

The Trouble with Crying

by Sheyne Rowley

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Crying on settling to sleep and re settling back to sleep would easily be one of the most widely controversial, misunderstood and frightening areas of a child's day for a good proportion of parents around the world.

So what's going on? Why are we finding this once seemingly simple task of putting a baby to bed one that is growing into a nightmare of epidemic proportions for many a sleepless family?



This was to be explored when I was invited back onto the 7Sunrise program on Friday, 1st February 2008. Unfortunately, due to some significant technical difficulties through my particular segment, we ran short of time and are now relying heavily on this more detailed facts sheet to fill in some of the gaps. Sunrise is always keen to provide up to date and popular topics for parents, and even despite the complications experienced, over 18,000 new visitors came to The Australian Baby Whisperer's website in the first few hours following the live segment at 8.40am to find out more on the topic. After six years of working with the Sunrise team, I have to say that they would have to be the nicest bunch in the industry, and such a delight to work with. I love them all even more after our somewhat exciting, but a little frustrating segment on Friday for all their support, flowers and encouragement. Thank you!

Visit the website: www.australianbabywhisperer.com.au
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So what is going on? Why is there a crisis of epidemic proportions in this country?

I believe that there are many causes of the crisis, but the one that is most relevant, and as far as I am concerned is the ultimate end result of all the varied causes of the crisis is a growing fear or anxiety around a baby crying **at all** when it comes time for sleep.

In 1998 we were blessed to discover some of the causes of cot death, and thanks to the wonderful research of the SIDS foundation amongst others, were then able to alert parents about some of the potentially dangerous practices that could possibly pose a significant Sids risk factor in their child's environment. This research, thank God, has been responsible for saving over 5000 children's lives since the beginning of the campaign.

As a result we started putting our babies on their backs to sleep, and along with reducing the level of excessive warmth, increasing visual stimulation through the loss of bumpers and removing some of the natural sense of security and digestive relief that once came from lying on their tummies, we suddenly started seeing our babies feeling a lot more exposed, less settled, and far more over stimulated when it came to going to bed. This ultimately led to tears, and lots of them.

When this became an increasingly difficult situation for many families to deal with, many (predominantly health care professional with a broad diagnostic understanding or with the ability to provide symptomatic relief) started to use or recommend a strategy commonly known as 'control crying'. Some even went a step further to suggest strategies commonly known as

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‘uncontrolled crying’. It is also called ‘controlled comforting’ or ‘cry it out’.

This is where I believe the ‘bulk’ of our problems lie when understanding what is right and normal when teaching our precious little ones how to go sleep. Yes, ‘teaching’ them how to go to sleep. It is most definitely a learnt skill for many (but not all) babies these days because of the above stated challenges in the sleep environments we now need to provide to keep them safe.

While the premise of balancing the level of intervention you offer a child, to allow them at least some opportunity to try and develop some independent settling skills is an important one to consider, the control crying strategy and all its derivatives were sadly used and misused in isolation of any form of teaching, and absent of any understanding of the causes of crying in the first place. As a result, it failed to prepare or empower a child with the ability to cope with the very great task of going to sleep by themselves. This ultimately led to many tears and stress to both the baby and his parents when going through this kind of sleep training.

In addition, due the above mentioned failure to understand the mechanics of sleep and the causes of crying in children, the control crying strategy inherently came hand in hand with the very confusing and contradictory strategy of being your child’s full emotional solution through the day, perpetuating the cause of crying at sleep time. This is basically teaching your child that you will respond to their cries through the day in one way, and then respond to them at an entirely different way at night. In other words, because the reason for the crying at sleep time is predominantly caused by the daytime management of a child, even after a night full of tears and distress for a baby and his parents,

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any ‘learning’ (if you could call it that) would immediately be undone the following morning because you completely contradict anything you have taught them, and ultimately cause them enormous confusion.

A classic example of this would lie in the fact that control crying would suggest that to be successful you must teach a baby that when they cry, you don’t pick them up, and that you don’t go straight in to them, and that you will come in eventually but you will always leave them again, and finally that they have to go back to sleep when they wake up through a sleep session.

Yet, control crying does not address the fact that when they wake up at a reasonable time in the morning, despite everything you have spent hours trying to teach them through the night, you will walk straight in when they cry, and pick them up, and take them to their feeding chair, and feed and cuddle them, and play with them.

Can you see how to a baby, who does not know 10pm from 2am from 7am, you are being entirely inconsistent and confusing? One minute you say ‘don’t ask to be picked up because I wont pick you up when you cry’ yet the next moment you say ‘if you want to get up, cry out to me and I’ll come and pick you up and feed and cuddle you”.

Confusing huh! This is where control crying, and all it’s derivatives are entirely floored. This is just one of 50 examples I could rattle off. Even if you threw in a whole new routine, you are still not addressing the cause of the crying. Anyone who suggests control crying as a single strategy, or a new routine and controlled crying as a strategy, or worse still, ever suggests they will see you at 6pm to teach your little baby under 5 how to sleep does not

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understand sleep, and you should investigate their methodology thoroughly before employing them.

So while it has been established that it is important to allow a child an opportunity to learn how to go to sleep on their own, it is also clear that control crying as a single strategy is confusing, and therefore extremely difficult and stressful for a child to learn as a result.

Now I am not saying that we should not let a baby cry, and nor am I saying we should just let a baby cry, I am simply saying that we need to look for a balance by looking more closely at the reason for the crying in the first place, and then set about trying to repair that first, before we ask them to try and go to sleep on their own without excessive levels of our help.

This is where I believe the bulk of the problems with babies sleep actually lie in this country currently. Parents found controlled crying stressful, in many cases cruel, and in what I personally estimate to be a good 60% of cases, unsuccessful long term. As a direct result, parents began to move to the other extreme of thinking, avoiding all crying at sleep time, at all cost (literally).

We started to see the pendulum swing too far in the other direction where any crying when a baby was tired and going to sleep independently was considered cruel, and treated as though it was/is neglectful or unloving.

Ironically, this growing trend to be a child's complete emotional solution at sleep time has actually cause so many nights of crying, stress and discomfort for so many children and their entire families, and is even responsible for what appears to be a growing

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incidence of parents and/or children being in a position of risk due to an inability to cope with severe sleep deprivation and depression or anxiety.

This is because we have lost our balance. We are looking to a tiny and exhausted little baby for guidance on how they should best go to sleep, and their answer so far in a resounding “I don’t know mummy and daddy, can you show me.....please?”

I think it’s important that we recognise that ‘we can’t keep doing the same thing, and expect a different result’. If we want to see a change in this crisis, and developing pattern in Australia, we need to do something quite dramatically different, but, change is hard and I often see people cling to ineffective strategies and poor patterns simply because of the ‘fear’ of change. Is it any wonder then, when we adults find change a little tricky, that a new baby might find change a little tricky too. Is it therefore fair to expect them not to cry when they learn something new? Hmm, let’s explore this further.

So why is it so important that we teach our babies to self settle? Why can’t we just put them to sleep?

The answer is quite simple. Because an ‘avoid crying’ policy when initially teaching a baby how to go to sleep can actually be the reason that a baby will cry at night. This means that in a parent’s effort to avoid their baby from crying in the first place, they will actually be causing the incidence of crying through the night.

My theory on the subject subscribes to the thinking that “avoiding all crying’ when learning how to sleep independently is actually the problem, not the solution to sleep time difficulties.

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This is where it's important to note that there are only two ways that a baby (0 -5 years) can go to sleep. Either;

Via a Child governed associations to go to sleep = by themselves

Or

Via a Parent governed associations to go to sleep = by you doing it for them.

It is not possible for a child to learn how to go to sleep (from first three months) or sleep through the night (6mths plus) '**on their own**', if you stay in the room with them. The two just do not go together.

They are either taught that they can't go to sleep without you, or taught that it's normal to lie in their cot awake after you leave the room without stress or the need to call out for help, and therefore taught that they can go to sleep on their own peacefully.

It's then a choice as to how you would like to parent at sleep time. Would you like to teach them to rely on you, or rely on themselves? Both are effective, easy for a child and loving.

If you would like to co-sleep, and your entire family, baby and you are all sleeping well and are happy with the arrangement, then excellent. I always say 'don't fix what isn't broken'.

If on the other hand, you would like your little one to sleep in their own room (after the first few months), or they are not happy co-sleeping and you are all unsettled at night as a result, then you will

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need to set about arranging a plan where you are able to step back and allow them the opportunity to settle themselves.

There are no two ways around it. They either have to rely on your skills (patting, feeding, rocking etc), or rely on their own skills (playing with hair, thumb sucking, turning their head, humming etc).

N.B; Just because you like the idea of co sleeping does not mean that your child will find it enjoyable, easy or restful. Everything I do in my business is based on what is working best for the baby.

Most importantly, the reason that it is so vital that a baby learns how to self settle when put to bed is because from the age of 4-6 months, a baby will naturally stir between 10-11pm, at around 2am and again between 4-5am, and will expect and need to do the same thing they were doing when they initially fell sleep.

This is because they have no concept of sleep or time lapsing. This means they only know the feeling of being 'tired' and what you have taught them to need when they feel that way...

N.B; Occasionally a baby can self settle, but still have parent governed associations with going **back to** sleep because their parents rush in too quickly at night and have taught them a 'different' set of conditions to go **back to** sleep than those taught to initially go **to sleep** at the beginning of a sleep session.

Armed with this kind of understanding, a parent can now start to look at the psychology of crying at sleep time.

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As a child has no concept of sleep or time lapsing, it is not surprising to hear that being the only way for your child to go to sleep, and therefore back to sleep will have more than one or two significant side effects and may not be the 'only loving and kind' strategy that many have been led to believe.

There are several common things that start to occur when strategies advocating 'avoiding all crying' are adopted, when a baby is learning to sleep.

*A child is taught that they should never be in their cot awake

How?

If a parent holds their baby in their arms, and when they finally fall asleep, transfers them into their cot and leaves the room, then when the baby wakes up, the parent takes them straight out of the cot again, they are clearly being taught that they should not be in that environment awake. This is also relevant for a baby who is patted, or assisted in any way off to sleep in the cot as well, the only difference being that they are taught to never be left alone when they are awake in their cot.

This leads to another side effect.

*They become fearful of the cot, and often cry when they see it.

Why?

Because the only association they have with the cot is one of confusion and stress as they realize their mum or dad has disappeared. This occurs because they have no concept of sleep or

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time lapsing. All they know is that they were being held, patted, fed etc by you and literally for them, in the blink of an eye you were gone and they were alone in that place again. This means tears, and parents run in and take them out immediately, almost confirming their concerned about the environment.

*They start to fight sleep.

I have so many families that say “Sheyney, my baby is just so exhausted, so tired, yet they fight and fight and fight and fight sleep, why? Why won’t they just relax and go to sleep?”

Why?

Because again, a child has no concept of time lapsing, or sleep, all they know is feeling tired. If you teach them that when they accept that feeling and relax, you might disappear, then they become anxious around the feeling of being tired and we often see our babies trying to fight sleep altogether, or, when they can’t fight sleep any longer, still trying to keep their eye on you, or keep you in a position where they will know if you are going to disappear (aka, holding hand through cot bars, insisting on lying on you, particularly over your head or right on top of your body, or insisting on wrapping arms around necks etc). This is a fearful baby, totally un-relaxed and not at peace with the sensation of tired because they are anxious that you might disappear again.

It’s important to note that being dishonest with a baby (even when it is unintentional), through sneaking off when they go to sleep can be more stressful long term than working through a few tears while learning a new way of self settling independently.

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Now that we have got a light grasp of the psychology of sleep, we should look at the Sunrise case study family.

Baby Lucas, 12 months old, needed his mother or father to feed him to go to sleep. This was his 'parent governed association' for the sensation of tired. He was now wise to his mummy and daddy's tricks and was now also fighting the sensation of tired, subsequently needing up to 2 or 3 full milk bottles before he would eventually fall asleep. He would then be transferred into his cot, only to wake 45 minutes later to find mum or dad gone and need them to repeat the process all over again. This would occur every 45 minutes until 11pm, before waking between 12-1am (hunger window ~ due to low iron intake in his case), at 2pm and between 4-5am each morning. He was then only sleeping two 45-minute sleeps a day.

He was vomiting regularly, and would often get angry as he was so tired, full of milk and unhappy, that a raspy cry (which is a classic angry cry) would make him cough and often vomit up all his milk. This would make him far more susceptible to vomiting at all other times of the day, as his gag reflex became super responsive.

I invited this poor sleep deprived mum and dad to fly to Sydney from Queensland to attend my exclusive half day workshops. Here I would teach them what they and seven other dramatically sleep deprived families needed to do to get their little ones sleeping...yes, all by themselves.

While I am great with my skills of teaching little ones to sleep, I believe it is extremely important to empower a parent with the ability to do it themselves also, and therefore regain their confidence as mums and dads. Not all my work is in-house care. In

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fact, only extreme cases of sleep deprivation and disruption warrant in house care.

So Jodi and I spoke for two hours over the phone prior to her attending the workshop so I could get a clear picture of what was causing Lucas's sleep time stress.

In addition Jodi sent a detailed sleep diary record of 7 consecutive days.

How did we repair Lucas's sleep associations?

N.B: I work extremely closely with each family, and do not subscribe to a one-size fits all theory when it comes to sleep needs. I also needed to train Jodi for six hours, and write her a 100 page book to study after interviewing her for two hours and receiving a detail sleep diary. Please bear in mind when reading the following information that I am only outlining some parts of our solution vaguely, and not, by any stretch of the imagination providing enough information for everyone to magically repair their sleep. Some may find relief just based on this, but if your child is suffering a significant sleep disruption, this may still not be enough information, or may be the incorrect routine for you particular child.

Please note. The routine suggestion in this repair would never be recommended for a baby under 12 months of age. It is not an appropriate routine for all babies 12-18 months.

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I wish I could help you all with a single article, but, if it were that simple, I don't think my waiting list would be so long. Please note, I will not be able to answer everyone's questions via e-mails sadly. People successful in securing a consultation will have their questions answered, and will be assessed for further intervention. Sadly, I cannot get to everyone, but try my best.

So, lets look at what balanced strategies we implemented to help little Lucas finally find some peace at sleep time.

1) Routine:

Based on the diary it was established that Lucas needed to be placed on a single sleep of 2 hours at midday, and needed to sleep from 7pm to 6.30am, and no later.

Based on the diary we needed to increase Lucas's daytime solids and milk intake, particularly increasing his iron intake. A solid meal plan was established where he has milk at 7am, breakfast at 7.20am, morning tea of fruit and water at 9.30am until 9.45, lunch of meat and veg (pureed and spoon fed until his eating improved and vomiting settled) and dessert plus water at 11.20am, NO milk before lunch sleep, afternoon tea of milk and a substantial snack at 2.30pm until 3, and a vegetarian dinner with rice or pasta etc with no dessert at 5.20-6pm. He was then offered a final bottle before bed at 6.40pm. He was not allowed to eat outside these windows as they were crucial to the success of his settling without tears. Food and sleep goes hand in hand, and must be balanced. He was offered a LOT of water through the day, even encouraged when he was uninterested to improve his daytime fluid intake.

We established a new settling, re settling and waking routine and role played them with a teddy for 7 full days before we put him to

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bed to self settle for the first time. The role play was done 2-3 times a day until we started the program 7 days after the workshop. This enabled Lucas to become familiar with the sequence of the routine, almost creating a situation where it was like his favourite nursery rhyme or book because it was so predictable. This would help him recognise the new conditions, help him enjoy and relax with them, and give him an opportunity to feel in control of the situation because he could predict it.

2) Environment;

Lucas had no sleep skills; he was very much like a new born when it came to his environmental needs when going to sleep, strongly indicated by his desire to be held at all time. There is nothing wrong with that other than the fact that this need was too hard for his parents to maintain and was actually making him extremely unsettled through the day and night, so we decided to baby him a little and transfer that sensation of being held into his cot. I call this a surrogate hug, and use it for about three weeks until he becomes really confident and settled with the talk of going to sleep without help. He was placed in a firm, no movement leg wrap ~ extra large (www.ashleyO.com), and a Safe-T-Sleep (www.safetsleep.com). He was then firmly tucked into place with a sheet only, and the sheet was locked into place with towel rolls down the side of the cot.

We darkened his room for daytime, and made sure we were quite and didn't disturb him for the first three days.

3) Independence and confidence

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Lucas was given the opportunity three times a day to play in his cot awake for up to 20 minutes at a time, and mum and dad were taught to leave the room for intervals of up to 5 – 10 minutes using a short term absence cue 'I'll be back'. His parents were taught how to encourage him, and build his confidence through a positive presence and through being confident and not fearful.

This was also worked on through the day.

We developed a vomit management plan to help him should he start to feel angry, and taught him that the things that used to make him angry were now ok, and easy to cope with, and took the burden of him having to direct his parents through crying away from him. We did this through lots of clear pre-emptive language.

4) We worked on daytime communication, and Lucas got used to his mother asking him to do things like 'wait!' in his highchair and play for ten minutes before she got him up (even if he got impatient and stroppy ~ and yes, of course toys are ok ~ wink ~ everyone asks), and to "wait!" on the change table without fighting after he was dressed and had his nappy change, without tantruming and insisting on getting up. We also taught Lucas that we don't always pick him up when he demands it during the day and that he is ok when that occurs, and that entertaining himself through the morning at home, while mummy or daddy did chores was normal and expected. We didn't fix everything for him, such as we let him get frustrated when his toy car got stuck, or when he wasn't allowed to open a drawer in the kitchen. This helped Lucas learn how to accept the conditions he would encounter at sleep time when his mummy or daddy would ask him to lie down and wait. It also gave Lucas the opportunity to experience and become comfortable with a normal range of feelings and emotions, rather

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than learn that he should always have someone make everything better, no matter how minor the issue was (aka bored, demanding, frustrated, and impatient).

5) Managing the new independent settling routine;

I taught his parents about the cries, and which are communication and need some space and patience, and which are emotional based and need assistance because he might be feeling overwhelmed like when he is feeling angry, upset or in rare cases, if he were to become distressed. I find most parents suggest every cry they hear is a distressed cry, and treat every single cry in the same way, essentially tuning out to what their child is trying to say, and just actively trying to stop them feeling or expressing altogether. This is never done with any intention other than love, but is often a poor start to communication.

I taught Lucas's parents about the 'The Sleep Bus' and how that impact sleep and night wakings. I taught them what windows of waking represented what imbalances through the day, and then I supported them for three days while we taught him how to sleep.

Now came the moment of truth. Putting him to bed awake, and asking him to go to sleep all by himself after mummy left the room.

His parents were informed that if they wanted to see less or next to no tears, their wrap had to be excellent, movement free and was NOT to come undone, and he needed to be firmly secured into his safe-t-sleep and tucked in so the sheets were firmly locked into place with towels, and that they were not to sound, act or give of even the slightest vibe of fear.

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Often parents need to be told to move away adult concepts of what the leg wrap or full body wrap would represent to them personally, or from deciding that because they, as adult wouldn't like it, that their child must feel the same way. This is not the case, particularly when you look at the results of correct wrapping which can dramatically reduce or even eliminates crying in under 12 month olds. This is proof of the level of comfort a swaddle will provide in an older baby. I only use strategies designed to prevent a child from feeling like they need to cry, so dismiss those concerns of 'my baby never liked wrapping' or 'he hasn't been wrapped for ages', or 'he likes to move around a lot in his sleep'. I often question how much your baby actually likes moving around in heir sleep by seeing if that is helping them sleep well. If it is not, we go back to the mind set of 'you can't keep doing the same thing, and expect a different result'.

Progress of Lucas through the program:

The first morning, before we started, he was not allowed any milk from 2am and mum was told to settle him any way she liked, so long as she didn't feed him. This would kick start his digestive system. He was to be woken by 6.30am no matter how difficult his night was and then we began the program without altering the time. We were no longer working on number of hours he is awake before he 'usually' needed a sleep, or on looking for tired signs. Tires signs are effective only in the first 3-4 months of age, and then become a redundant sign in a troublesome sleeper, since they are always tired, and tired and hunger signs are identical.

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He was very tired that first morning as he slept poorly without his milk, but we forged on, and at lunch, going to bed by himself for the very first time in his entire little life, 3 minutes of crying after mum left the room, and no need for us to attend.

That night, he went to sleep in less than 5 minutes, with no need for an attendance. He woke after 40 minutes, and took 40 minutes of on/off crying to go back to sleep with the need for several attendances, in the form of re settles by his mummy. He did however, put himself back to sleep for the first time in his life at the 40-minute mark and we were all very proud of him. He then proceeded to sleep through the night from 8.30pm until 6.30 am when we woke him for the first time in his little life.

The second night he slept through the night from 7pm to 6.30am. He had some brief 1 or 3 minute squawks through the night as he naturally stirred, realized the environment was the same, and drifted back off to sleep, but none that needed assistance. Again, this was a first, and we were all very proud of him.

The third night we had a 20 minute settle (where he cried on and off) at 7pm when he went to bed. We attended and used our re settling routine twice, then he self settled and slept through until 6.30 am when we woke him. Again, we were very proud, and his level of fuss and crying had reduced by hours, and his daily sleep intake had increased by an addition 5 hours in 24. Wonderful results for such a small amount of crying overall.

From that point on, he has gone to sleep with no tears, and slept for a minimum of 2 hours at each lunch sleep, and a minimum of 11 hours at night. He has started to eat him solid. He did not vomit at all during the program, even though this was common if his

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parents ever tried to get him to settle himself for more than a few minutes.

So, when it comes to a little bit of crying while they adjust to something quite new, it's ok, and nothing to be frightened of. Sometimes, you need to be fair and give them a little place and be patient with them so they can stop feeling so stressed about sleep in the long run.

If you are careful, and respectful, and fully cater for his needs, then this is a balanced and healthy approach with was absolutely in his best interests, as apposed to the old thinking of 'don't let him cry at all', because that was clearly not in his best interests and was intimately making him unsettled and unhappy, and leaving his entire family functioning on survival mode, rather than enjoying their times together in what I like to call 'living mode'.

It is so important that it is recognized that not all crying should be classed as 'controlled crying'.

There are some people who claim they do not do control crying, yet that is exactly what they are doing. The difference is, what preparation, what communication, what have they been taught, how do you empower the child on the program. If there is no teaching prior to the commencement of the program, or it is simply a new routine and control crying that is used, then it's just control crying. You just need to be wise about the help you employ.

Sadly, because of the use of imbalanced strategies like control crying, it is now 'thought' that any crying is 'control crying', which is obviously not the case.

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Lucas clearly benefited from being given the opportunity to do some crying when being taught how to go to sleep, as it gave him a chance to find a new way to sleep that required only him. He responded quickly because his needs were fully catered for and he was fully prepared and empowered, and his parents were confident and consistent.

I would always suggest that if you do not see dramatic results immediately, or at least see almost all your sleep time issues repaired in around 3 days, then you should stop any crying management as you have probably missed something important.

This is a perfect example how the old attitude of “I don’t want him to cry, therefore I will always help him go to sleep” was actually causing the crying, not preventing it, and the new attitude of ‘Once I know his needs are catered for I am going to step back a little and give him some space so he can find a new way on his own’ was actually the more kind, effective and beneficial thing for this little baby boy.

Lucas no longer feels fretful when he feels tired, he no longer fears the cot, he no longer fights going to sleep, and he no longer cries at sleep time like he did before he started the program. He is relaxed and smiles at his mummy when she tucks him in because he knows the routine, and feels comfortable with it.

Not only did he respond quickly, but he barely needed to cry at all while learning to sleep. This is because we were not frightened of it.

We approached it pragmatically, worked through it for a full week before we asked him to go to sleep on his own for the first time,

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got comfortable with his level of expression and gave him a chance to see that we were not fearful of him 'feeling'. This meant he became more comfortable and competent with his feelings, and started to understand which ones needed help, and which ones didn't. This helped him cope at sleep time.

Once the program began, if he did get upset, we always let him know we were there, but maintained our request that he try to go to sleep on his own. Once we made the request, we would never define the 'go to sleep' request to mean 'but if you cry I will get you up'.

In previous attempts to teach their baby how to sleep, Lucas's parents tried 'control crying' as a strategy. He cried and thrashed and vomited for hours at a time, and for weeks on end before they threw in the towel and went back to bottle feeding him to sleep.

This is so common. This is evidence that control crying is a vastly different strategy to a balanced and considerate sleep repair program such as Positive Routine Management.

Below is what Jodi wrote to other 7Sunrise viewer about the new program, and her new understanding of crying, and the importance of not being frightened of it when you want to learn how to free your baby and yourself from the binds of fear.

Hi everyone,

You're not alone. From 6 weeks on our beautiful little Lucas had trouble sleeping. I could never tell whether he was hungry or tired so I spent a lot of time breastfeeding him. I got caught in the cycle of feeding him, he'd fall asleep, I'd put him into his cot, he'd wake up, I'd feed him, and on it went.

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We tried rocking, patting and singing. We walked him around the backyard at all hours of the night. We tried 7 different shaped dummies. We tried a form of control crying which failed miserably – to the point where he then wouldn't sleep in his cot at all anymore. So I ended up sleeping with him on a mattress on the floor, or sitting up on the lounge chair with him asleep on my chest.

I started feeling miserable! Having a 2 year old at the time meant that catch-up sleeps during the day didn't happen, and I became so terribly overtired. I remember a couple of times, finally getting to bed and realizing the room was getting light as the sun was coming up. I started hearing people in the street leaving for work. It is so hard listening to others start their new day when you haven't even been to sleep yet!

When I weaned him, he started to fall asleep on the bottle and would stay asleep when we put him into his cot. Yay!! I knew in the back of my mind that it would become an issue one day, but I needed sleep! So I consciously decided to face that problem when it arose. Anyway, he'd probably grow out of it like everyone told me he would – hah!

So when he started finishing his bottle before he fell asleep, and I was spending 3 hours in total each day trying to get him to JUST GO TO SLEEP, I suddenly realized he didn't know HOW to go to sleep. He was so tired by 10, 11 and 12 o'clock at night that he would work himself into such a state he would vomit. And then, once he was finally asleep, there were always wakings during the night as well.

I was desperate and didn't know how to help my little guy. A relative of a friend had told me about the Australian Baby Whisperer, so in desperation late one night I got on her website and emailed Sheyne.

Before I knew it I was on my way from Gympie (2 hrs north of Brisbane) to Sydney to attend Sheyne's workshop.

I quickly learnt I had more 'issues' to deal with than just Lucas's sleeping. And it all made sense!!

I met 7 other beautiful couples whom I realized were doing it tough too – some a lot tougher than us.

I was scared to start with – scared to let myself believe that this would actually work. Because if it didn't, I knew I would be shattered.

Visit the website: www.australianbabywhisperer.com.au
Contact 'The Australian Baby Whisperer': sheyne@australianbabywhisperer.com.au

The Trouble with Crying

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But that feeling didn't last long. Sheyne's presence, her methodology, her optimism, her selfless desire to help others and how easy she was to talk to, meant that it wasn't long before I trusted her completely.

With a week's worth of preparation and 'homework' my little Lucas is now going to bed at 7.00pm and is putting himself to sleep. He's sleeping through to 6.30am and having a 2-hour sleep during the day. (Yes, he puts himself to sleep then too!) The detailed routine Sheyne put together for us includes Jasper, our 3 yr old, and is working just so amazingly well.

But the absolute best part is, when I'm doing my settling routine with Lucas, and he knows he's going to bed and I'm saying my cues to him – he smiles at me! He actually wants to go to sleep!!

I realize that he will probably challenge me as the weeks and months go on, but I don't feel scared anymore. I feel as though I am now equipped with the knowledge, attitude and support from Sheyne to be able to handle whatever future hurdles we may face.

I understand now that Lucas just needed someone to teach him that its ok to go to sleep – and I thank Sheyne from the very core of my heart for teaching me how to do that for my beautiful little guy and for my whole family.

Jodi Crick

It is now that I need to make quite a bold statement.

It's time to stop parenting from fear, or pride, and start looking at making choices based on love, and what is in a child's best interests. I am seeing a lot of fear mongering occurring....e-mail sent suggesting if a baby cries they will be ruined for life. I would like to suggest the contrary. We either teach them it's safe and ok to feel, or we tell them not to feel at all. At least nothing but happy. Can you do that? Is it fair to do that to our children when they are learning something new? Once they know the 'new' way of going to sleep, then they are happy all the time, but change is a challenge, and it's important to not teach our children that it is not safe.

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Not all strategies that involve a respectfully prepared for and managed crying while a baby gets used to a new set of conditions to go to sleep without you, can be called control crying, because they are not.

Crying is normal, and healthy, and a babies way of expressing a little concern or uncertainty when placed in an unfamiliar situation. They are saying ‘this is new, am I ok?’ so what is your answer?

Crying might happen, but it isn’t always a bad thing, even though unfair strategies like ‘control crying’ gave a babies only form of communication such a bad name.

You can’t get around crying if you want to teach a bay, toddler or pre schooler how to start going to sleep on their own. You will literally be putting off the inevitable, or making it worse.

It is very clear to me that avoiding crying, is one of the very real cause of the sleep crisis we are experiencing in this country.

If we subscribed to the theory that ‘all’ crying when learning how to go to sleep is unkind, and confusing like control crying is, our children would never learn how to breast feed, which often involved tears and frustration while they learn, they would never try something new, they would never learn how to sit in their pram, or to wait in their highchair, they would never eat more than three mouthfuls of food, or learn to drink from a cup, or eat off a spoon. They would never go beyond their first day at day care, or big school, and eventually would be under the impression that whenever they felt anything but happy, they need to be rescued from those feeling.

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That in itself is a very dangerous message to deliver as they grow.

I do not subscribe to that theory. I believe and acknowledge that it's tricky to be such emotional creatures, but that feeling all our different feelings and learning which feelings are safe to feel and which ones need support and help to work past is ABSOLUTELY vital to the long term emotional health of our children. This in my opinion is particularly important when they are teenagers, wanting to step away from our shields of protection, and embark on an independent journey into the big wide world.

When that does happen, what emotional coping tools have we equipped them with to deal with life and all that comes with it?

Have we told them that they shouldn't get upset ever, and as soon as things don't feel comfortable that it needs to be fixed immediately, or the feeling needs to be stopped.

Have we equipped them to feel a certain level of emotion, and then know they are ok, empowered with feelings of "that one feels a little uncomfortable but mum and dad taught me that this one is safe, will pass soon, and taught me to do "blah" to get through it'.

Everything we do now, works towards their ability to walk off into the big wide world, equipped to cope. Learning how to sleep in the first 5 years of their life is a healthy life skill that will change their future of education, career prospects and more. Keep searching for answers, and be patient as I do my best to get to as many people as possible.

The End

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I hope this has given you an understanding that based on this level of 'basic' information, it is often quite a complex task to work through a sleep time problem 'correctly and fairly' so please be patient, I am booked out several months on advance and try to get to as many people as I can, time permitting. If you have a significant sleep problem, to repair it correctly, it is often more than just a few simple questions, or a consultation. Please know that workshop numbers are limited, and a significant waiting list for future workshops has already developed.

Keep e-mailing, become active on the forums, and read as much as you can.

If you then feel that you are ready to move forward, then don't be frightened of your baby experiencing something new, and certainly, when they cry and ask if they are ok, don't answer them with anything other than a confident and consistent re settling routine that says, of course, it's just sleep, and you can do it. Be confident and patient, expect a few days of work, but a lifetime of reward as a result.

Always thoroughly examine any strategist's theories to make sure they cover more areas than just routine and crying management.

Warmest Regards

Sheyne Rowley
The Australian Baby Whisperer
Director/Owner
Australian Baby Whisperer

You will all be in my prayers and thoughts.