

How to Prep for Sleep Coaching Success: Steps to Take before You Start

1. Get the green light from your child's doctor.

Most sleep problems are behavioral, but you should still have your pediatrician rule out any underlying medical conditions that may be contributing to your child's sleep issues, such as reflux, asthma, allergies, ear infections, or sleep apnea. Make sure medications, including over-the-counter remedies, aren't disturbing her sleep.

If you're still feeding your baby during the night, ask her doctor if, given your child's age, weight, and general health, she still *needs* wee-hour nourishment. Review with your pediatrician how much your child is eating during her waking hours.

SLEEP-TIGHT TIP



Consistency is truly the key to parenting and especially sleep training success.

2. Keep a sleep-and-feeding log.

Chances are, your short-term memory isn't quite up to par as a result of sleep deprivation: Your days and nights are going by in a blur. But in order to figure out how to solve your child's sleep problem, you'll need to have a clear picture of what's happening at bedtime and during the night, what's working, what's not, how your baby is responding, etc. Keep track by writing it all down for a few days or a week. Having a record in writing, instead of relying on scrambled mental notes in your sleep-deprived brain, will give you a more accurate picture of your child's patterns and your own responses.

Some parents find it easiest to keep a log for scribbling on right next to their child's bed. Look for signs of his natural bedtime window. Jot down when and how often he wakes up during the night. Note what you did to get him back to sleep, whether you rocked him, nursed him, sang to him, or brought him into your bed. Compare your child's daily schedule with the typical schedules I suggest in Chapter 3.

Once you start my program, continue your log. Tracking your child's sleep patterns will help you figure out what's working, what's not, and what tactics you should tweak. At the end of this workbook is a sample log you can use. (Feel free to come up with your own format if you don't like mine.)

3. Figure out your child's ideal bedtime.

This is the period of time during which she'll show signs that she's ready to sleep—yawning, rubbing her eyes, twisting her hair, fussing. Often parents miss a child's sleepy cues—especially in the evening, because it's such a busy time of day. They may be cleaning up the dinner dishes, shuffling through the mail, helping an older child with homework, etc. Pay extra attention to how your child behaves between 6:00 p.m. and 8:00 p.m. (and make sure she's not zoning out in front of the television). As soon as she begins acting drowsy, you'll know that that's her natural bedtime—and the time at which you should be putting her down each evening going forward.

Although I usually recommend making bedtime adjustments gradually, 30 minutes or so at a time, sometimes with a child under 3 you can make the changes quickly if you learn to recognize her natural patterns. For instance, if your 20-month-old is used to going to bed at 10:00 p.m., but you can see that she's drowsy at 7:30 p.m., you don't need to spend days gradually adjusting. Just put her to bed at 7:30 p.m. and make sure you do so again the next night and the night after that.

If you have trouble picking up on your child's drowsy signals, you can pinpoint a reasonable bedtime for her simply by looking at when she normally wakes up and factoring in how much sleep she should be getting based on her age. (You'll find sleep averages on pages 15–26.) Let's say you have a 2-year-old who tends to wake up by 7:00 a.m. every morning. The average 2-year-old needs 11 hours of sleep at night, so that would mean that your child needs to have gone through her entire bedtime routine and be *sound asleep* by 8:00 p.m.

4. Create a relaxing bedtime routine.

All children, from newborns on up to school-age kids, need a set of comforting and predictable rituals to help them prepare physically and psychologically for sleep. These activities should be calm, quiet ones, like reading, story-telling, or lullabies; bedtime is not the time for tickling, wrestling, scary stories, or TV shows, or anything else that's stimulating. Because you're preparing your little one to be separated from you for the night, the tone should be serene and reassuring. For babies over 6 months old, I encourage attachment to a "lovey," a favorite stuffed animal or blanket that he can use to comfort himself when he wakes during the night. And with the exception of baths and tooth-brushing, the bedtime routine should take place in the child's nursery or bedroom

- **Install room-darkening shades** if your child's bedroom gets too much light, he wakes up very early, or has trouble napping; but leave a dim night-light on so that you can see him when you check on him. He'll probably sleep more soundly with that little bit of light too, although some children do better in total darkness.

- **Consider playing white noise or nature music** if your child's room isn't very soundproof and you have a barking dog, loud neighbors, older siblings, live on a busy street, etc. Children do learn to sleep through routine household sounds (and they should to a large extent), but some places are just really loud and some kids are really sensitive. White noise is a constant sound that helps to block out noise; you can buy a white noise machine, or try turning on a fan. I discourage using music to mask noise; kids can get too dependent on it—meaning they'll want someone to come in and restart their music every time they wake up.

SLEEP-TIGHT TIP



If your child hates some aspect of bedtime, get that part over with first.

For instance, if she can't stand having her teeth brushed, do it right after her bath, not after you've read two books and gotten her all snug and cozy.

Here are some activities that work well as part of a bedtime routine, depending on a child's age. Three from this list is plenty:

- bath
- put on pajamas
- brush teeth
- go potty
- massage
- swaddle
- read books
- sing a short song
- play a quiet game
- share three things about your day
- tell a story
- listen to music
- baby or toddler yoga
- small sippy cup of water with books
- bottle or nursing
- prayers, blessings, or sending kisses and love to others
- plenty of hugs and kisses

7. Decide about the pacifier.

Research shows that pacifier use during sleep time may reduce the risk of sudden infant death syndrome, or SIDS, among babies who are 6 months or younger. Medical advice on pacifiers has changed frequently over the years, and it may well change again. Please check with your doctor, and check in again as your baby gets a little older. If you're breastfeeding, wait four to six weeks until nursing is well established before you introduce the pacifier. Bottle-fed babies can start earlier.

Even if you use the pacifier when the baby sleeps, you may choose not to use it all the time when she's awake and fussy. You can reconsider how and when you want her to continue with the pacifier when she gets to be about 6 months old.

If your baby is over 6 months old and is using a pacifier, you may need to decide if it is a problem that needs addressing during sleep coaching.

Ask yourself the following:

- Can she grip and maneuver it into her mouth on her own (most babies can do this by 8 months old)?
- Are you making multiple trips to her crib to replug the pacifier?
- Have you spoken to your pediatrician about weaning your child off the pacifier?

Your choices:

- If you find yourself having to repeatedly replug your child's pacifier and your pediatrician has signed off on getting rid of it, then you will have to pick the big night. Unfortunately you can't really "wean" a child from the pacifier. It's either in the baby's mouth or it isn't. Pick the first night you will put your child to bed without it. You'll have to do some extra soothing for the first few nights. I give more details on stopping the pacifier in the age chapters of *Good Night, Sleep Tight*. Some children give it up by themselves.

8. Get your child used to waking up between 6:00 a.m. and 7:30 a.m.

This applies to babies over 5 months of age who are waking up at all different times, sometimes as late as 8:30 or 9:30 a.m., which then throws off the entire day and confuses their internal clocks. Start waking your baby by 7:30 a.m. about five days before you plan to start sleep coaching.

9. Make sure all of your child's caregivers are on board.

It's vital that your spouse, partner, nanny, and anyone else who frequently cares for your child understands each aspect of the sleep-training plan (and why it's important) and is willing to follow through. This is key to maintaining the consistency that's so vital to sleep suc-

cess. (See Nap Coaching on page 37 for what to do when you have a reluctant babysitter, and also how to work around your baby's schedule if he's in day care.)

SLEEP-TIGHT TIP



Once you pick a night to start sleep coaching, make sure your child gets a good nap (or naps) that day! You don't want to start my program with an overtired kid.

10. Pick a realistic start date.

Choose a block of time, ideally about three weeks, during which you don't expect any major disruptions or changes in your household, including trips, moving, or the arrival of a new baby. Some families decide to start sleep coaching during a summer or winter vacation so the grown-ups won't have to juggle sleep training with work. That's a good strategy, but be careful to keep your child's schedule consistent even if yours is not. For instance, don't introduce a nice, sensible 7:30 p.m. bedtime the very week you plan to let her stay up until 10:00 with the grandparents on Christmas Eve, or are going to have a horde of entertaining young cousins camping out in your backyard over the Fourth of July.