

Helping children fall asleep

A QUARTERLY NEWSLETTER FOR PARENTS EVERYWHERE

You've probably seen the TV commercial in which a dad tries to lull his toddler to sleep at 4:00 a.m. with a drive in a Buick, and next morning Mom finds them both asleep over breakfast.

The commercial captures a true, if poignant, concern of many parents: How to get a toddler to sleep?

Some parents have found unique solutions: "I play Marty Robbins singing 'El Paso,'" says Stephanie. "It works every time."

Other parents have sought advice from friends, relatives, and doctors, sometimes in vain.

"I asked my pediatrician, and he said to just let him cry," Terry says. "I tried that for a while, but it was too painful for me. So I'd go in and hum a lullaby and hold his hand. He gradually grew out of it. But I still feel guilty about letting him cry it out at first, as the doctor said."

The issue is especially frustrating for parents whose child went to sleep easily as a baby but now screams at being left alone.

What's happening?

Around age 2, children are learning to be more independent. With independence comes the knowledge that the world can be a scary place. Fears—fear of the dark, fear of scary noises, fear of unseen dangers, fear of being left alone, and fear of separation from significant loved ones—can create anxiety. Scolding the child or making fun of him won't help. It's better to listen and empathize.

Sleep problems can occur in older children who have had upsetting or stressful experiences—the family has moved, parents have separated, a loved one has died, they have started a new preschool, or they've had to flee a storm or flood. Newly adopted children can be particularly prone to sleep issues.

But even children who have had no overt stressful

experiences can have trouble falling asleep.

Establish a routine

A bedtime routine helps a child move from a busy pace of daytime activities to settling down for the night. Getting enough sleep helps a child feel rested and ready to learn and reduces emotional and behavioral problems the next day.

Having a set routine and telling a child over and over that there's nothing to fear won't necessarily guarantee the child will fall asleep. Children need to experience something physical to build trust. The steps below suggest ways to set a soothing, sleep-inducing routine. If nothing else, they can help you feel like you have made the effort.

- **Establish a calming ritual.** This may include a nutritious and non-sugar snack, a soothing bath, tooth brushing, bedtime story, and dimmed light. Avoid watching a video or TV, rambunctious play, and bright lights. Adjust heating or air conditioning.



PHOTO BY SUSAN GAETZ

- **Remove distractions.** Scan the child's room for possible distractions. Put away the toy dinosaur or superhero. Invite the child to look under the bed and in the closet for reassurance that no monsters are lurking about.
- **Make the room quiet.** Any noise in other rooms or outside can keep the mind alert and make them worry about what they're missing. If you can't make it quiet, play calming music or sing a lullaby.
- **Anticipate needs.** Make sure all the child's needs and wants are met before you leave the room. "I'm thirsty" and "Need to go potty" are common ploys to pull Mom and Dad back into the room.
- **Tuck in the child with reassurance and affection.** The child may find it easier to fall asleep by holding a favorite blanket or stuffed toy. Whisper your love and offer a hug and kiss. Say that it's time for sleep, and you're leaving to get ready for bed.
- **Turn on a night light.** This can ease fear of the dark and help prevent scary imaginings.

Other strategies

If your child still cries, you can try more extensive strategies, such as those below. Expect each one to take two weeks or longer. Because your sleep is important, ask your spouse to help with other nighttime chores, such as cleaning up the kitchen and helping another child get to sleep.

- **Rock.** Hold the child in your lap facing you and rock in a rocking chair. This can be helpful not only for infants and toddlers but also for preschoolers and elementary school children.
- **Go back to check.** Tell your child to lie down and go to sleep. "I'll be back in two minutes to check on you." Continue checking at two-minute intervals. After a week or two, gradually lengthen the intervals and announce what the interval will be—three minutes, four minutes, and so forth. In time, you can ask: "Do you still want me to check on you, or can you go to sleep by yourself?"
- **Stay close.** Sit next to the bed and hold the child's hand. Deep rhythmic breathing indicates the child is sleeping. After a week or so, begin moving away from the bed by moving your chair closer and closer to the door.

What to do if....?

What if the child wakes up during the night and cries? Get up and return to him, using the same

strategy you used earlier in the evening, such as holding his hand or sitting by the bed.

What if the child comes into your room? Gently take him back to his own room and tuck him in. It's better to stay with the child in his own bed than to bring him into your bed. It's important for a child to learn that his own room is safe.

What if the child wakes up after a nightmare? Younger children have nightmares about imaginary monsters as their imagination and memory develop. Older children may have nightmares when they learn about realistic dangers such as burglars and natural disasters. Invite the child to tell you about what happened in the nightmare, and why it's unlikely to happen now. Invite the child to make up a new ending for the bad dream. Hold the child in your lap, and gently rub his forehead or feet.

What if the child wakes up during a storm? Lightning and thunder can be unnerving to everyone. Consider laying a bedroll on the floor by your bed where you can reach down and hold his hand until the storm passes. If everyone is awake, you can set up a tent and bedrolls in the living room. **Warning:** This technique can turn into so much fun that children will want to do it every night.

Helping children who have trouble falling asleep takes lots of patience. Older children might benefit from talking with you in the daytime about fears and learning how you coped with your own childhood fears. Express confidence that your child can overcome them too.

In the end, take comfort in knowing that your child will eventually grow out of it.

For more information, see "Children's and Bedtime Fears and Nightmares," National Sleep Foundation, <https://sleepfoundation.org/ask-the-expert/children-and-bedtime-fears-and-nightmares>. ■

Pregnant? Improve hygiene to prevent virus threat

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If you're pregnant or thinking about becoming pregnant soon, be aware that good hygiene can help protect your unborn child from getting cytomegalovirus, or CMV, which experts say poses a greater risk than the Zika virus.

CMV is a greater threat because it's more widely dispersed than Zika. According to the Centers for Disease Control and Prevention, one of every 150 babies is born with CMV. Of those, about one in five will be sick with the virus or develop long-term health problems. Once CMV is in the body, it stays for life and can reactivate.

CMV can infect almost anyone. More than half of adults by age 40 carry the virus. Pregnant women can pass CMV to their baby through the placenta. CMV typically spreads from person to person through body fluids such as saliva, urine, and tears. More controversial is the possibility that breast milk may be a mode of transmission for pre-term babies.

The most common health problem among babies born with CMV is hearing loss, which may be detected soon after birth or later in childhood. Babies can also have vision loss, intellectual disability, lack of coordination, and seizures. They may be born prematurely or even die.

Preventing infection requires thorough handwashing, especially after changing a child's diaper, as well as not touching your eyes or the inside of your nose and mouth, not sharing food, and avoiding mouth contact.

CMV can be diagnosed by a blood test in a person with symptoms. There is no vaccine for CMV, but doctors may prescribe antiviral drugs for babies.

For more information, talk with your doctor. Visit the website of the Centers for Disease Control at www.cdc.gov/cmV/overview.html. ■

Make your own to-go breakfasts

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For many families, getting a healthy breakfast is challenging. Everyone's in a hurry to get to work and school. You already lay out clothes and prepare backpacks for the next day, but nobody has time to sit down to eat.

Resist the urge to stop at a fast-food restaurant, where breakfast items are often fried in fat or saturated with sugar or high fructose corn syrup. With a little planning, you can make your own to-go breakfasts. Choose simple recipes, and invite your preschooler to help.

Plan at least five nutritious breakfast foods, a different one for each day of the week. For example:

1. Smoothies
2. Muffins
3. Egg cups
4. Tacos
5. Granola

Smoothies

Make a smoothie in a few minutes. Experiment with different juices and fruits. Add a handful of chopped carrots to make it extra healthy. Pour into a plastic cup with a straw to take with you.

Fruit: Blend a cup of unsweetened applesauce, a cup of low-fat milk, and one banana cut in chunks. Add a dash of cinnamon before blending.

Oat: Blend one instant oatmeal packet, one banana cut in chunks, one cup low-fat milk, and one cup apple or orange juice.

Muffins

Bake muffins one night or on a weekend. Store each muffin in a plastic bag and freeze. Warm in the microwave in the morning.

Preheat oven to 400 degrees Fahrenheit. Line a muffin tin with 12 paper muffin cups. Beat one egg in a mixing bowl, stir in $\frac{3}{4}$ cup low-fat milk and $\frac{1}{2}$ cup oil. Stir in 1 cup flour, 1 cup whole wheat flour,

$\frac{1}{2}$ cup packed brown sugar, and $\frac{1}{2}$ teaspoon salt until just moistened. If desired, add $\frac{1}{4}$ cup chopped nuts or raisins. Spoon into muffin cups about $\frac{3}{4}$ full. Bake 20 minutes.

Egg cups

Prepare egg cups one evening or on the weekend. Freeze until ready to use, then warm in the microwave.

In a mixing bowl blend eggs (one per person), and add your choice of ingredients. For example, chop vegetables such as cooked potato, cooked spinach, cooked broccoli, green pepper, onion, tomato, and mushrooms. Spoon the egg mixture into the muffin cups. Bake at 350 degrees for 20 minutes.

Tacos

Make the fillings the night before. Assemble tacos in the morning and give them a quick warmup in the microwave.

Scramble eggs or tofu, and combine with hash browns, chorizo, and low-fat cheese in a bowl. Refrigerate. Spoon filling into a 6-inch whole wheat tortilla. If desired, add a bit of salsa and cilantro.

Granola

Prepare granola one evening or weekend. Store child-sized servings in plastic bags. Children can eat granola and fruit (apple or banana) or yogurt on the way to school.

Mix 3 cups rolled oats, 3 tablespoons brown sugar, $\frac{1}{2}$ teaspoon cinnamon, and $\frac{1}{4}$ teaspoon salt in a large bowl. Combine $\frac{1}{2}$ cup honey, $\frac{1}{4}$ cup oil and 1 teaspoon vanilla in a measuring cup. Add liquid mixture to oat mixture. Spread in pan lined with parchment paper. Bake for 30 minutes, stirring occasionally, at 300 degrees Fahrenheit. Let cool. Add 1 cup of chopped pecans, dried fruit (raisins, apricots), and seeds (flax, sesame). Store in tight-fitting containers. ■