

Your Infant's First Consultant

Desperate Parents Seek Professional Help in Getting Restless Babies to Fall Asleep

BY SUJEN HWANG

AS A FIRST-TIME MOM, Joan Pines says she tried everything — different holding positions, tape-recorded sounds of vacuum cleaners, even a visit to a massage therapist for babies — to help her colicky infant, who woke up at all hours of the night. Exhausted and desperate, Ms. Pines turned last month to Jill Spivack, a Los Angeles-based sleep consultant.

After a couple of days of following the consultant's recommendations, including a meticulously detailed bedtime routine, Ms. Pines says her then 3-month-old daughter began sleeping well for the first time. "I literally told Jill I'd do anything for her," says Ms. Pines, also in Los Angeles. "I'd spend a million on her if I had it."

No medical insurance will cover the costs, and fees can be steep — charges at Ms. Spivack's firm, Childsleep, start at \$295 for a consultation. But legions of sleep-deprived parents at wit's end are fueling a cottage industry of consultants, whose job is to help get children to nod off and stay that way through the night. Practices in several cities now field weeks-long waiting lists. Some meet with parents in their office; most also offer advice by telephone.

The approaches vary, but sleep consultants tend to agree on one thing: Small children can and should learn how to put themselves to sleep, and they don't need to be repeatedly rocked, held, walked or fed at night. Typically, consultants create tailored schedules for parents to follow — often dictating details down to how long to sing to a baby and where in the room you should sit. The particulars may vary, but consultants stress that consistency is key so that babies can develop a routine.

While sleepless nights are certainly nothing new for parents, the spread of such services reflects growing interest in pediatric sleep as a medical specialty — as well as emerging research about the impact that lack of shut-eye can

have on growth and development. In addition, many parents, particularly in big cities where consultants are most likely to be found, are having their first children later in life, making it that much harder to tolerate months or even years of interrupted sleep.

The practice has its critics, who say that training children to go to sleep, which generally involves leaving them alone to cry at some point, can cause emotional damage.

Some of the research into children's sleep focuses on physical problems, such as sleep apnea — when a person briefly stops breathing during sleep. The condition is increasingly being diagnosed and studied in children as young as 3 years old. But many in the field say the majority of sleep problems are behaviorally based — meaning they can be solved if parents change the way they treat the child. Jodi Mindell, associate director of the Sleep Disorder Center at the Children's Hospital of Philadelphia, says such behavioral issues are where consultants can be valuable.

Some sleep consultants, like Marsha Podd in Novato, Calif., bill by the hour, but many charge a fixed fee. Generally, the consultant asks about the family's situation and the child's sleeping patterns and developmental progress, after which a plan is drawn up for addressing the problem. It generally includes a specific bedtime routine, and may involve recommendations for sleeping and feeding throughout the day.

For instance, Ms. Spivack told Ms. Pines to wake the baby up from her last nap at 5 p.m. and put her to bed for the night at 7. The routine involved gently telling the baby it's time to sleep and leaving the room for lengthening periods of time, returning briefly to reassure the baby. Among other advice: Purchase a specific type of air purifier to create some background noise in the room.

Most consultants also make themselves available for regular follow-up

telephone calls for the next week or so, for which they charge a separate fee. While many of the specialists will give advice to mothers of newborns or even pregnant women, they will not help train babies to sleep until they feel the child is developmentally ready, usually at 3 to 6 months of age. Many sleep experts say that infants up to 2 years of age need more than 12 hours a day.

When Jennifer Eaves Nye's son was 8 months old and still not sleeping well at night, she contacted Annapolis, Md.-based consultant Kim West. Over the phone, Ms. West laid out a plan that included putting the baby down for his first nap earlier in the day. (Many sleep consultants say overtired babies actually sleep worse than well-rested ones.) Although she told Ms. Nye to put her son in his crib, Ms. West said she could sit at his bedside while he fell asleep. Over a few weeks, Ms. Nye gradually moved her chair further away from his crib until she was out the door.

"It is hard listening to your child cry, but it's like putting them in a car seat. They don't want to be there, but it's a health issue," says Ms. Nye, of Pasadena, Calif.

Ms. West says she currently has a six-week waitlist, and she has recently fielded as many as 200 e-mails and 50 telephone calls in a day from parents across the country.

The sleep consultation industry has been growing largely by word of mouth. The Sobo Parenting Center in New York City doesn't specialize in sleep but says it books 25 individual consultations every month with parents worried about sleep. And Ms. Spivack says she hired a third full-time partner last year, and has a waitlist that can stretch as long as a month.

Some early-childhood educators suggest the proliferation of baby sleep books, some of which seem to offer contradictory advice, is adding to parents' fear and confusion and spurring them to turn to outside help. "People often don't