

## Helping parents understand infant sleep patterns

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Credit: AI-generated image (disclaimer)

Most parents are not surprised by the irregularity of a newborn infant's sleep patterns, but by six months or so many parents wonder if something is wrong with their baby or their sleeping arrangements if the baby is not sleeping through the night. Healthcare providers, specifically nurse practitioners, can help parents understand what "normal" sleep



patterns are for their child, according to researchers.

"Nurse practitioners are at the frontline of healthcare," said Robin Yaure, senior instructor of human development and family studies, Penn State Mont Alto. "They are in an ideal position to help <u>parents</u> understand infant <u>sleep pattern</u> norms. Thus, nurse practitioners can help parents understand that 'sleeping through the night' is not entirely likely in young infants and that infants' sleep patterns change during the first few years of life."

According to the researchers, there are four common areas of concern for both parents and practitioners: what constitutes "normal" infant sleep and waking patterns, whether night wakings are a problem or not, whether a parent's presence is disruptive while an infant is falling asleep, and whether sleep training is safe and healthy for infants. Sleep training is one way to establish a sleep routine for a child, although the methods used may not be appealing to parents or in the best interests of the child, the researchers said.

Yaure and colleagues reviewed current research on infant sleep, focusing on the above four areas of concern, and specifically on infant safety and the well being of both infant and mother during nighttime care. Based on what they found, the researchers suggest ways to integrate parental preferences and best practice information, and include conversation points for nurse practitioners in an article recently published online in the Journal of the American Association of Nurse Practitioners.

Infants' sleep patterns vary for at least the first three years of life. There are many reasons for this, including changes in infant health and mobility and the development of separation anxiety.

"Sharing this basic information with parents is one way of assuring parents that <u>infants</u>' waking does not necessarily mean that the parents



are doing something wrong," the researchers wrote.

Parental presence at bedtime, sleep training and infant self-settling are frequently debated topics about which parents might look to healthcare professionals for advice. Yaure and colleagues again point to the importance of sharing new information—for example, recent research suggests that the presence of parents at bedtime, specifically during the transition to sleep, may not trigger night wakings as had been previously thought.

Other recent findings show that nonresponsiveness of mothers during nighttime care sometimes in sleep training, can raise stress for both mom and baby. Elevated stress increases cortisol in the body, which may hurt the baby in the long run since increased cortisol levels are associated with depression, aggression and attention problems, among other issues, in children and adults.

"I worry about parents who feel like they can't trust their own instincts," said Yaure. "Different parents have different goals and ideas for parenting, and we want parents to figure out how to incorporate best practices into their belief system. We have to be culturally aware and sensitive to different families and beliefs."

By encouraging <u>nurse practitioners</u> to talk about current knowledge on infant nightwakings and parental presence, among other things, Yaure hopes that parents will become more comfortable and confident with their nighttime care choices.

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