

## Is it safe to bedshare?

In the "old days," mothers and babies just naturally breastfed and slept together. Mothers were instinctively protective of their babies and slept next to them, checking on them and breastfeeding them through the night. A mother knew that it was a safe place for her baby to be: she instinctively kept the baby near her breast and the baby instinctively stayed there. The mother curled around the baby, protecting him from being rolled on by her or anyone else, and this also kept him from moving up or down in the bed. Babies slept better and cried less through the night because they were safely next to their mothers. Both mother and baby got more sleep, breastfed more easily, and were warmer when it was cold. All of these factors combined to provide a low-risk bedsharing environment.

Times have changed. More mothers smoke and use formula, which increases the risk of SIDS. Beds can be softer and bedding fluffier, and babies may sleep with non-breastfeeding or intoxicated adults, increasing the risk of suffocation.

The problem is that public health agencies have tried to prevent baby deaths by warning ALL mothers never to bedshare. They have grouped low-risk non-smoking, sober, breastfeeding mothers with high-risk smoking, intoxicated or non-breastfeeding mothers. They haven't taken into account the health of the baby, how heavily he's dressed, or the type of bed and bedding. And much of the research on which they based their recommendations has study flaws that affect their conclusions.

Even though the never-bedshare message has been around for a number of years, it hasn't measurably reduced bedsharing behaviours or infant deaths. Research shows that at least two-thirds of all breastfeeding mothers do bedshare at some point, and almost half of those who are told not to bedshare go to sofas and reclining chairs in the middle of the night, greatly increasing their risk.

The latest research shows that breastfeeding mothers and babies who meet seven very clear criteria, which we call The Safe Sleep Seven. are low-risk and can bedshare with confidence. And by bedsharing with their babies, mothers are likely to breastfeed more easily and longer, and often have much easier nights.

## The Safe Sleep Seven

You need to be:

- 1. A non-smoker
- 2. Sober (no drugs, alcohol, or medications that make you drowsy)
- 3. Breastfeeding

Your baby needs to be:

- 4. Full-term and healthy
- 5. Kept on his back when he's not breastfeeding
- 6. Unswaddled, in no more than a sleepsuit or light pyjamas

And you both need to be:

7. On a safe surface

The Safe Sleep Seven gives parents and their caregivers a research-based framework for discussions about nighttime safety and a way to evaluate the risk in each family's situation. Whether or not parents intend to bedshare, knowing their risks and ensuring that the bed is a safe surface is basic "childproofing" in case bedsharing happens unintentionally. A tired mother may not plan to fall asleep with her baby. A prepared bed makes it safer if she does.



For further bedsharing information, see Sweet Sleep for answers to both "why" and "how" with research-based strategies, through the lived experiences of 55 years of La Leche League families.

















No super-soft mattress, no extra pillows, no toys, no heavy covers

Clear of string and cords

Fill the gaps: use rolled towels or baby

Cover the baby, not the head



## A Rhyme for Sleep Time



Ma Amaka Aabar mur

No smoke, sober mum
Baby at your breast.
Healthy baby on his back.
Keep him lightly dressed.

Not too **soft** a bed. Watch the *cords* and *gaps*. Keep the *covers* off his head For your nights and naps.

## From Sweet Sleep



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