

The Cosiness of Co sleeping

Dr Sarah Buckley

You can contact Sarah at: sarahjbuckley(at)uqconnect.net

To email Sarah, change (at) to @

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Imagine this. Your baby is two weeks old, and you have finally settled her to sleep for the night in her cot, in the newly painted nursery next to your room. You are awakened from a short, but deep, sleep, by distressed crying, and you stagger out of bed. You turn on the lamp and pick up her up. She is red-faced and too loud for that time of the morning, and her crying has awoken your partner, who you can hear sighing loudly next door.

After a few minutes, you calm her and persuade her to breastfeed. After some time, just as you are about to nod off yourself, she falls off the breast contentedly. Slowly and carefully- you are more awake now, appreciating the delicacy of this manoeuvre- you slide her into the cot. Only two steps away from the door, and she whimpers. As you turn the door handle, she cries softly, and then increasingly loudly. Your partner, angel that he is, comes in bleary eyed and offers to walk the corridor with her, which he does for 15 minutes before putting her gently back in her cot.

"Welcome to parenthood", your friends say, but you can't accept that, or the bone-aching tiredness. Then one day, you discover that you can actually feed her lying down. The next day, as you feel her nestling up against you on the sofa, you begin to wonder if you could feed her like this in bed at night. Your partner is sceptical, and you don't tell anyone else. After a few nights, you realise that, if your baby starts the night with you, you don't actually need to get out of bed at all. Your partner is pleased to be hardly disturbed, because you attend to her before she cries, and you feel decidedly brighter in the morning too.

Congratulations. You have rediscovered co-sleeping.

For the millions of years of our human evolution, mothers have slept with their babies; it is what we are adapted for, physiologically, hormonally and emotionally. The warmth of our bodies, our vigilance even in deep sleep (actually, a breastfeeding, co-sleeping mother spends less time in deep sleep) the easy access to our breast and the synchronising of sleep cycles all provide an optimal night-time environment for our babies.

These benefits are confirmed by the elegant research done by James McKenna, Professor of Anthropology at University of Notre Dame, Indiana, US and his

colleagues, (McKenna, J., Mosko, S 1990) who invited 35 mother-baby pairs into a sleep research laboratory, and monitored overnight their sleep patterns as they slept together or in separate rooms. They found that, not only did co-sleeping pairs get into the same sleep cycles, but that babies who co-slept experienced more frequent “arousals”, triggered by the mother’s movements, and spent less time in deep sleep.

As a researcher in SIDS, Prof McKenna believes that these low-level arousals, which did not actually awaken either partner, give the baby practice in arousing itself, and may lessen a baby’s susceptibility to some forms of SIDS which are thought to be caused when a baby fails to arouse from deep sleep to re-establish breathing patterns. (McKenna, J., Bernshaw, N. 1995)

Professor McKenna speculates our young are not developmentally prepared to “sleep through” in a solitary bed, involving, as this does, long periods of deep sleep. (McKenna, J., Bernshaw, N. 1995)

Videos taken during the study showed that co-sleeping mothers, even in deep sleep, seemed aware of their baby’s position, and moved when necessary to avoid over-laying. At no time in the study did co-sleeping mothers impede the breathing of their babies, who had higher average oxygen levels than solitary sleepers.

Although there is no direct evidence to prove Professor McKenna’s theories, some of the lowest rates of SIDS are found amongst cultures where co-sleeping is predominant. (McKenna, J., Bernshaw, N. 1995)

In fact, on a world-wide basis, co-sleeping is very much the norm. (Small, 1998) Even in western cultures, bed sharing between mother and nursing baby (usually up to two) was standard practice up until around 150 years ago. Older children would co-sleep with siblings, with a member of the extended family or, for the upper classes, with a servant or nursemaid. (Thevenin, 1996)

The 1800s saw the rise of the child-rearing expert- usually male- who emphasised self-reliance from an early age, with strict guidelines for breastfeeding, toilet training and sleep. Newborns were expected to sleep with their mother, but they were to be removed to an unshared room before the age of one. (Thevenin, 1996)

With the industrial revolution in the late 1800s, the extended family began to splinter. Mother became solely responsible for the house and children, and the need for children who required little of her time became paramount. The rise of the germ theory, where the populace was warned not to breathe the air of another, led to a further emphasis on separate sleeping. (Thevenin, 1996)

Later this century, smaller and increasingly affluent families began to build houses with separate sleeping quarters so that each child could sleep alone. The myth arose that “cot-death” was caused by mothers over-laying and smothering their babies, which further frightened mothers away from co-sleeping. (Thevenin, 1996)

Thankfully, there has been a recent turn-around, and many parents feel more comfortable about sleeping with their babies. Books such as Tine Thevenin's classic, *The Family Bed* (Avery, 1993), have helped to dispel some of the myths around co-sleeping. The most stubborn concern, that of safety, has also been addressed, with recent western studies showing that co-sleeping does not increase SIDS risk unless co-sleeping parents smoke or use alcohol or drugs (National SIDS Council, 1997).

However, our soft western bedding may offer more hazards than that of other cultures. Co-sleeping parents need to ensure that their baby's face or head does not become covered by bedding (pillows or quilts can cause problems), that the baby cannot sink into an overly soft mattress -water beds are not recommended- and that the baby does not become entrapped, especially in a face-down position. (AAP 1997, National SIDS Council, 1997))

Co-sleeping is safe, satisfying and pleasurable; and its fun to wake up to a cute smile in the mornings. Co-sleeping does not guarantee a full nights sleep- in fact, in McKenna's studies, co-sleeping babies fed more often, (although the mothers usually underestimated this)- but, in my experience, waking several times from light sleep is less tiring than the panic and disruption of being woken from deep sleep.

Personally, I have also particularly enjoyed the nighttime intimacy with my second and third babies, for whom day times are shared with siblings. Perhaps I have also relaxed, and stopped counting the night wakings, knowing that it passes in its own time and that satisfying my baby's needs is an investment, which pays rich dividends.

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