

Sleep and settling for early childhood

Factsheet 11: Solutions to sleep concerns: babies 6–12 months



Summary

- If your baby's sleeping patterns are not having a negative impact on you or your family, then you do not have a sleep concern.
- From approximately six months of age, baby's sleep patterns gradually begin to become more like adults. They tend to sleep for longer periods at night as they no longer need to be fed as often.
- Parents are encouraged to be responsive to the needs of their baby. Responsive settling is recognising that your baby needs help and responding appropriately.
- There are some strategies that you can try to help settle your baby. Use a strategy that you feel comfortable with and suits your family's needs.

Sleep concerns and your baby

If your baby's sleeping patterns are not affecting you or your family and you have strategies that work, then you do not have a sleep concern. If your baby's sleeping patterns are having a negative impact on you or your family and this concerns you, then you have a sleep concern.

The following definition of 'severe night waking' provides a guide – however, you know your baby the best, and if something is a concern for you, you should seek help and advice from your local maternal and child health nurse, doctor or the Maternal and Child Health Line on Tel: 13 22 29.

Severe night waking is when your child does one or more of the following things five or more times a week for one to two weeks:

- consistently wakes more than three times a night
- consistently takes more than 30 minutes to settle
- stays awake for 20 minutes after waking
- goes into the parents' or caregivers' bed
- has difficulties with sleep and settling that is causing parents / caregivers significant distress.

If you have a sleep concern, you should talk to your maternal and child health nurse and your doctor to make sure there are no underlying health issues.

Looking after yourself

All babies cry and sometimes their crying may be difficult to soothe. If you need to take a break, place your baby in their cot or another safe place and take a break for a few minutes. Your self-care is important. To find out more about your self-care, download Factsheet 14: Selfcare for parents and caregivers from the [Better Health Channel](https://www.betterhealth.vic.gov.au/child-health) <<https://www.betterhealth.vic.gov.au/child-health>>.

If you have a sleep concern, you should talk to your maternal and child health nurse or your doctor to make sure there are no underlying health issues.

Strategies to help your baby sleep and settle

From approximately six months of age, babies' sleep patterns gradually begin to become more like adults. They tend to sleep for longer periods during the night as they do not need to be fed as often.

Every baby is different, and some babies may continue to wake overnight.

Parents are encouraged to be responsive to the needs of their baby. Responsive settling is recognising that your baby needs help and responding appropriately.

You can do this by knowing your baby's cues, tired signs (Factsheet 7 or 8: Preventing sleep concerns available on the [Better Health Channel](https://www.betterhealth.vic.gov.au/child-health) <<https://www.betterhealth.vic.gov.au/child-health>>) and the intensity of their cry. It is important that your baby knows you are emotionally and physically available if they become distressed.

Developing positive sleep environments and routines can also support your baby at bedtime.

Every baby and family is different and you need to use a strategy that you feel comfortable with and suits your baby and family.

Parental presence

Parental presence aims to use your presence as a way of helping your baby to self-settle.

Research shows this strategy is effective, but it may take longer than other strategies to reduce sleep concerns.

It is also more work for parents, as you need to stay in your baby's room for seven to 10 days whenever your baby is awake, so they know you are there.

However, you do not interact with your baby, the aim to break the link between baby's sleep behaviour and your attention.

How to use parental presence

- Decide on an appropriate bedtime.
- Start a positive bedtime routine, such as a warm bath and reading a book.
- Place your baby into their cot, preferably while still awake or drowsy.
- Gently pat your baby and say good night.
- Lie down on a bed or mattress in your baby's room with a night light on and pretend to sleep where your baby can see you.
- If your baby wakes during the night and is distressed, make slight noises or movement, such as coughing or turning over, so your baby knows you are there.
- If your baby becomes very distressed, soothe them with gentle words and by touching them – but try not to pick them up.
- After one to two minutes, lie down and pretend to sleep.
- Continue doing this every time your baby wakes and is distressed. Repeat the process for day sleeps and naps.
- Continue with the strategy for seven nights.
- After three nights in a row of minimal sleep disturbance, you can return to your own room.
- If your baby's sleep becomes disrupted again, you can re-introduce the strategy.

Camping out

Camping out is similar to the parental presence strategy. It may be useful if you don't want to sleep in your baby's room, but find it hard to leave your baby to cry even for a few minutes.

If you use this strategy, it may be one to three weeks until your baby can go to sleep by themselves.

How use camping out

You will be more successful if you plan ahead and take time to progress through each camping out step:

- Decide on an appropriate bedtime.
- Start a positive bedtime routine, such as a warm bath and reading.
- Place your baby in their cot, when they are tired, but still awake and say good night.

Try each of the following steps in order. Each step may take two to three nights until your baby is used to falling asleep like this and you can progress to the next step:

1. Lie or sit next to your baby and gently pat or stroke them until they go to sleep, then leave the room.
2. Place a chair beside the cot and sit without touching. Allow your baby to go to sleep before you leave the room.
3. Sit at gradually increasing distances from the bed. Allow your baby to go to sleep before you leave the room.
4. Eventually, place the chair outside the bedroom door.

If your baby wakes, repeat the step you were using at bedtime to help them learn to self-settle.

Controlled comforting

The controlled comforting method (also known as controlled crying and checking method) has been widely used for a number of years. To be effective it needs to be done correctly. More information on controlled comforting is available at [Raising Children's website](https://raisingchildren.net.au/babies/sleep/solving-sleep-problems/controlled-comforting) < <https://raisingchildren.net.au/babies/sleep/solving-sleep-problems/controlled-comforting> > .

If there is no improvement after two to three weeks of using these approaches, talk to your maternal and child health nurse, doctor or call the Maternal and Child Health Line on Tel: 13 22 29.

To receive this form in an accessible format [email Maternal and Child Health and Parenting <MCH@dhhs.vic.gov.au>](mailto:MCH@dhhs.vic.gov.au).

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Available at the [Better Health Channel](https://www.betterhealth.vic.gov.au/child-health) <<https://www.betterhealth.vic.gov.au/child-health>>

This factsheet is based on research undertaken by KPMG on behalf of the Department of Health and Human Services. The research included a comprehensive overview of contemporary research and evidence-based approaches and interventions for sleep and settling in early childhood. It considered developmentally appropriate strategies and cultural diversity. Download the full research report from the [MCH Service webpage](https://www2.health.vic.gov.au/maternal-child-health) <<https://www2.health.vic.gov.au/maternal-child-health>>.