

MoxieTopic: Sleep Regression Intensive

Ouch--sleep regressions. I called this “Sleep Regression Intensive” because it’s in-depth about sleep regressions, but also because sleep regressions themselves are so intense. They’re the quicksand of the first couple of years of parenting, in a really dark-night-of-the-soul/ existential crisis kind of way.

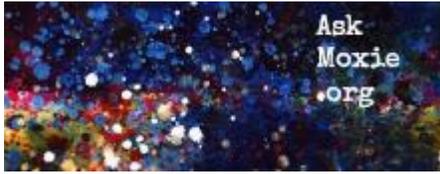
Just My Opinion: If you can survive the sleep regressions with a sense of your own competence intact, you can overcome all other parenting challenges.

Part of that, I think, is using the sleep regressions as a way to build your own knowledge of your kid and your relationship with your kid, as well as figuring out the tools and techniques that will work with your kid. If you can use the bleary-eyed, frustrated pre-dawn minutes to pay attention to your instincts and your kid’s signals, by the time you’re dealing with big kid (or adult kid) problems you’ll have built up the parenting muscles you need for parenting challenges in general and for that kid in particular.

Which brings me to the Your Mileage May Vary disclaimer: While these sleep regressions are common (and are the result of developmental changes that happen at consistent ages), it’s also normal for your child not to show the same symptoms listed here, not to have a regression at all, or to sleep so poorly in general that none of these regressions are noticeable. Babies are just little people, and people are all different from each other, and our bodies process things differently. So don’t be concerned if your child doesn’t adhere to the time map I’m laying out here.

What is a sleep regression anyway? A sleep regression is a period of time in which a person stops sleeping as well as they’ve been sleeping previously. We call it a “regression” because there’s this idea that babies improve their sleep progressively, and that as they grow older they start to sleep longer chunks and they fall asleep more easily. (They don’t. It’s two steps forward/one step back for most babies, and some babies are just a big scribble of non-progress, and some sleep in big chunks from the beginning. But we ignore all this evidence and continue the cultural belief that baby sleep improves steadily and consistently. It’s a trap. Anyway.) So a “regression” is a period in which a person is sleeping markedly less well than they were before.

I said “person,” not baby. I’m pretty convinced that we humans continue to go through developmental phases as we age past childhood, and that sleeping blips we attribute to other causes (like run-of-the-mill insomnia, changes in weather, stress) might actually be sleep regressions caused by brain development. I’m only mentioning this because I



want to emphasize that the underlying causes of sleep regressions are good. It means your baby (and later child and later adult child) is developing normally. The symptoms of the development are bad for you as the parent, because you're up with an awake baby. But the sleep regression itself is just a really annoying--possibly hope-killing--side effect of a normal, good process. It's the bitter in the sweet.

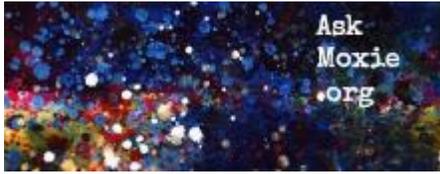
A sleep regression is your baby suddenly waking up four times when previously they'd only been waking up once in that same stretch. Or fighting going to sleep when previously they'd gone down (with whatever method) relatively easily. Or the naps are shorter or non-existent. Or all of those things. In short, your baby just can't seem to get to sleep, or to stay asleep, or both.

The reason for that is that your baby's brain is developing some new skill or ability, and that's keeping your baby so occupied that they just can't sleep. Have you ever been so worried or interested or excited about something that your brain was working overtime and you couldn't fall asleep? That's exactly what's happening to your kid. While their brain is working out this new thing they just can't relax enough to get into deeper, longer stretches of sleep. Once the new skill or ability is in place, your baby's brain isn't working on it anymore and they can fall asleep and stay asleep again.

Once the regression is over and they are back in the land of the sleeping, several things could happen. They could go back to sleeping exactly the way they did before, sleep for longer stretches or go down more easily, sleep for shorter stretches or go down less easily, or some weird combination of those. So it's important to be prepared for a switch at the end of the sleep regression, but not count on things being identical to the pattern before the regression started. (They'll probably sleep better than they did before, but I don't want to promise anything in case your child is the anomaly.)

If you would like a roadmap of when all the developmental leaps happen, get your hands on the book (or the smartphone app) *The Wonder Weeks* by Drs. Frans Plooij and Hetty van de Rijt. Plooij and van de Rijt are Dutch researchers who discovered that kids all seemed to have these same fussy periods at the same time and then the period would end when the kids developed a certain skill. They've mapped it all out so you can know what's going on when. I highly recommend this book, as they don't tell you what to do, but tell you what is happening and why.

Later I'll refer to the "disequilibrium phase," which is an idea and phrase that comes from the books by Louise Bates Ames and Frances Ilg, two researchers who wrote a series of books in the 1970s about normal child development. The books themselves have some expectations about family structure that are a bit dated now, but the insight



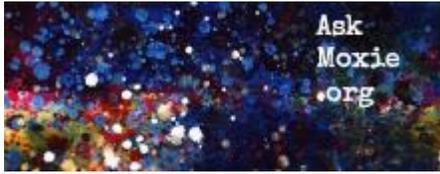
into what's normal kid behavior is still dead on and useful. My favorite is *Your Three-Year-Old: Friend or Enemy*, but I'd recommend getting the book for whatever age your child is at right now so you can see that your child is normal. "Disequilibrium" refers to the fact that right around the six month mark of every year, many children become unbalanced physically, developmentally, and emotionally, and this can cause sleep and other weirdnesses. Then toward the year mark they swing back toward equilibrium and fluency in all those areas again. Again, it's normal for your child to be off from those time marks, but you will probably notice the different phases, even if your child doesn't hit them right on the year and half-year.

Staying on the same team as your baby. Sometimes, at 3 am, it is easy to forget that your baby isn't doing this to you on purpose. But humans like to sleep, and babies like to sleep. So when your baby isn't sleeping it isn't a direct comment to you. If you can avoid taking it personally, everything will go more smoothly and you'll be tired but not tired and irate/resentful. (This is not to say that you can't come up with elaborate revenge fantasies involving calling your adult children at 3 am just to tell them you're too hot and would like a drink of water. Just file those away for later.)

But seeing yourself as being on the same team with your baby can help. As the half of the team with more wisdom and the ability to read, you're the one who's also on point for the problem-solving activities. Your baby is being a team player by developing brain skills and capabilities. (They don't seem like much of a contribution to the team right now, but when you're 80 and your child programs your DVR for you you'll see what a contribution the brain development part is.) So your contribution needs to be trying to streamline the process so the discomfort is minimized for everyone.

You are, of course, going to try all the stuff that has worked in the past to get your child to sleep and to stay asleep and to go back to sleep. If you're reading this while your baby is four months old, I apologize--you may not have found anything yet that works well for getting your child to sleep (and naps are probably still a crapshoot) because sleep is so unstable anyway. If you're reading this while your child is nine months or 13 months or 18 months, though, you probably have some tricks up your sleeve. You'll use them, and try some other things you've heard of but haven't tried before.

In no particular order, some things people do that work sometimes for some babies are: swaddling, rocking, breastfeeding, bottle-feeding, a pacifier, singing, snuggling, leaving the baby alone, letting the baby fuss/cry it down for 5-20 minutes, white noise machines, riding in the car, riding in the stroller, baby swing, bouncy seat, sling or other body carrier, giving a different adult a try, sleeping next to the baby, a lovey or comfort



object of any variety, the song “Livin’ La Vida Loca,” and any number of other ideas. Some of them might work.

But often, in the middle of a sleep regression, there simply isn’t anything you can do to help your baby to sleep more. You try everything you can think of and strike out every time. At that point your problem-solving skills should shift to how to get you (and any other adults in the house) as much sleep as possible. There are all sorts of ways to do this if you’re willing to detach from ideas of what Should Be Happening temporarily. Most of them require having another adult in the house sometimes, though, so if you’re by yourself, you might have to recruit a friend to help you or find a babysitter if you can.

It seems to be a truth universally acknowledged that four hours in a row (plus some extra in shorter chunks) is the amount of sleep that is required for an adult to be functional (and by “functional” I mean “not walking into walls and able to perform daily tasks,” not “ready for a 12-hour shift with air traffic control”). So your goal should be to get each adult in the house at least one four-hour stretch of uninterrupted sleep each night, plus some other chunks, on average.

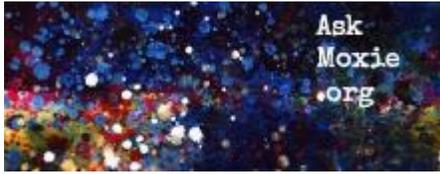
The three most common ways to do this are:

Split the night into shifts, so one adult is solely in charge of the baby until a pre-established time (such as 1 or 2 am), and then the other adult is in charge from that time until morning. This means that one adult goes to sleep at least four hours before the switching time and sleeps, while the other adult is in charge of the baby and any and all wake-ups during that time. Then, the adult that was in charge goes to sleep, and the first adult deals alone with any and all wake-ups that occur after the switching time.

Co-sleep with the baby, so when the baby wakes you can settle them more easily and not have to get out of bed to get them. If you’re breastfeeding, you may be able to nurse the baby back to sleep without having to wake up fully yourself.

Alternate nights, so one adult takes all wake-ups for an entire night, while the other adult sleeps through the whole night. Then the next night you switch. This seems to go more smoothly if you have an extra room the off-duty adult can sleep in.

One or some combo of these ideas may work for you, or they may spark an idea in your brain that will work better for your particular situation. Remember that sleep regressions usually last a few weeks, so it’s worth it to rearrange things to get everyone the bare minimum of sleep during that time, but they don’t last forever so it isn’t going to be the new normal.



You can do it.

(Just thought that needed to be said.)

This is not the new normal. This is temporary. And it's something to be managed, or fought, or survived, whatever imagery helps you get through it. You can do it.

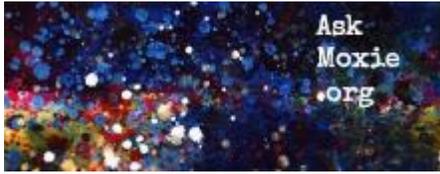
And now, the regressions. Bear in mind that these should be counted as if your child had a 40-week gestation. If your child was early or late by more than a week or so you should adjust forward or backward accordingly. Here they are:

Four months: It has probably taken the full first twelve weeks of your baby's life to get into anything resembling a sleep routine, and then it all goes haywire at four months. This is the buildup to the developmental leap at 19 weeks (see the Wonder Weeks book or app for all the details on what happens during this leap) and usually lasts 2-3 weeks. Which can feel like eternity, since you probably only had a few weeks of more organized sleep before the regression started, if you had any at all. It is common to feel hopeless and fried at this point, and wondering why you wanted a baby anyway.

It is also common that naps at this age haven't consolidated (many babies do either 20-minute or 45-minute naps until they're five or five-and-a-half months old), so you are dealing with a waking baby around the clock during this regression. Your baby is probably extra-clingy and agitated. It's awful, but it doesn't mean that there's anything wrong with your baby or that you've done anything wrong--it just means that you're dealing with some strong effects from your baby's preparation to make a developmental leap. Keep your focus on trying to get as much sleep as you can by balancing with other adults in the house, so that you can hang on until the regression is over.

(Six months): This is not a classic sleep regression, but as part of the six-month disequilibrium some babies have sleep disturbances, and there's a developmental leap at 26 weeks that seems to affect some babies (info in the Wonder Weeks). This can range from waking to nap issues to needing to sleep in a different location than previously. On the other hand, some babies who have been troubled sleepers up to now seem to click in and start sleeping more easily and more soundly at this phase. Be prepared for change, and remember that what's happening now will be different in a month.

Eight/nine months: This sleep regression can be brutal for some kids (and their parents), but for others just seems to be a long period of unsettled sleep but nothing particularly serious. The nine-month sleep regression (which can start at eight months) is part of one long stretch of fast and furious developmental action that straddles the 37 week developmental leap and the 46 week leap (both of which you can read about in the



Wonder Weeks), plus increased movement (many kids start crawling and/or walking in this window) and often some teething. Roll that all up together and what you get is a lot of trying to sleep but not so much actual sleeping.

This can crush your soul as a parent. You've been doing this for eight or nine months and you've not just gotten it together but actually mastered some things, and then suddenly your kid isn't sleeping and you can't figure it out. And there are too many factors to point to just one thing you could change. So it starts to feel like you've done something horribly wrong. (And there are plenty of people IRL and on the internet who are happy to tell you exactly what you've done wrong.)

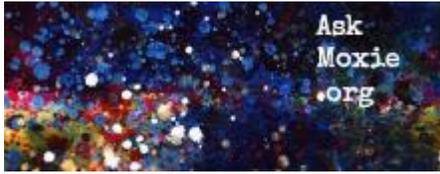
You haven't done anything wrong. You're doing a great job. The fact that your kid isn't sleeping now means that your kid is developing and learning and growing. It will pass, not as quickly as you want it to. But it will pass, and you'll know again what a good parent you are. Ten months can be very rough, and very filled with self-doubt, because you've been through so much not-sleeping time and it may not be completely over. This is so common; you're not the only one; and it will get better.

While the sleep regression is continuing, however, remember that you can't control your child's sleep, so your best hope is to manage your own sleep. It's time for an All Hands On Deck conversation with all the adults in your household to decide how to divide things up so everyone gets as much sleep as possible and no one adult is taking the biggest hit. If you have any extended support network (either paid or unpaid), now is the time to call them in for some babysitting involving taking your child out of the house so you can spend the time sleeping.

You will make it through, but this sleep regression can do a number on your emotions and your self-esteem.

13 months: A mini-regression that lasts a couple of weeks leading up to the 55 week developmental leap. It's usually just enough to make you wonder what on earth is going on and annoy you for a week or two, or trigger some PTSD from the nine month regression.

18 months: This regression is exacerbated by the six-month disequilibrium phase, so it can last for much longer than the other regressions do, and be more intense. Toddlers start going through a very intense period of wanting to do things themselves starting around 15 months and lasting until 21 months, and all of this time period is fair game for sleep disturbances, both for naps and nighttime. There's a developmental leap at 75 weeks (more info in the Wonder Weeks book/app) that can cause bad sleep and



crankiness for weeks. Add to that the shift in energy that children have when they start walking and running in earnest, plus all the language development that's happening in their heads but that they can't usually express verbally, and the main characteristic of this age is frustration.

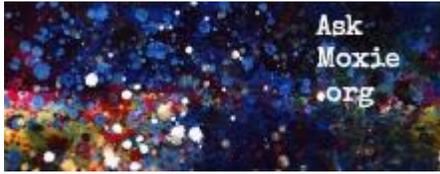
And you will probably be frustrated with this sleep regression. You know your kid can sleep, and you've been getting your child to sleep successfully for over a year, and your child has probably slept through the night at least sometimes, so this sudden inability to get or stay asleep is like a slap in the face. It's insulting, and it's frustrating, and it can be hard to remember that this is all part of normal development.

Frustration, though, is easier than the despair of four months and the disillusionment of nine months. You can make it through this stage. Keep your eyes on the prize of managing your own sleep as much as possible, and focusing on the positive development that's happening, even though it has negative symptoms. You will never again have to deal with the combination of this much frustration and willfulness along with the inability to have a conversation about it with your child. Every other stage will include at least some ability for your child to verbalize their feelings and for you to help them talk it out, so it won't be this level of impotent frustration.

24-27 months: Turning two is a big deal, and along with it comes a huge separation anxiety phase that can also cause a sleep regression. The sleep regression may feel like just a symptom because your child could be so clingy and weepy during the day that you don't even have the energy to care about the night waking. Keep breathing, and know that it will pass. The separation anxiety means that your child is learning more about being a separate person, so it's more good development. Just tiresome good development.

(30 months aka two and a half years): Another six-month disequilibrium phase that can cause sleep disturbances, but not an intense regression. Again, daytime will probably be rougher than nighttime, and naps might be more disturbed than nighttime sleep is.

(Three years): Some kids can have big problems going to bed at night at the age of three, but this is not strictly a sleep regression. Once they do fall asleep they usually stay asleep, and sometimes falling asleep isn't even the problem. But getting into bed and staying in bed seems to be very difficult for some kids at this age, and bedtime can stretch out and be frustrating for parents. It seems to be a behavioral stage more than a developmental stage. If it's happening with your child, know that it's very common behavior at this age.



(Three and a half years): If you're reading this and your child is 3 ½ years old, my apologies. This is a tough, tough age in a lot of ways. This specific six-month disequilibrium stage seems to be the most difficult one, and it can overlay any lingering problems going to bed at night, so things can just seem very chaotic and like nothing you try works. This will end.

Do what you can do to maintain your sanity at to preserve the relationship with your child. At this age your child may not even process rules and expectations--it's as if the parts of their brains that process rules and boundaries are scrambled-- so you may need to let some things go and pick them up in a few months when your child's brain is fully present again. Focus on the things that maintain the emotional relationship between you--talking, cuddling, not allowing your child to hurt you, modeling kindness, anything relational--and don't have expectations for the rules and external things until your child comes out of this stage.

Be protective of your own sleep, even if that means you relax some sleeping rules for your child for a few weeks or months. (There's a reason there are more preschoolers sleeping in their parents' beds than babies sleeping in their parents' beds.) And yes, this stage will pass, too, no matter what you do to survive it.

After this age any sleep regressions related to development are masked by the fact that not all kids call for parents if they wake up in the middle of the night, so parents may not be aware if a child is waking more often in the night for a bit. This new independence can be a little bittersweet in general for parents, but is fantastic when it allows parents to get a full night of sleep. If you've made it this far you're made of steel, and all other parenting issues are surmountable.

Courage.