

# WHAT THE EXPERTS ARE SAYING

“Dr. McKenna’s work provides the canvas and background upon which we have been able to illustrate the safest way to care for infants. His work in his sleep lab has led us to understand why mothers and infants do what they do, and his sheer exuberance, energy, and enthusiasm has made this such an enjoyable lesson along the way.”

—Peter S. Blair, Ph.D., Professor of Epidemiology and Statistics, Centre for Academic Child Health, Bristol Medical School, University of Bristol

“This is a very detailed and comprehensive narrative about everything to do with cosleeping, through the unique lens of a dedicated academic who has devoted most of his professional career to this topic. Parents who are keen to understand the historical controversies around cosleeping, and to know more about how SIDS epidemiology and sleep science are conducted, will find much to think about here.”

—Helen Ball, Ph.D., M.A., B.Sc., Professor of Anthropology, Durham University, Director of the Durham Infancy & Sleep Centre, Co-Director of the Baby Sleep Information Source

“Once you have read James McKenna’s satisfying and intuitive book, you will finally get a good night’s sleep: He will free you of worrying about ‘creating bad sleep habits’ and help you stop feeling unsure about breastfeeding your baby to sleep.”

—Jack Newman, M.D., F.R.C.P.C., I.B.C.L.C., and Andrea Polokova, M.A., M.Ed., co-authors of *Breastfeeding: Empowering Parents*

“Dr. McKenna seamlessly integrates his own scientific research and that of others with history, anthropological concepts, and maternal instinct, while demonstrating how the Western cultural bias of independent sleep actually increases the risk of SIDS and poor long-term adjustment.”

—Nancy E. Wight, M.D., I.B.C.L.C., F.A.B.M., F.A.A.P., Neonatologist, Medical Director for Sharp HealthCare Lactation Services

“[Cosleeping] is not for everyone, but Dr. McKenna has brought it into focus as a good choice for many parents, and has rightly questioned official attempts to suppress it based on rare and avoidable events. In this easy-to-read, thoroughly informed book, parents will find what they need to know to cosleep safely. An important contribution to the literature on baby care, and especially to the attachment parenting movement.”

—Melvin Konner, M.D., Ph.D., Samuel Candler Dobbs Professor of Anthropology and of Neuroscience & Behavioral Biology, Emory University, author of *The Evolution of Childhood*

“A detailed explanation of what cosleeping is, what it implies for the health of mother and baby, and how to practice it safely. An indispensable reading for all parents who want to decide in a conscious and well-informed way where and how their baby should sleep....”

—María Berrozpe Martínez, Ph.D., author of *iDulces Sueños! (Sweet Sleep!)*, co-author of *Una Nueva Maternidad (A New Motherhood)*, instructor for La Leche League International

“Dr. McKenna will show you your options and teach you how to reduce the risk of infant death and prolong breastfeeding. This book is a must-read for every new parent.”

—Kathleen Kendall-Tackett, Ph.D., I.B.C.L.C., F.A.P.A., co-author of *Breastfeeding Made Simple* and *The Science of Mother-Infant Sleep*

“I have been a pediatrician for over 40 years. There has never been an occurrence of SIDS in my practice. I might be good... but I'm not that good. Virtually every single family in my practice safely cosleeps. They all are breastsleeping families.”

—Jay Gordon, M.D., Fellow of the American Academy of Pediatrics, co-author of *Good Nights: The Happy Parents' Guide to the Family Bed (and a Peaceful Night's Sleep!)*

“As the father of four sons and as a practicing pediatrician, developmental physiologist, and epidemiologist, I can strongly support the ideas presented by Dr. McKenna in this debunking of much of the arrogant, ill-informed, and misleading advice that has in the past been given to parents by professionals who should have known better. I wholeheartedly commend this book to parents and to healthcare professionals.”

—Peter J. Fleming, C.B.E., F.R.S.A., Ph.D., M.B.Ch.B., F.R.C.P. (Canada, London), F.R.C.P.C.H., Professor of Infant Health and Developmental Physiology, Consultant Paediatrician, Centre for Academic Child Health, Population Health Sciences, Bristol Medical School, University of Bristol

“Dr. McKenna is the world's leading expert on cosleeping, its evolutionary story, and its importance to parents. In his new book, he shares that knowledge with parents in our society. I strongly recommend it to new parents.”

—Robert A. LeVine, Ph.D., Professor Emeritus of Education and Human Development, Harvard University

“Families who are confused, scared, and frustrated by our current black and white messaging seek information to understand why, if bedsharing feels so instinctually safe, they should avoid it. This book is a greatly-needed resource that provides evidence for families to make educated decisions when trying to balance their instincts about breastsleeping and bedsharing with the advice given to them by American society.”

—Anne Eglash M.D., I.B.C.L.C., F.A.B.M., Director of Lactation Services, University of Wisconsin School of Medicine and Public Health, Founder and President of The Institute for the Advancement of Breastfeeding and Lactation Education (IABLE)

“Professor McKenna is not afraid to take a stand on this controversial issue, presenting the view that bedsharing in the absence of hazardous circumstances can bring many benefits to infants and families; that it is the way infants sleep, not where they sleep, that is important. This review of the subject is likely of benefit to anyone considering bedsharing.”

—Sally Baddock, B.Sc., Dip. Tchng., Ph.D., Professor, School of Midwifery, Otago Polytechnic, New Zealand

“To cosleep or not to cosleep? That's the question vexing so many new parents. From over 20 years of groundbreaking research in his Mother-Baby Behavioral Sleep Lab, biological anthropologist James McKenna knows more than anyone about the risks and benefits of cosleeping. If you're looking for a sound, scientific basis for deciding about whether, when, where, how, and why to cosleep safely with your baby, look no farther—this book will tell you all you need to know.”

—Alma Gottlieb, Ph.D., Professor of Anthropology, University of Illinois, Urbana-Champaign, co-author of *A World of Babies: Imagined Childcare Guides for Eight Societies*

“Brilliant! Dr. McKenna, a research scientist who has spent much of his academic career studying bedsharing and its relationship to maternal and child health, has provided us with a vital resource to all who care about infants, parenting issues, public health issues—both mental and physical—and our society in general. It is with great pride that I recommend this book to the breastfeeding world and the world at large.”

—Chele Marmet, B.S., M.A., F.I.L.C.A., pioneer of the lactation consultant profession

“Dr. McKenna presents the benefits and risks of shared sleeping with babies and proposes strategies to create safer shared sleeping environments that support a risk minimization approach, which is evidence-based and practical for families to tailor to their individual needs and circumstances.”

—Jeanine Young, F.A.C.N., Ph.D., R.G.N., Registered Midwife, Professor, University of the Sunshine Coast, member of the Red Nose National Scientific Advisory Group

“With overwhelming evidence and unparalleled heart, the brilliant Professor McKenna shreds the conventional misguidance to reclaim the mammal universal of safe cosleeping for better health and well-being of mothers and babies.”

—Katie Hinde, Ph.D., Associate Professor, Center for Evolution and Medicine, Arizona State University

“So far as behaviors go, mother-infant cosleeping is one of the few primate universals. The main exceptions are found in a relatively small subset of human primates, among Western, Educated, Industrialized, Rich, and Democratic societies, sometimes referred to as WEIRD. In this comprehensive, humane, very clear, and also brave book, James McKenna strives to renormalize our segment of humanity.”

—Sarah Blaffer Hrdy, Ph.D., author of *Mother Nature* and *Mothers and Others: The Evolutionary Origins of Mutual Understanding*

“In this book, Professor McKenna distills his decades of anthropological work on normal human infant sleep into an accessible form. His clear explanations on the importance of nighttime closeness and 'breastsleeping' in human evolution and culture, paired with practical guidance, are sure to empower and support families.”

—Cecilia Tomori, Ph.D., Assistant Professor of Anthropology, Durham University, Durham Infancy & Sleep Centre (DISC)

# SAFE INFANT SLEEP

Expert Answers to  
Your Cosleeping Questions



JAMES J. MCKENNA, PH.D.

Forewords by  
WILLIAM SEARS, M.D., and MEREDITH F. SMALL, PH.D.

With contributions from  
PETER S. BLAIR, PH.D.

Platypus Media, LLC  
Washington, D.C.

This book is not intended to be a replacement for advice from your healthcare provider. An important part of informed self care is knowing when to seek out your community's healthcare resources. Readers should consult a physician or professional healthcare provider on a regular basis. This book is not meant to be a substitute for your doctor. It is a general informational guide and reference source. No medical or legal responsibility is assumed by the author or publisher.

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# Sleeping with Your Baby Around the World!

Dr. McKenna's research, insights, and data are reaching healthcare professionals and families across the globe. We are proud that his previous cosleeping book has been translated into many languages!



*Sleeping with Your Baby* (English)

*Dormir con tu bebé* (Spanish)

*Di notte con tuo figlio* (Italian)

*Slapen met je baby* (Dutch)

*Bebeğinizle Birlikte Uyumak* (Turkish)

*Spanje z dojenčkom* (Slovenian)

*Сон вместе с ребенком* (Russian)

*Dormir avec son bébé* (French)

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## Dedication and Acknowledgements

Throughout my 30-year career studying human infants and mothers, and sleep and breastfeeding, I have had the remarkable privilege of engaging with, learning from, and witnessing inspirational generosity by midwives, doulas, lactation counselors, and lactation researchers—all women across the globe working quietly and selflessly on behalf of mothers, babies, and families. The commitment and kindnesses I have witnessed, alongside their skills and their intelligences, go well beyond what I can adequately describe. In a hierarchical system where appropriate recognition, financial rewards, and the level of respect they deserve is often missing, I dedicate this book to them and say thank you to each. It has been an honor to count you among my colleagues and friends, always reminding me to keep my eyes on those we are seeking to help.

I also dedicate this book to one of the most masterful, hardworking, organized, and creative partners I may have ever worked with, my editor, Hannah Thelen. I have never thought of my own writing as necessarily sub-par, but in a flash, Hannah could take something I wrote and turn it into magic, or certainly something more appealing and expressive than my own prose. Thank you, Hannah.

And to you, Dia, my publisher: while we haven't always seen eye-to-eye, you persisted anyway. I hope our partnership will have, at long last, produced an undeniable, scientifically-valued book that can successfully strike at the core of the traditional infant sleep paradigm. Together, perhaps we can begin to eliminate erroneous and hurtful ways of thinking that, for over a century, undermined (however unintended) the chances for infant survival and more optimal and enjoyable nighttime experiences for both infants and parents alike.

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The great enemy of truth is very often not the lie—deliberate, contrived, and dishonest—but the myth—persistent, persuasive, and unrealistic. Too often we hold fast to the clichés of our forebears. We subject all facts to a prefabricated set of interpretations. We enjoy the comfort of opinion without the discomfort of thought.



—President John F. Kennedy, 1962  
Yale University Commencement

FOREWORD BY  
**Meredith Small, Ph.D.**

We live in fearful times, and nowhere is that fear more apparent than among parents, especially new parents. No matter that humans have been making little humans for at least 200,000 years, no matter that babies are born every second of every day and all around the world, every parent still worries about doing the “right thing” to guide their child toward competent adulthood. What brought on this collective parental anxiety?

Some of that fear comes from inexperience. The birth rate in Western culture has been decreasing over the last 50 years, and, as a result, many of us parents have no idea what we are doing. There are fewer brothers and sisters to practice on and fewer babysitting jobs. Many people, especially in the United States, also move away from their own parents and extended families, which means it often feels like one is bringing up children solo, even with a partner involved. As families have grown smaller, there are also fewer opportunities to learn from and correct mistakes with each successive kid. Instead, our eggs are in one basket, which makes us obsess about that basket. Who should we ask, then, when needing parenting advice?

“ Parenting advice has been more destructive than helpful. Many mothers today express exasperation because one “expert” contradicts the next “expert.” ”

A generation ago, the pediatrician was the go-to person. While he or she confidently offered advice, that advice actually came from a personal value system rather than anything evidence based. Pediatricians were also happy to check boxes on developmental charts while nervous parents looked to see if their child was “normal.” But these resources were never very good; training

for pediatricians is medical not behavioral, and the charts are there to catch outliers, not the wide range of possibilities and the even wider time frame in which these developmental stages might appear.

Many anxious parents also turned to parenting advice books, and what a barrage of conflicting information that has been! Bookstores and libraries are filled with shelf after shelf of advice books telling parents what to do and judging them if they decide to go a different way. Others have been snowed under by the internet. Blogs abound on every single move a baby or parent makes, and these are written by people who only have experience with their own children, yet they are dogmatic that there is only one good way to parent.

This flurry of parenting advice has been more destructive than helpful. Many mothers today express exasperation because one “expert” contradicts the next “expert.” Some mothers become anxious, depressed, and have feelings of inadequacy. I don’t think it’s a coincidence that this judgmental atmosphere around the arena that women naturally “owned” (that is, motherhood), came on the heels of the feminist revolution. I’d call it a punishing backlash. In that sense, any decision a woman might make as a new parent that flies in the face of the judgmental advice books, the hysterical and critical internet pundits, inflexible pediatricians, and strident governmental recommendations are, in fact, feminist issues.

The best antidote to all this? Choose your “experts” wisely.

And so, we turn to Dr. James McKenna, because he is a truly trustworthy expert. He has first-hand experience as a father, a scientist, a sleep physiology expert, an evolutionary biologist who knows the long history of our species, a social anthropologist familiar with cross-cultural examples, and a historian probing into the specific issue of parent-infant sleep over generations. In other words, Dr. McKenna is not relying on some opinion he conjured out of thin air, but real live data and research. His data are also supported, in the most scholarly and broad way, by evolutionary, historical, and cross-cultural theory. That’s why Dr. McKenna has earned a kind of credibility that is rare, even unheard of, in the world of parenting advice.

But more than that, Dr. McKenna is not the kind of academic who is happy to sit safely in his ivory tower. Instead, he faces

and considers, with data and deep thought, every challenge to cosleeping that the governmental authorities and the internet cough up. While we might admire his knowledge and experience, his persistence in promoting cosleeping, and now breastsleeping, is his best gift to parents, and to our culture. Dr. McKenna never stops learning, never stops thinking about all this, and sometimes it seems he is the only expert out there who still has the emotional and psychological health of parents and babies as his main focus. He doesn’t ever tell parents what to do; he judges no one. Instead, as *Safe Infant Sleep* shows, he lays out all the evidence and then lets families decide what is best for them.

“ We need not be fearful of following our natural tendency to keep our babies close at night. ”

Dr. McKenna’s previous book, *Sleeping With Your Baby* (2007), focused on cosleeping and his work over the years as well as providing clear answers to question about where babies “should” sleep and why. The current book is not merely an updated version of that book. In *Safe Infant Sleep*, Dr. McKenna introduces the new—and yet somehow intuitive—idea that babies and moms sleep best, and more naturally, when they are together and there is easy access to the breast all night long. This current book is also full of answers to questions about SIDS and cosleeping, how fathers fare in the cosleeping system, and how belief systems, such as inherent racism, cloud what should be a simple decision to lie down and sleep with your child. And, in a conversational way, Dr. McKenna brings us all up to date on the most current research in this area.

In that sense, *Safe Infant Sleep* is not just a parenting guide, or maybe it’s just an unusual one. It breaks apart every single issue about infant sleep that a mother or father might question as they start their life’s journey with their baby. But take heed—the kind of thoroughness and thoughtfulness you see here should be the template you demand when asking other so-called experts about parenting issues.

Yes, we live in fearful times, but because of Dr. James McKenna, we need not be fearful of following our natural tendency to keep our babies close at night. Read this book and become informed, and then pick up your baby, crawl in bed with them or not, and sleep safely.



MEREDITH F. SMALL is a writer, Professor Emerita of Anthropology at Cornell University, and Visiting Scholar in the Department of Anthropology at the University of Pennsylvania.

She received a Ph.D. in Biological Anthropology from the University of California, Davis, and spent several years studying the behavior of macaque monkeys in captivity and in the wild.

Her work has appeared in *Discover*, *Natural History*, *Scientific American*, and *New Scientist*, among many other magazines and newspapers. Small was also a regular commentator for National Public Radio's *All Things Considered*. She is the author of five books, including *Kids* and *Our Babies, Ourselves*.

## FOREWORD BY William Sears, M.D.

You are about to read groundbreaking research from not only the leading scientist in the world of mother-baby sleep, but also a passionate father who has devoted most of his professional life to studying the practice of cosleeping.

One of the most memorable moments in my professional life as a pediatrician was my first meeting with Dr. McKenna in Pasadena, CA, in 1982. At that time, my wife Martha had been, shall we say, doing what comes naturally—cosleeping with our babies. We learned about nighttime parenting literally on the job. Our first three babies slept well in their own cribs, either in our bedroom or in their own room, but babies four and five needed a nighttime upgrade.

I still remember the night Martha woke up to the I-need-you-mommy cries of our one-month-old baby, Hayden, and Martha said, from her heart, “I don’t care what the books say. I’ve got to get some sleep!” She instinctively put Hayden next to her in the bed to breastfeed, and the pair slept happily thereafter. While watching this beautiful nighttime parenting scenario, I was struck by the thought that this is the way it was meant to be.

“The way mothers and babies get to know one another through shared sleep is too valuable to be left to opinion.”

My opening announcement when I met Dr. McKenna was, “Jim, I’m looking forward to your research proving what mothers the world over have known for centuries: that something beautiful and healthful happens to mothers and babies when they share sleep.”

When he began his research as a Professor of Anthropology and Director of the Mother-Baby Behavioral Sleep Laboratory at the University of Notre Dame, parenting books were full of

misinformation from unreliable sources about cosleeping. But the way mothers and babies get to know one another through shared sleep is too valuable to be left to opinion. Many of today's savvy parents smartly ask, "Show me the science!" In *Safe Infant Sleep*, Dr. McKenna does just that.

His research takes you on a journey into the brains and bodies of mothers and babies when they share sleep, with my favorite novel feature of this book being Dr. McKenna's insightful use of the term "breastsleeping." Through his scientific experiments, Dr. McKenna shows that this style of nighttime parenting is the way mommy brains and baby brains are wired to experience sleep, and proves how and why bedsharing can be safe.

“ Rather than scare new parents away from sleeping with their babies, healthcare providers should be teaching strategies for safe cosleeping. ”

As you will learn throughout these chapters, cosleeping is also co-smartening. Consider your baby's brain like a growing garden. Safe cosleeping is the perfect "gardener" during the window of opportunity that is the first two years—when a baby's brain is growing the fastest, building neurological pathways that give a child a healthy start into a life of mental wellness.

With insights from the most up-to-date research, you will read how safe cosleeping, in all its forms, reduces infant cerebral stress, programming these growing little brains to be able to better manage stress later in life.

While reading this guide to happy, healthy, and safe cosleeping, or—better said—breastsleeping, get ready to think, "Oh, this validates my intuition!" That's what a book that is science- and experience-based should do, unlike the many nighttime parenting guides that actually confuse moms about cosleeping. One piece of mommy-wisdom that I describe daily in my practice is to ask yourself, when deciding how to react to any parenting situation, if I were my baby, how would I want my mother to react? That natural, maternal instinct reaction would

be to pick up your fussy baby, snuggle together, and breastsleep. Ahhh... that was simple!

Rather than scare new parents away from sleeping with their babies, healthcare providers should be teaching strategies for safe cosleeping. Dr. McKenna lists time-tested and scientifically-studied methods of sleeping safely with your baby. He provides hope for a future that embraces the positive potential of cosleeping, and helps parents feel empowered to choose the right sleeping arrangement for their family.

Imagine you're among a group of smart new parents I call "high investors." You seek consultation with the top doc in your area on the newest science about infant care. You open your consultation with, "Doctor, what is one simple parenting choice I can make that could have lasting mental and physical health benefits?" In the world that Dr. McKenna is fighting to create, she would get out her prescription pad and write: "Breastsleep with your baby."

*Safe Infant Sleep* is a must-read for every expectant and new parent, and belongs in the required reading library of every babycare advisor. If babies could talk, they would shout, "Thanks, Mom, for reading this book and for keeping me safe and sound!"



DR. WILLIAM SEARS, or Dr. Bill as his "little patients" call him, has been advising parents on how to raise healthier families for over 40 years. He received his medical training at Harvard Medical School's Children's Hospital in Boston and The Hospital for Sick Children in Toronto, before serving as the chief of pediatrics at Toronto Western Hospital. He has served as a professor of pediatrics at several universities.

Together with his wife Martha, he has written more than 40 best-selling books and countless articles on nutrition, parenting, and healthy aging. He serves as a health consultant for magazines, TV, radio and other media, and his AskDrSears.com website is one of the most popular health and parenting sites. Dr. Sears has appeared on over 100 television programs, including 20/20, Good Morning America, Oprah, Today, The View, and Dr. Phil, and was featured on the cover of *TIME Magazine* in May 2012.

# Read This First:

## A Note from the Author

The question of whether or not to sleep with your baby is complicated. It does not lend itself to easy answers or catchy slogans. As new parents, you are typically faced with cosleeping conundrums in the middle of the night when exhaustion is high, and what works for your family may conflict with what you have been taught about sleep safety by your pediatrician. In addition, there are racial, class, social, and political biases that run through cosleeping data, and the advice you get from many healthcare providers is often based on accepted practice instead of accurate, evidence-based research.

It is a shame that new parents need to read an entire book just to be able to sleep soundly at night, but this seems to be the case. When it comes to sleep, knowing what you are doing and why you are doing it can help everyone feel well-rested, provide physical and emotional benefits for babies, and even save lives.

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Parents ask me for advice all the time, and it is hard to give it because each home is different, each set of parents has different goals, and each child has different needs. I want each family to make the decision that is appropriate for them. I ask that you take the time to read this entire book to fully understand the topic, as well as your options, so you can make safe, informed choices.

While I have tried to provide comprehensive information and varied perspectives, you may notice as you read that there are many questions remaining that have yet to be researched. Humans can be complicated. When it comes to family sleep, there are a

plethora of sleeping arrangements and outside factors that can affect sleep safety. It is frustrating to me that some of the questions parents ask simply do not have answers yet.

It is up to influential health organizations to decide which questions are worth investigating and, by extension, which research projects deserve funding in order to find answers. When the subject is controversial, like bedsharing or other infant sleep issues, these decisions are subject to systemic bias. Unfortunately, research priorities are based on a flawed infant sleep paradigm that is inherently in conflict with cosleeping, so these organizations tend to ignore the many questions we still have about how to cosleep safely. Most studies simply aim to find evidence that validates the views of those making the decisions.

Part of the goal of this book, which encourages nonjudgmental discussions about cosleeping, is to open the door for future studies by encouraging health professionals to make the process of deciding research priorities more inclusive. It is my hope that public health authorities will one day be able to address the many questions we still have, and, in doing so, be able to provide the best possible recommendations tailored to individual families.

The biggest question on your mind at the moment is likely, “Where should my baby sleep?” I hope you will not be disappointed to find that I can’t answer that question for you, and neither can any pediatrician, healthcare institution, or researcher. This decision is only yours to make, and should be based on a thorough understanding of the risks and benefits, your overall family circumstances, and the parameters of your sleep space. External medical authorities don’t know you, your infant, or the needs, wants, and values of your family.

My sincere hope is that the information provided here will place you in the best possible position to decide the answer of where your baby should sleep for yourself. If this book leads you to understand that you and your family will come to know your baby better than anyone, and that your baby will ultimately teach you what he or she needs to make him or her (and you) healthier and happier, I will view it as a success.

## Breastsleeping: What It Means and Why It’s Important

*"This concept is a potential game-changer given the current polarized debate on what we should be advising parents...."*

—DR. KATHLEEN A. MARINELLI, ET AL.<sup>1</sup>

*Breastsleeping* is a term recently coined by myself and my colleague, Dr. Lee T. Gettler. It refers to a specific kind of bedsharing between a breastfeeding mother and infant, occurring in an environment free from proven risk factors. It is the safest form of bedsharing, practiced worldwide for all of human history.

Breastsleeping is part of an evolved, diverse, and highly integrated set of human behaviors. It remains fundamental to the continuing health of our species, in addition to potentially optimizing the health of individual mothers and their infants in both the short and long term.

This sleeping arrangement not only provides more opportunities to breastfeed throughout each night, but also makes it more likely that mothers will breastfeed their infants for a greater number of months.

Breastsleeping enhances sensitivity between mother and infant, encourages lighter sleep (see Chapter 6), and reduces the risk of danger in a variety of other ways.<sup>2, 3</sup> Our primary aim in creating a new term for this very old concept is to provide a new research category that acknowledges three things:

1. The role that consistent maternal contact plays in helping to establish optimal breastfeeding.
2. The significant extent to which breastfeeding and nightly sensory exchanges change all aspects of mother-infant sleep compared to traditional solitary or bottle-fed infant sleep models.
3. That the unique behaviors and physiological characteristics exhibited by breastsleeping mothers and infants mean that breastsleeping must be given its own category for assessing potential benefits and risks.

After decades of studying bedsharing and infant health, it is clear that it is not possible to document biologically normal human infant sleep outside of the breastsleeping context. The ongoing sensory exchanges (of touch, sound, smell, and taste) between mother and infant during breastfeeding—and the breastmilk itself—significantly change infant and maternal sleep architecture, infant metabolism, the efficiency of the infant’s immune system, and the infant’s microbiome (helpful bacteria). Recent research also suggests positive changes to an infant’s growing and expanding neural connections and overall brain architecture.<sup>4, 5</sup> These will all be discussed later in the book.

In the more immediate sense, breastsleeping is associated with an increase in brief waking periods and in breastmilk consumption, effects that enhance protection against sleep-related deaths and are altogether good for babies while being less disruptive for mothers.

# Part 1

## Cosleeping is Normal





## CHAPTER 1

# Why I Care So Much About This Subject

*"There is no such thing as a baby, there is a baby and someone."*

—DONALD W. WINNICOTT<sup>6</sup>

Many of my friends find it amusing that I spend almost all my waking hours studying what people do when they sleep. It's true. What people do when they're asleep fascinates me—and not just people in general, but families in particular. At the University of California, Irvine Medical Center, and as Director of the Mother-Baby Behavioral Sleep Laboratory at the University of Notre Dame, my students and I have had the privilege of documenting information about infant sleep through infrared video recordings and physiological monitoring of mothers and infants sleeping both together and apart.

Our research was not just for the sake of gathering knowledge, but for helping mothers and infants sleep better, thrive physically and emotionally, and stay as safe as possible no matter where or how they choose to sleep.

When it comes to parenting, new moms and dads are flooded with conflicting advice from family members, well-meaning friends, medical professionals, the media, the government, and, of course, from other parents. The vast majority of parents want to do what is best for their children, yet this bombardment of information implies that parental wisdom and the capacity of parents to make their own informed decisions is somehow out of their grasp. It's as if everyone knows exactly what is best for your baby except for you!

It is not my intention to tell you what to do or how your infant should sleep. British author Christina Hardyment wrote: "Telling mothers and fathers how to bring up their children in books is arguably as silly as sending false teeth through the post and hoping they fit."<sup>7</sup> I would never wish to give you ill-fitting teeth, and I certainly don't wish to give you ill-fitting rules for how to be a good parent, as all families and their circumstances are different. What is good for one family may not be good for another. The purpose of this book is to provide the best information available in order to help you make your own choice about what sleeping arrangement will be the safest and most beneficial for your family.

My wife Joanne and I entered the world of parenting with the birth of our son, Jeffrey, in 1978. Anxious about our new set of responsibilities, we read book after book on parenting. We are both anthropologists and we were quite taken aback at what we found in the childcare literature. When it came to what the experts had to say about feeding patterns and sleeping arrangements, either all our research and training about the universal aspects of human life were wrong, or the pediatric experts were missing or ignoring key information concerning what infants need the most: specialized nutrition from breastmilk, and sustained physical contact both day and night.

Not only was there nothing in the childcare books that reflected what we know about our primate heritage and sleeping arrangements, there was also nothing that reflected current research on human infant biology and the role that maternal touch plays in promoting infant growth and well-being. We learned that infant care recommendations were not based on empirical laboratory or field studies of infants at all, nor on cross-cultural insights as to how human babies actually live around the world.<sup>8</sup>

Rather, they were based on 70- or 80-year-old cultural ideas,

uniquely Western and historically novel. Recommendations followed the social values of mostly male physicians who not only had never changed a diaper, but had never—in any substantial way—associated with, or taken care of, their own infants. These "parenting experts" preferred to define babies in terms of who they wanted the infants to become, and decided what was good for infants based on recent and sometimes arbitrary social values, such as autonomy and independence. They should have been thinking in terms of who infants actually are—little creatures who are very much dependent physiologically, socially, and psychologically on the presence of a caregiver to an unprecedented degree and for an unprecedented length of time compared to other mammals.

The more we delved into the history and research of infant sleep recommendations, the more we discovered that the prevailing childcare wisdom had little basis in science whatsoever.<sup>9</sup> This discovery changed my career.

When you look at the prevalence of cosleeping in the mammal world, and among different cultures and in different eras of human history, it is clear that cosleeping is universal through time and is practiced far and wide in many different ways.

For hundreds of thousands of years, up to and through our early historic periods, breastfeeding mothers have practiced what Dr. Lee Gettler and I call *breastsleeping*. Breastsleeping is our new term and concept for the highly integrated system of healthy infant sleep combined with healthy breastfeeding behavior.<sup>2, 10</sup>

The practice of breastsleeping consists of sleeping next to one's primarily breastfed baby, and lying the infant on his or her back for sleep (which facilitates breastfeeding). This is such a universal and widespread practice that most parents worldwide couldn't imagine asking where the baby should sleep, whether it is okay to sleep with the baby, what position the baby should sleep in, and how the baby should be fed.

My anthropological training, as well as my own intuition, told me that something this common had to be beneficial, but it has only been through extensive and rigorous scientific study that we have determined why this proves to be the case.

During the '90s at the University of California Irvine School of Medicine Sleep Disorders Laboratory, my colleagues Drs. Sarah Mosko, Chris Richards, Claiborne Dungy, Sean Drummond, and

I conducted the first research on the physiology and behavior of breastsleeping mothers and babies.<sup>11</sup>

In one intensive three-year study, we examined infant and maternal sleep architecture, nighttime breastfeeding and its relationship with bedsharing, and the differences between infants who cosleep in the form of bedsharing and infants who sleep alone in separate rooms.

Our two preliminary studies, and subsequent related studies, employed rigorous scientific methods and analysis; our grant proposal earned a near-perfect score from one of the most exclusive scientific grants in the U.S., offered by the National Institute of Child Health and Human Development (NICHD). We were also awarded the prestigious Shannon Award from the NICHD for our proposal's innovations and scientific promise. The research papers were then accepted by some of the most well-respected medical journals in the world.

Nighttime behavioral studies have continued at the University of Notre Dame Mother-Baby Behavioral Sleep Laboratory, where we have clearly demonstrated the special abilities of both low- and high-risk mothers to respond to their infants' needs while breastsleeping. Over time, other scientists began to study these same issues, affirming the validity of our research while adding many new insights.<sup>12, 13, 14, 15, 16, 17</sup>

Watching the peaceful sleep of an infant, it may appear that not much happens while they are snoozing; the infant's body simply requires downtime several times each day. And, yes, downtime functions to help one regain energy, but much more is going on. During sleep, all manner of physical and neurological processes, including developing inter-connections between new cells, are taking place. While infants sleep, the brain is sorting out how many and which brain cells will be retained, and where in the brain they need to go. This affects memory formation as well as intellectual, emotional, and psychological aspects of development.

During the first three to four months of life, the prefrontal cortex is invaded with young neurons taking shape and finding their place based on what the infant experiences on a daily basis.<sup>18</sup> The young brains of human infants need to “prune,” or reduce, the nutrient demand of cells that don't seem to be used very often, so that vital nutrients can be shifted to more active cells. Your baby's engagements with you, even in this early time,

are as developmentally important as going to school. They are learning and shaping their brains every step of the way, even while they sleep.

Without stimulation from contact and social interactions—including nighttime sensory exchanges—neonatal brain cells are potentially lost forever. This has led some developmental psychologists to argue that infants are far more threatened by what they do not receive in terms of neurological excitation than by what they do receive, since “pruned” infant brain cells are not retrievable at a later date. Minimizing contact with the mother's body can make an infant's neurological scaffolding less stable and effective, weakening the structures that provide the basis for the infant's rapidly growing communication skills, emotionality, and ability to effectively regulate and respond to his or her own needs.<sup>19</sup>

It is unfortunate that, in light of all of this new information, parents who sleep with their infants are often considered needy or deficient, or sometimes even irresponsible, by medical authorities. When we hear about babies who do not or cannot sleep alone through the night, rarely do we hear: *What a good baby!* even though that is exactly what is in a human infant's biological best interest.

The good news is that, as of 2016, the American Academy of Pediatrics (AAP) recommends that infants never sleep in separate rooms from their caregivers. The bad news is that they argue against sleeping in the same bed. Herein lies the controversy.

I wrote my first book on cosleeping in 2007, and now I want to offer an updated version with a bit more science in it. I want to share with you what I (and others) have learned about various forms of cosleeping and breastfeeding in the years since then, and why a combination of the two refuses to go away in spite of anti-bedsharing recommendations. I want families to understand how much happens during cosleeping, including critical communication between infants and mothers (and other caregivers) through touch, scent, sound, and taste. This unconscious sensory communication is part of the way our species has evolved to maximize health and survival. It is likewise an intrinsic part of the way parents communicate and experience love for and with their infants and each other. A baby sleeping on his or her own, outside the supervision of a caregiver, is deprived of this vital

communication and, as scientific studies prove, is at risk on many different levels.

Cosleeping is not only normal, common, and instinctive, but it can also be in the best interest of a family when it is adopted for purposes of protecting and nurturing infants, when safety is given priority, and when the right kind of cosleeping is chosen for and by each unique family.

That being said, one cannot be naïve regarding the different ways in which people live. Families make different decisions and things don't always go according to plan. Good intentions can be waylaid by fatigue and shifting circumstances. While the ideal cosleeping environment is an exclusively breastfeeding mother sleeping on a flat surface that has been maximized for safety (we'll dig into this later), this ideal is not always the reality. There is no guarantee that anything we do with infants will necessarily be done in a safe way. Cosleeping in the form of bedsharing is no different. It is quite true that bedsharing can be practiced in ways that are dangerous. Bedsharing is generally

a more complex and less stable practice than crib sleeping, which itself has both advantages and disadvantages for babies.

I want to teach families to avoid known risks in any sleeping arrangement. Being aware of where dangers lie and what can and cannot be modified is critical. One size

“One size does not fit all when it comes to sleeping arrangements.”

does not fit all when it comes to sleeping arrangements, and where households exhibit risk factors for dangerous bedsharing, I encourage alternative sleep practices.

No sleep environment is completely risk free, but the fact that a bedsharing environment cannot be made 100% risk free is no more an argument for a global recommendation against all bedsharing than it is an argument for a global recommendation against all crib sleeping—because crib sleeping incurs risks too, evidenced by the continuing epidemic of Sudden Infant Death Syndrome (SIDS).

To use a different example, consider that thousands of people die from choking while eating every year, even though eating is

normal, common, and instinctive. In order to minimize the risks, adults are not advised to stop eating (which would be silly) but instead are instructed to learn the Heimlich maneuver, as well as specialized food preparation and feeding techniques for young children. Similarly, we learn with great effort how to properly use and place infants in car seats, yet many babies die each year in cars due to some parents' disregard for ways to minimize car travel risks. Still, it would be impractical and unreasonable to ban automobile transportation for children altogether.

This book is intended to provide a balanced, comprehensive, and holistic perspective on cosleeping and bedsharing. It is intended to provide safety information and reassurance to those families who are considering or who currently choose to sleep with their babies. Enjoying every minute with your baby—whether you are awake or asleep—is important. Though it might not seem like it at first, our time with them is very short.

I hope that this book will enable you to feel comfortable holding, carrying, and responding to your baby, and will help you feel good about your caregiving choices. I know I am not alone in wanting to help you and your family thrive and enjoy experiences that can be cherished forever.

My intention is not to convince everyone to bedshare. The point is simply that the real answer to the question of whether or not any particular family should bedshare is always: *It depends*. While it is safe and appropriate to recommend that no infant should sleep alone in a separate room from an adult caregiver, this is just the starting point. Beyond that, there are many factors to consider before choosing a sleeping arrangement. I hope this book will give you the specific knowledge you need to make an informed decision, as well as the confidence to assess your conditions and circumstances in order to choose both what feels right and is safe for you and your family.