and even if you plan on nursing for some time to come. As babies get older, they can get emotionally attached to the bottle or breast. It basically becomes their primary and sometimes only way to soothe themselves, and that can contribute to an ingrained habit of waking up at night in search of it. Try to nurse or bottlefeed at set times or upon wake up, and use the cup at set times, giving him water, expressed breast milk, milk, soy milk, formula, diluted juice, whatever your doctor recommends.

Moms often find that they and the baby both like nursing in the morning and evening and using the cup during the day, especially with solids at mealtimes. Don't let him fall asleep on the breast or with the bottle, and don't let him be dependent on nursing to fall asleep or stay asleep, or you'll be up nursing him back to sleep all night for months to come.

Sample Schedule

7:00–7:30 a.m. Wake-up. Nurse/bottle/cup and breakfast.

9:00–9:30 a.m. Start the morning nap. If your child is sleeping eleven to twelve hours uninterrupted at night he might be able to stay awake until 10:00 a.m. (or three hours after waking up). Some children need a small morning snack after the nap.

12:00–12:30 p.m. Lunch with nurse/bottle/cup.

1:00–2:00 p.m. Start the afternoon nap. Snack upon awakening.

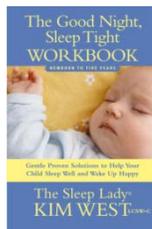
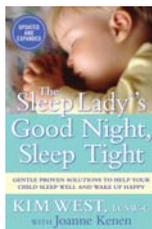
5:00–6:00 p.m. Dinner with nurse/bottle/cup.

7:00–7:30 p.m. Bedtime with nurse/bottle.

Although I don't believe in completely rigid schedules, young children do need consistency and predictability. Schedules obviously vary somewhat from one child to the next. A baby who wakes up at 6:30 a.m. will have a slightly different timetable than one who gets up at 7:30. But this is a good model, so try not to deviate too much. Especially don't let the baby stay up too late at night, no matter how much fun he seems to be having.

It's a good idea to introduce your baby to a cup by 9 months old, so by the time she's 12 months old (or very soon after), she'll be weaned off the bottle. Around 15 months, many babies become attached to objects like bottles and pacifiers, so if your child is still drinking from a bottle after 25 months old (especially before going to sleep), it's going to be especially tough to wean her off of it.

Check with your pediatrician, but healthy children from nine to twelve months on a normal growth curve can almost always go eleven to twelve hours at night without a feeding. If your child is still waking to eat frequently, you probably have to either adjust his body clock or change his habits.





Your Thirteen to Eight Month Old Toddler and Sleep

At this age toddlers need an average of eleven and a quarter hours of uninterrupted sleep at night and two and a quarter to two and a half hours during the day. Children at the younger end of this age bracket take two naps, in the morning and afternoon, but by eighteen months most consolidate to one midday or afternoon nap.

Young toddlers are prone to behavioral sleep problems. Their increased mobility (including walking), a peak in separation anxiety around the first birthday, transition to one nap and emotional attachment to such objects as bottles and pacifiers can all complicate bedtime and contribute to nighttime awakenings.

At around fifteen to eighteen months, toddlers transition from two naps to one. That's a tricky stage because there is usually a point when one nap is not enough and two naps are too many. The result is an overtired child who doesn't sleep well at night. (Ask for the handout on "Transitioning from Two Naps to One").

As if that wasn't enough, temper tantrums often emerge at this age, and toddlers start testing their parents. Bedtime is a common battleground for toddlers flexing emerging willpower muscles. A soothing bedtime routine is extremely important for children this age and adhering consistently to routines and setting clear rules is essential—because the next stage is only tougher.

Separation anxiety hits a peak right around the first birthday. Saying "night-night" to parents can be tough. That nice, long transition to bedtime, good focused time with one or both parents, helps ease the fears. Although one year olds can't say much, they understand an awful lot, so give plenty of verbal assurances that you are nearby.

Sample Schedule

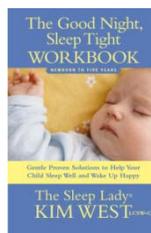
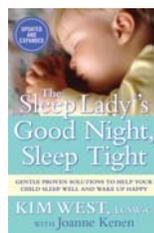
(Shift earlier if your child wakes between 6:00 and 7:00 a.m.)

| | |
|-----------------------|--|
| 7:00–7:30 a.m. | Wake-up and breakfast. |
| 9:00–9:30 a.m. | Start of one-hour morning nap if she's still taking one. She'll probably want a snack right before after the nap. |
| 11:30 a.m.–12:30 p.m. | Lunch (depending on morning-nap timing). |
| 12:30–1:30 p.m. | Start of afternoon nap. About an hour and a half if it's a second nap, about two to two and a half hours if it's the only nap of the day. Snack after nap. |
| 5:00–5:30 p.m. | Dinner. |
| 6:00–6:30 p.m. | Start bath/bedtime routine. |
| 7:00–8:00 p.m. | Asleep. |

Children need regular naptimes, regular bedtimes, and three recognizable mealtimes. Their bodies need the routine to regulate day and night hormone cycles, and to keep them in sync with their internal clocks. Their little hearts and minds need certainty and predictability to feel secure. But I also believe in some flexibility. The sample schedule is a good starting point, but you can adjust it. You may also have to play with the schedule a bit to accommodate the needs of your other children. Sleep times are averages. Some kids sleep more, some sleep less, but the variations are a lot less than many parents think. If your child is napping and sleeping poorly, chances are you are underestimating how much sleep she needs.

Watch her daytime behavior. If she's easy and content, she's probably on a pretty good schedule. If she's fussy and demanding, she may need longer naps, an earlier bedtime, a later wake-up time—or all of the above. If you have to skip a nap because of a doctor's appointment or some other essential interruption, most toddlers fare better missing the morning nap than the afternoon one. You can temporarily move the afternoon nap up a bit to compensate for a missed morning one.

The first birthday is a common time for toddlers to transition to a cup and milk if they were on formula. If you haven't already done so, introduce a cup to your toddler. At this age most toddlers are beginning to get all of their nutrition and calories from table foods or solids. Ask your pediatrician about average milk intake requirements and make sure you include yogurt, cheese and other forms of calcium and vitamin D. If you are concerned that your toddler is emotionally attached to the bottle, ask for the handout on "Bottle Weaning".





18 Month Old to Two and a Half Year Old Child and Sleep

An eighteen month old on average sleeps eleven and a quarter hours at night and two and a quarter hours during one midday or afternoon nap. **At age two**, sleep requirements drop to eleven hours at night and two during the day. Over the next year that will drop to ten and a half hours at night and one and a half during the day. Remember these are averages but variations should not be huge. Watch your child's daytime behavior for clues to whether he or she needs more sleep.

Toddlers and early preschoolers are a lot of fun, but bedtime can be a challenge. They are learning to follow simple directions, yet they also test our rules and their limits. Curious about their world, they are extremely eager to explore, leading to more limit testing and boundary breaking. They climb, crawl, crash, and clamber, standing on furniture, knocking down gates, trying to scramble out of the crib. Yet as they push their limits, they rely on their parents to keep setting boundaries, seeking safety, reassurance, and security.

Their language skills are blossoming, but they understand more than they can say, leading to frustration and tantrums. Their favorite words seem to be *no*, *I do*, and *mine*, and they are particularly possessive about their toys and their parents. As their language skills improve, they just love to stall, bargain, and negotiate, particularly around bedtime.

They may go through periods when they have the "scaries" of the dark, thunder, monsters, and the like. Nightmares and night terrors may start, and be a recurring problem for the next several years. Potty training can complicate bedtime behavior, if you let it become a battle of wills rather than a cooperative venture. To prevent bedtime from becoming a war zone, make sure that you have a very consistent, predictable, and soothing routine. Clear rules and parental consistency are essential, along with plenty of love, cuddles, and kisses.

Sample Schedule:

| | |
|------------------------|-----------------------------|
| 7:00 a.m.–7:30 a.m. | Wake-up and breakfast. |
| 12 p.m.–12:30 p.m. | Lunch. |
| 12:30 p.m. – 1:00 p.m. | Start afternoon nap. |
| 5:00 p.m.–5:30 p.m. | Dinner. |
| 6:00 p.m.–6:30 p.m. | Start bath/bedtime routine. |
| 7:00 p.m.–8:00 p.m. | Bedtime. |

Most kids this age will demand that you do everything in the same order each night, and not leave anything out, so limit the bedtime regimen to a manageable

number of elements (one story plus one song plus one cuddle in the rocking chair). Starting around age 2, you may see a lot of stalling and delay tactics. If your child “needs” frequent tucking in, another kiss, etc., respond once. The second time he calls for you, be neutral but firm and say, “No more tuck-ins. Now it’s time to go to sleep,” and stand your ground: If you say, “Last time” and then give in, you’re sending the message that if your tyke begs and cries long enough, he’ll get what he wants. If you and your partner take turns putting your child to bed, it’s perfectly fine if your styles are slightly different. Just make sure that you’re consistent about when bedtime takes place and how you respond to delay tactics.

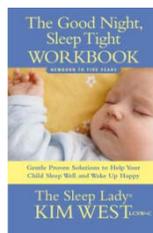
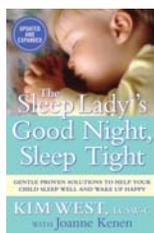
As toddlers turn into preschoolers, they may be able to skip an occasional nap without falling apart. Don’t be fooled into thinking that she’s outgrown naps completely. Most kids need about an hour or an hour and a half until age 3.5 or four.

Changes and Challenges: Climbing out of the Crib

Many toddlers in this age group try climbing out of the crib. I almost always advise parents to keep him in as long as possible, definitely until 2½ years old and preferably until 3. By then, a child has the verbal skills to understand the “big bed” rules and to communicate when he has gotten out of bed for the twentieth time that night. To stop a tot from going overboard (and keep him from getting hurt if he does manage to scramble out), you can:

- Lower the mattress as low as it goes.
- Put pillows on the ground around the crib to cushion falls.
- Remove any large toys or stuffed animals from the crib that he may be able to step up on.
- When your child does get out, return him to the crib with minimal interaction and say, “No climbing.”
- Stay nearby at bedtime and peek through the door. If you see your child start to raise his leg say, “No climbing.”
- Get a mesh crib tent. Put a positive spin on it by decorating it.
- Dress your child in a “sleep sack”; he won’t be able to raise his leg over the crib rail.

If you are ready to transition your toddler to a crib or already have, ask for the handout “Transitioning from Crib to Bed”.





Your Two and a Half to Five Year Old Child and Sleep

*Between **ages two and three**, average sleep needs drop to about ten and a half hours a night, plus an hour-and-a-half afternoon nap. **Four year olds** need eleven and a half hours at night, and most no longer nap daily, although they do need about forty-five minutes of quiet time each afternoon and possibly an occasional nap. **Five year olds** sleep about eleven hours a night, and afternoon quiet time is still beneficial.*

Preschoolers still need a lot of sleep, but they are immensely clever at devising reasons not to get it. They stall and evade with amazing ingenuity, which for parents can be frustrating, or comical, or both. As parents, we need to inject some discipline into bedtime but still keep it warm and cozy. We need to help them with those bouts of the scaries that can make bedtime difficult even when they aren't turning stalling into a competitive sport. As they begin to cut back and eventually outgrow their naps, we have to keep tinkering with their sleep and wake schedules and introduce afternoon quiet time in order to avoid meltdowns before dinner.

Once your child is in preschool, his schedule will be shaped largely by the hours he's there, when the class has nap time, and other outside factors. That said, there are some things you can (and should) control:

- ▶ Generally, you want him to **wake up between 6:00 and 7:30 a.m.**
- ▶ Around age 4, most children stop napping. When your preschooler hits this milestone, make sure he still has some **quiet time in the late afternoon** (looking at books in his room, for example), and move his bedtime up by about an hour—i.e., if he had been getting to bed at 8:30 p.m., now he should be in bed by 7:30 p.m.
- ▶ By age 5, he can probably stay up a little later—until 8:00 p.m.—and he should sleep until around 7:00 a.m. In other words, he should get **11 hours of uninterrupted sleep each night**; adjust your child's exact bed- and wake-up times to coincide with your family schedule and his school-start time.

Also, be aware that preschoolers are very good at hiding when they're sleepy, which can make it tough to get their bedtime just right. Continue to **watch for sleep cues like yawning, eye-rubbing, thumb-sucking, or crankiness**. If your tot gets that cortisol-fueled second wind (meaning you missed his sleep window), start getting him to bed a half-hour or so earlier from now on. Similarly, if he starts nodding off during his bedtime routine or falls asleep the very second you turn out the lights; you're probably putting him to bed too late. Move bedtime earlier by 15 to 30 minutes.



Transitioning Your Toddler From Two Naps to One Nap

Most toddlers are ready to give up their morning nap between 15 and 18 months, and nearly all children go through the “one nap is too little, two naps are too many” phase. All you can do is make the transition as smooth as possible, although even in the best-case scenario, a child may be cranky and out-of-sorts for two or three weeks. Your toddler has reached this milestone when she:

- ▶ Consistently gets 10 to 11 hours of uninterrupted sleep at night. If she’s not, work on improving nighttime sleep before you tackle the nap change.
- ▶ Consistently takes longer and longer to fall asleep for her morning nap.
- ▶ Consistently takes increasingly shorter morning naps or sleeps for too long in the morning and then refuses an afternoon nap.

Once you see these changes in your child’s sleep and nap behavior for at least 10 to 14 days straight, you can start the process of dropping her morning nap. It should take only 7 to 10 days. Here’s how:

1. Gradually push her morning nap later—until around 11:00 a.m. for two days, then 11:30 for a couple of days, then noon, and so on. Don’t let the nap get stuck in late morning. Some kids can adapt more quickly to a noon nap time and others need to go slower. Watch your child. Your goal is for the afternoon nap to start between 12:30 and 1:00 and last at least 2¼ to 2½ hours.
2. If your toddler sleeps for only an hour and wakes up tired, then try to soothe and resettle her back to sleep. If all else fails, use one of your emergency techniques, like putting her in the car or stroller.
3. Do not let her sleep past 4:00 or 4:30 p.m., so as not to disrupt her bedtime.
4. Try to get your child to bed earlier than usual for two weeks or so during the transition—like 7:00 p.m.—to cushion her from being overtired.
5. Be open to an occasional “two-nap day.” If during the transition your child seems too tired, it’s okay to let her nap twice—just limit the morning snooze to 45 minutes.
6. If your child is in childcare or preschool part of the time, try to synchronize the afternoon nap at home with the timetable at school (assuming she starts her nap at school between 12:00 and 1:00 p.m.).



HOW TO WEAN YOUR CHILD FROM THE BOTTLE

Tough as it might seem to say bye-bye to the bottle for both of you (it comforts him, it makes things easy for you), it's important to start the process sometime after your child's first birthday, with the goal of having him completely weaned by 15 months.

Here's why:

- ▶ **Toddlers are more likely to get attached to things between 15 and 18 months.** They swing back and forth between flouting their independence and clinging to you. A child this age can now explore at a short distance from mom or dad, but there are times when he'll want to stay nearby, especially if he's tired, sick, or scared. And not only will he seek the safety of your lap, he may hang on for dear life to a familiar and comforting object—like his bottle, if he hasn't already given it up. A toddler who's still attached to a bottle will only latch on tighter if he's allowed to have it as a source of comfort during this critical period. It's better to encourage other attachments, such as a blanket, stuffed animal, or toy.
- ▶ **His budding pearly whites are at stake.** This is especially true if you let your child walk around with his bottle, drink from it between meals and snacks, or have it at bedtime without brushing his teeth before he nods off: Healthy as it is, milk is full of sugars that can cling to budding teeth and cause decay (which can ultimately affect adult teeth as well). It's even worse if he's drinking juice from a bottle. You might as well hand him a box of cookies to snack on all day long! Giving a bottle to a toddler at bedtime and letting him fall asleep before you brush his teeth is an invitation to decay: I've worked with many families whose children have developed cavities as young as 18 months because they consistently went to sleep with milk on their teeth; likewise, I've seen kids as old as 5 with cavities for the same reason: They were still taking a bottle before bed
- ▶ **It'll ruin his appetite.** Many children over 12 months will fill up on milk if they take it from a bottle. For example, toddlers who're used to sucking down a 6- or 8-ounce bottle first thing in the morning aren't likely to eat much breakfast. But at this age, they need other foods besides milk to be nourished. Kids can also literally drink faster from a bottle than from a sippy cup, making it even easier to fill up. (If you're worried that without a bottle your child isn't getting enough calcium, speak to your pediatrician).
- ▶ **A bottle can be an unnecessary crutch at bedtime.** A primary rule of encouraging healthy sleep habits bears repeating: It's vital to teach your

baby to drop off by himself, without needing to nurse, say, or be rocked—and you certainly don't want him to rely on sucking on a bottle in order to get to sleep. Besides that, by a year a child should be able to sleep through the night easily without needing to “top off” his belly.

How to wean:

1. **Introduce a cup**, if you haven't already. Ideally, you'll have been giving your baby sips of milk from a cup by 6 to 9 months, but if not, start giving him different kinds until you find one he likes. (Some kids take to sippy cups right away, others prefer flip-up straws; some don't care what kind of cup it is as long as it's blue, or green, or has puppies or princesses on it.)
2. **Eliminate the bottle, starting with lunch**, the meal at which the bottle is probably least important to him. Instead, serve his milk in his now- favorite cup.
3. **Take away the dinner bottle**—once he's used to having a cup at lunch, after around four to seven days (follow his cues).
4. **Next tackle the morning bottle**. Instead of handing your toddler a bottle as soon as he gets up, go right to the table for breakfast.
5. **Finally, let the bedtime bottle go**. As long as your child has had a good dinner (which is not as much food as you might think), he doesn't need extra milk to make it through the night. You may even be able to just skip the bottle at this point, since he's gotten used to doing without it during the day, but if he puts up a fuss, take a graduated approach: Begin to reduce the amount of milk in the bedtime bottle by at least two ounces every two days. When you reach the three-ounce mark, offer a cup of water instead of a bottle during his bedtime routine (reading, singing, cuddling). If you're convinced that your baby has to have milk before bed, then work toward serving that milk in a cup, and brushing his teeth before he goes to sleep.

Note: *As soon as your baby is weaned from the bottle, throw away every single one in the house (even the spares you keep tucked in the diaper bag and car). You don't want your child to discover a left-over bottle and demand a fill-up (it can happen months later!), nor do you want to turn to a bottle out of desperation to calm a tantrum or get a baby to go back to sleep at 4 a.m.*

Oops! Is your child too attached to the bottle?

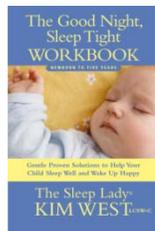
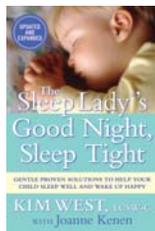
Let's say you missed the 15-month mark and suspect your older toddler (or preschooler!) has developed an emotional attachment to his bottle. Here's how you can tell:

- ▶ His bottle is clearly his security object, or lovey.
- ▶ He wants it when he's tired, overstimulated, or anxious, and may even whine or throw a tantrum in order to get it.

- ▶ He demands a certain beverage in it, and a certain amount.
- ▶ He needs it to fall asleep.
- ▶ He carries it around during the day.

To help a child who fits this description break his bottle habit, follow these steps:

1. **Give him fair warning.** Let him know three to five days in advance that it's about time to give up his bottle. Tell him every day, at least twice a day, but pick a time when he's not tired or about to go to sleep. Be calm, caring, confident, and positive.
2. **During the period leading up to D-day, start minimizing the number of bottles** he has during the day and reducing the amount of liquid in each. Some parents like to restrict the bottle to naptime and bedtime, or allow it only in certain rooms. When he's in a bottle "mood," distract him with a game or offer him another form of comfort.
3. **Also beforehand, gather up any bottles that are scattered around the house** (your child might like to help you do this), and stop stockpiling pre-filled bottles in the fridge.
4. **Some parents like to tell stories about giving the bottles away** to babies in the hospital, the recycling center, the Easter bunny (if the timing is right). That's okay, but you still owe it to your child to tell him in advance.
5. **On the big day, "officially" get all the bottles out of the house.** Tell your child what you're doing, and remind him that you've been talking about this for several days. Stay firm, and don't waiver—even if he whines or throws a fit—but at the same time be comforting and encouraging.
6. **Offer a special reward or treat.**
7. **Don't be surprised if all goes well for a few days, and then your child hits a rough patch and begs for a bottle.** Gently remind him that there aren't any more bottles, and offer a kiss and a cuddle instead.





Transitioning from Child from a Crib to a Bed

Most children move out of the crib between ages 3 and 4. A child is ready to make the switch when:

- ▶ He's at least 2 ½ years old. This is the average age a child has the cognitive ability to understand the "big bed" rules like "stay in bed all night long".
- ▶ He's mastered the skill of putting himself to sleep at bedtime and getting himself back to sleep when he wakes during the night without any help.
- ▶ He's climbing out of his crib easily and frequently.
- ▶ He says he wants a "big boy" bed.

There are different ways to make the transition:

The Cold Turkey Approach—in other words, simply **removing the crib and replacing it with a bed**. If you do this:

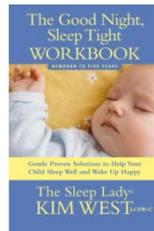
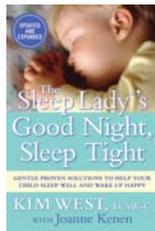
- ▶ Put the new bed where your child's crib was (if the layout of the room allows for it) or
- ▶ Place it in a corner of the room so he still feels safely contained.
- ▶ Install a guard rail on the side of the bed that's not against a wall.
- ▶ Arrange a few pillows on the floor in case he tumbles out anyway.

The Gradual Approach:

- ▶ Start by leaving the crib railing down, with a stool at the side so he can get out by himself.
- ▶ Arrange some extra pillows on the floor for safety.
- ▶ If you can fit the new bed and the crib in the same room, you can start with reading books on the bed or have him nap in the bed. Then pick the big night where he sleeps in the bed at night. Once he's sleeping in his bed for naps and nights, you can remove the crib.
- ▶ Some other things to keep in mind, no matter how you decide to make the transition:
- ▶ Consider putting a gate on the bedroom door, at least at the beginning, as both a training device and a safety measure. The gate delineates boundaries, helping a child understand that he has to stay in his bed. It will also prevent him from wandering around and possibly getting hurt in a dark house in the middle of the night.
- ▶ Make sure the room is safety proof now that he can get out of bed unsupervised.
- ▶ Let him pick out new sheets or a quilt (or at least give him a choice between two or three sets that meet your aesthetic requirements!).

- ▶ Explain the privileges but also review the rules. Make sure he understands that you will still put him to bed, but then he's expected to stay there.
- ▶ Be consistent from day one. If your tot gets out of bed, take him right back without any fuss.
- ▶ Reward him in the morning for staying in bed: Give him lots of stickers and let him call his grandparents to brag about the new bed.
- ▶ Don't get in the habit of laying down with your child until they are asleep every night...you may find yourself stuck there for months and even years!

If you're about to embark on sleep training or some other major nighttime changes, like taking away a bottle or pacifier, consider whether it would be easier if you kept him in the crib a little longer. It keeps him in a safe and familiar environment while you're changing other aspects of his sleep, and it may be simpler if you don't have to worry about him getting up and out of bed while you're trying to teach him how to sleep in it.





Nightmares Versus Night Terrors

Nightmares and night terrors are confusing. Knowing the difference between the two is the key to determine the best way to handle each episode.

Nightmares are very common and totally normal. They often peak at two or three years of age when children have rich imaginations and have some trouble distinguishing between reality and fantasy. Nightmares occur during REM sleep, near the end of our sleep period. When children have a nightmare, they will seek comfort from their disturbing dream and recognize you upon seeing you. They are able to recall the nightmare, or at least portions of it, but it may take a while to fall back asleep and get the scary thoughts out of their minds.

How to help avoid them:

- ▶ Avoid scary videos, books, and stories prior to bed
- ▶ Don't play scary games
- ▶ Respond quickly and assure them of their safety
- ▶ Help your child get enough sleep - sleep deprivation can increase nightmares
- ▶ Avoid high-dose vitamins at bedtime
- ▶ Check with your pediatrician to make sure your child is not on any medications that might be interfering with his night sleep

Nightmares can occur during times of stress or when a child is reliving a trauma. Be aware of that, and get some professional advice if you are worried about frequent nightmares but remember that happy, well-adjusted, low-stress kids can also experience bad dreams now and then.

Night terrors are different in both the symptoms and the experience. When a child is experiencing a night terror he may scream and appear anxious. His heart may be racing. The child is often inconsolable, and may not recognize you. He may even push you away and seem frightened of you. The terror usually lasts between five and fifteen minutes and then subsides. These incidents are often more upsetting for the parent than they are for the child, *as children do not usually remember them*. Night terrors occur during NON-REM sleep (the period of coming out of deep sleep), and usually within two hours after the child falls asleep.

Night terrors are not bad dreams. They do NOT occur during dream sleep. They are not a sign of a psychological problem. Night terrors can also occur during a developmental milestone.

Night terrors seem to be more common in boys, and occur in five percent of all children. Your child is more likely to have night terrors if either parent had them as a child, or if either parent had a partial arousal sleep disorder such as sleepwalking.

There are other Causes for night terrors. The most common cause is sleep deprivation or a disturbance in a child's sleep patterns. Stress that causes big changes in their sleep schedule (like traveling to a different time zone, sleep apnea, or fever) can also be contributing factors.

What you can do:

- ▶ If your child is having a night terror, monitor the child but avoid interfering, as
- ▶ This can worsen the episode
- ▶ Make sure your child is physically safe during the night terror
- ▶ Put your child to bed earlier - even if by only 30 minutes
- ▶ Keep a regular sleep schedule for him
- ▶ Don't talk about the terror with your child in the morning

If your child is having a sleep terror two to three times a week at set times during the night (i.e. 2 hours after going to sleep) do the following to change his sleep pattern:

- ▶ Keep a sleep log to recognize the pattern – that helps *break* the pattern
- ▶ Wake your child 15 minutes prior to the time he usually has an episode.
- ▶ Don't get him up completely but you want him to be at that
- ▶ point of awakesness where he mumbles, moves, or rolls over
- ▶ Do this every night for 7-10 nights in a row even if he goes a few nights without a terror

As these two phenomenas differ so greatly it is important to clearly understand the difference between nightmares and night terrors. Keeping a calm presence of mind and using a reassuring voice can make a huge difference in these middle-of-the-night episodes for both you and your child. Remember to reassure your child as needed, showing love and respect for these normal experiences.

