

## 7-Step Guide: Help Your Child Release Stuck Behaviors

A Unique Parenting Tool  
by Marcy Axness, PhD



In my years of coaching and counseling parents-in-progress, a unique and little-known tool has proved incredibly useful: sleep talking. It is yet another way in which to practice *Parenting for Peace's* #1 Principle – Presence. Speaking to your child while he or she is sleeping is a way to be present to your child in a powerful way, and to speak directly to the unconscious, bypassing

whatever protective deflection your waking child might have toward the words of acknowledgement and healing you want to share.

At a loss to help two of her patients who expressed continued rebellion, negativism and hostility, pediatrician Rhodora Diaz was inspired to suggest that their mothers talk to them while sleeping. (Dr. Diaz had a vague recollection of having read a study out of Boston about speaking to patients during sleep.) Both of these children had one thing in common: they had both been unwanted conceptions, and both mothers had resented their pregnancies. Dr. Diaz would normally have referred these children to psychiatrists (and most likely they'd have been prescribed psychotropic medication), but the families lacked the financial means for this. So Diaz was willing to try anything, no matter how unorthodox. This certainly couldn't hurt.

When she got reports some months later from both of these mothers that their children's attitudes behaviors had dramatically improved, Dr. Diaz began suggesting the technique for helping other children with puzzling or persistent problems. Over time, she refined a 4-part "Sleep Talking Script" to guide parents:

- Statement of love
- Statement of the problem
- Interpretation / proposal for a solution
- Statement of love & commitment (closing statement)

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## 7-Step Guide to Sleep Talking

**Step 1 Be a Contemplative Detective** -- This is where you tap into your unique, powerful, parent intuition to sense what you might “sleep talk” about with your child. I have found with many parents in my practice that reconsidering upsetting or stressful things that happened to their child during infancy, birth, or even pregnancy or as far back as conception can be avenues for understanding puzzling behavior or developmental issues. Very often a child's behavior is his or her (unconscious) way of remembering *This is what happened to me...* or expressing *This is how I really feel about the situation of...* When you can look through your child's eyes at his or her past... letting go of any guilt or blame... and simply “feeling your way into” what it might have felt like for certain things to happen... you can uncover big clues to troubling, “stuck” behaviors. Simply recognizing and acknowledging your child's experience within your own heart and mind is the first -- and sometimes the most powerful -- step in helping him or her to release them. The insights you get here serve as key points to be addressed through sleep talking. ***In this step you thoughtfully and intuitively zero in on what events or experiences may have planted seeds for the issues you're seeing expressed by your child.***

**Step 2 Choose Your Words** -- Prepare at least an outline of the main points you will touch upon in each of the four parts of the sleep talking session. (See below for an example 4-part “script” from a parent in my practice.) ***In this step, decide what you'll cover in your sleep talking session.***

**Step 3 Become Comfortable with Your Words** -- Sit with the material you plan to discuss with your child long enough to process out any “emotional overload.” As I learned from the brilliant psychiatrist Myriam Szejer, who works with babies in a Parisian neonatal intensive care unit – effecting miraculous healings by simply speaking their (usually difficult) prenatal or birth stories to them – it is more effective when we can speak with words that are straightforward and unclouded by too much sentiment or emotionality. If the material you're discussing is emotionally triggering for you, it may be necessary to envision your sleep talking session as vividly as you can, like a rehearsal... perhaps even talking through the material out loud, imagining you are with your child... several times before you can move through the sleep talking with your child while remaining centered. ***In this step you become comfortable and centered with the material before bringing it to your child.***

(Dr. Diaz' four elements are Steps 4 through 7 of my adapted protocol; I am including comments from her to help further illustrate each of the 4 parts. Following Step 7 I include an actual entire script from a parent I worked with.)

**Step 4 Statement of Love** -- Just share your heart's love for your child. You may include actual events that illustrate your delight in your child (*Your baby giggle could make me happier than anything else... or Your grandpa is so proud of you... or ...I remember how funny you were even when you were barely even talking... etc.*) ***This step is simply your heartfelt expression of love for your child, which you can also extend to include how loved he / she is by the child's father or other close loved ones.***

Dr. Diaz: "As an example, I would have a mother tell her daughter, as part of number 1, that she is much loved by both parents and by the rest of her family. The mother could include such things as her pleasure upon seeing the baby for the first time, special things the child did as a baby or when she was growing up and how proud her parents have been of her. She can modify this and talk of other things during the next 'sessions.'

**Step 5 Statement of the Problem** -- Describe in clear, straight-forward terms the situation that is concerning you; examples are helpful. It should be in your simple words and may include how you feel (*I am worried about... I feel sad that...*) or what the reactions of people are (*They get angry at you... or It hurts their feelings when...*) ***In this step you state in simple terms the child's troublesome behavior.***

Dr. Diaz: "For the second portion, I usually have them start with 'I have been worried about your recent change in behavior...' or 'I don't know why you are so fearful, or angry, or moody...'. The parent can say things like, 'We feel such pain when we see you like this, or 'People are upset to see you doing that'. Details can be included.

**Step 6 Interpretation / Proposal of a Solution** -- Express in clear, basic terms your hypothesis of why the problem exists (*We think maybe you feel scared because of what's going on with...*), distilled from your contemplative detective work in Step 1. You can also include a proposal of a solution you can help with (*Maybe you and I can have a secret signal you give me when you feel like you can't listen anymore...*) NOTE: In many cases just the process of shining light on the situation *will* be the solution (as in the example from my client further down), together with the clarity of your inner conviction that this help your child release the "stuck"

behavior -- which until now has been how your child was unconsciously expressing his / her feelings or memories. ***In this step you interpret the troubling behavior in light of the child's experiences or circumstances, possibly with a suggested collaborative solution.***

Dr. Diaz: "The third part should include the parent's explanation or understanding of why this behavior is manifesting. She can explain any current difficulties in the home or within the marriage: 'We know you are worried because of the problem your father and I have. We are sorry, but please understand that people do have problems they may not solve right away, so they fight and they create heartaches for everyone. This is our problem and we are working on it. Whatever happens, our love for you will not change, and we will try to make it easier for you. We are not perfect and we are learning from this. We are sorry that this is happening.' The parent may even explain some of the details, emphasizing that there is always a solution.

"Occasionally, I have the mother encourage an older child to 'tell Mom how you feel,' especially if the child is not willing to talk about it when awake. Of course, there can be many variations in this portion, and sometimes the mother will find herself crying.\* That's okay, too."

[\*As noted in Step 3, it is best to be able to remain emotionally centered. A few tears from you is authentic and fine, but getting overcome with emotion isn't so helpful in this process; it can shake a child's sense of security and safety.]

**Step 7 Reaffirmation of Your Love & Commitment** -- Another round of loving expression directly from your heart, together with a reminder that you are there to help, support, protect and love your child.

Dr. Diaz: "The final part is just a repetition of loving thoughts and the parent's reiteration of her commitment to helping her child grow up healthy and aware."

## **A Real-Life Example of Sleep Talking**

*James, you are our precious boy and we love you so much... and we're so proud and happy to be your parents... and that you came to be our son.*

*We notice that you're sometimes very dreamy and you're not quite present with us... like you're up flying in the clouds. Sometimes what happens is that we get impatient or frustrated trying to reach you, when you seem like you aren't listening... and then that creates a separation between us. We would like to*

*bring you back to earth, and help you really be here, and feel comfortable with us here.*

*When you first came to us, we hadn't expected you, and so we were surprised. We were really happy you were coming, but we realized we had to make a lot of changes to get ready for you... and so there was some chaos and crazy times and some really hard work we had to do. So we're thinking that might have made you feel unsure about whether or not you really belonged here with us. Maybe you got the idea that if you really came to us it would cause too much trouble.*

*We want you to know that we're so happy you're here, and all the changes we made in preparing the way for you were wonderful changes. You've enriched our lives so much, and we love you and want you to be fully here with us, all the way, with your entire being. We look forward to all our happy years with you, all of us growing together.*

Dr. Diaz suggests limiting sleep talking sessions to five or ten minutes. She has found that the best time for a session seems to be in the early morning, before the child wakes up (which is a deep sleep). Sessions can be done with children who are just dropping off to sleep and this seems to also work, but in her experience morning sessions work most dramatically.

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