## Baby's bedtime troubles rest on Mom and Dad

SHERYL UBELACKER THE CANADIAN PRESS APRIL 8, 2008 AT 10:52 AM EDT

How parents deal with a baby who has trouble getting to sleep and staying in dreamland can affect the child's bedtime behaviour into the preschool years at least, a Canadian study suggests.

In a study of 987 Quebec children followed from age five months until six years old, researchers at the Université de Montréal found that babies with sleep problems - including difficulty getting to sleep, awakening in the night and getting less than 10 hours' shut-eye a night - were more likely to continue having poor sleep behaviour later in childhood.

But the study, published today in the Archives of Pediatrics and Adolescent Medicine, found that certain ways that parents coped with a sleep-disturbed child could ease or perpetuate the problem.

Co-author Tore Nielsen, director of the Dream and Nightmare Laboratory at Hôpital du Sacré-Coeur de Montréal, said soothing a baby with a bottle or food when he or she awakens in the night may be okay in the early months of life, but can perpetuate bad dreams once the child reaches 29 to 41 months.

"If the parents were still clinging to this habit that the parents brought with them from when the child was much younger - you know, giving the child a bottle or giving the child something to suck on or chew on - but doing this still at 40 months, the child is much more likely to have nightmares later at four years old," he said. "So it's a predictor."

However, taking a child out of bed briefly and providing physical and verbal comfort seemed to help ease poor sleep habits over time, Dr. Nielsen

"Maybe what's at play here is the child needs a stronger sense of attachment," he said. "And taking the child out of bed rather than saying: 'Oh, it's just a nightmare, don't worry about it, go back to sleep' - that kind of cold approach is maybe not as effective in reducing future nightmares as taking the child out of bed, providing that emotional comfort that comes with human contact, and then putting them back to bed."

Dr. Nielsen, a psychiatrist, believes bad dreams are a result of interpersonal difficulties. While fewer than 4 per cent of young children reported experiencing nightmares "all the time," he said, bad dreams were more common among kids from single-parent families and families with conflict in the home. The same was not true for fear of the dark and other anxieties.

To conduct the study, the researchers administered questionnaires to parents of the 987 children, who were five months old at the beginning of the study.

Each year until the children reached age 6, mothers or fathers answered questions about their child's sleeping habits and disturbances - such as bad dreams, inadequate sleep time and delays in falling asleep - psychological characteristics and sociodemographic factors.

Parents also reported on their own behaviour at children's bedtimes, including whether they lulled their children to sleep, laid them down awake or stayed with them until they fell asleep. They also detailed how they dealt with nighttime awakenings, including comforting children in bed, taking them out of bed, giving them food or bringing them to the parental bed.

Having a child sleep with a parent after nighttime awakening remained linked to kids taking more than 15 minutes to return to sleep, although a mother's presence at the beginning of sleep appeared protective against such delays, the authors wrote.

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