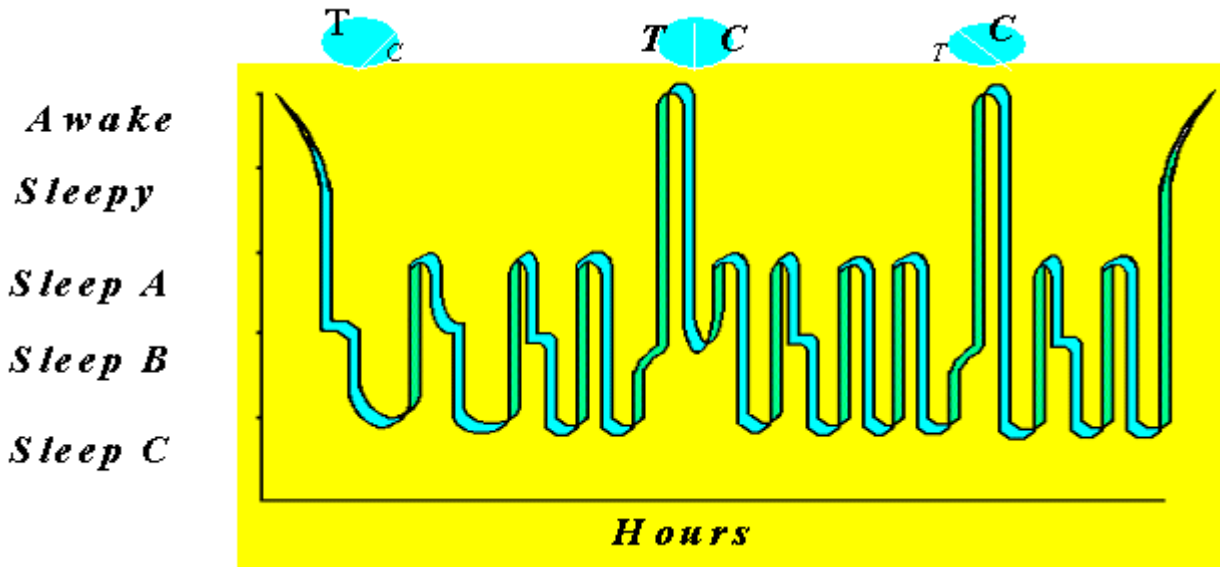


## Persistent waking



T = Tiredness. C = The cues of sleep achievement.

Background Information.

1. A block of sleep contains multiple sleep cycles.
2. Sleep achievement is in part cue dependent.
3. Cues of sleep are learned, can be changed and then relearned.
4. Sleep achievement is usefully regarded as a learned skill. B
5. Fatigue interferes with the learned skill of sleep achievement. B
  - (Avoid allowing the child to become over tired.)
6. Cues of sleep achievement which are parent independent are the most successful for family life.
  - (Avoid sleep transitions which involve parental assistance. Allow a child to achieve sleep alone.)
  - 'Crying down' to sleep will not harm the child.

Assessment. \_\_\_\_\_

Goals of the Management Plan.

1. Longest night sleep (which will/may/will not include feeding or contact) should be \_\_\_\_ hours.
2. Total sleep per day (daylight hours) should be \_\_\_\_ to \_\_\_\_ hours.
3. Total sleep per twenty four hours should be \_\_\_\_ to \_\_\_\_ hours.

Further knowledge about persistent waking

1. Intermittent reward is the single most powerful training strategy for behaviour patterns in creatures of intelligence (our babies). Note the comparison with the potentially addictive behaviour of poker machines.
2. Parents reward status. In the child's emotional world the parents are the single most important rewards. Parents are more important than food, drink or sleep. Even mum cross is a reward compared to no contact.
3. Note that once a reward object (you) can be obtained by a certain behaviour pattern e.g. crying, this pattern of behaviour is stable and will continue for the foreseeable future as there is no force working in the opposite direction to encourage unbroken sleep.
4. So what to do?

Action plan

Bedtime. 6.30 pm. to 7.30 pm. (This will be later for older children)

Routine. Remember that sleep achievement is a learned skill.

Handling.

- No contact. The simplest summary here is that the child has one chance per night for an open door and once this 'privilege' is used the door is shut and stays shut until dawn. (Please check on the infant or child once they are asleep to make sure they are safe.)

Phases of Success

1. Protest (logical).

2. Rapid improvement (usually within the first week).

3. Negotiation (An attempt to go back to the previous position. The response is NO RESPONSE until sleep is achieved.)

Consistency

A consistent approach is VITAL to success.

An inconsistent approach teaches persistent crying behaviour. For example, attending to the child on the third night teaches that it is worth crying for three nights.

Review 1 2 3 4 weeks or not planned (circle one)

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Support services for families.

- Telephone support. If in trouble you may call the surgery for further guidance. (please note that there may on occasion be a fee for a telephone consult)

- Copies of all support sheets are available at <http://silentnights.org> (no charge)

- 'Silent Nights' is sold as a book published by Oxford University Press

- DVDs & CDs are available by internet order from <http://silentnights.org>

[www.silentnights.org](http://www.silentnights.org) with Dr Brian Symon