

A Unique 7-Step Parenting Tool: Sleep Talking

by Marcy Axness, PhD

In my years of coaching and counseling parents-in-progress, a unique and little-known tool has proved incredibly useful: sleep talking. It is yet another way in which to practice *Parenting for Peace's* #1 Principle – Presence. Speaking to your child while he or she is sleeping is a way to be present to your child in a powerful way, and to speak directly to the unconscious, bypassing whatever protective deflection your waking child might have toward the words of acknowledgement and healing you want to share.

At a loss to help two of her patients who expressed continued rebellion, negativism and hostility, pediatrician Rhodora Diaz was inspired to suggest that their mothers talk to them while sleeping. (Dr. Diaz had a vague recollection of having read a study out of Boston about speaking to patients during sleep.) Both of these children had one thing in common: they had both been unwanted conceptions, and both mothers had resented their pregnancies. Dr. Diaz would normally have referred these children to psychiatrists (and most likely they'd have been prescribed psychotropic medication), but the families lacked the financial means for this. So Diaz was willing to try anything, no matter how unorthodox. This certainly couldn't hurt.

When she got reports some months later from both of these mothers that their children's attitudes behaviors had dramatically improved, Dr. Diaz began suggesting the technique for helping other children with puzzling or persistent problems. Over time, she refined a 4-part "Sleep Talking Script" as a guide:

1. Statement of love
2. Statement of the problem
3. Interpretation / proposal for a solution
4. Statement of love & commitment (closing statement)

Dr. Diaz suggests limiting the Sleep Talk session to five or ten minutes. She recently gave this elaboration of the technique:

"As an example, I would have a mother tell her daughter, as part of number 1, that she is much loved by both parents and by the rest of her family. The mother should include such things as her pleasure upon seeing the baby for the first time, special things the child did as a baby or when she was growing

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up and how proud her parents have been of her. She can modify this and talk of other things during the next 'sessions.'

"For the second portion, I usually have them start with 'I have been worried about your recent change in behavior...' or 'I don't know why you are so fearful, or angry, or moody...'. The parent can say things like, 'We feel such pain when we see you like this, or 'people are upset to see you doing that'. Details can be supplied by them.

"The third part should include the parent's explanation or understanding of why this behavior is manifesting. She can explain any current difficulties in the home or within the marriage: 'We know you are worried because of the problem your father and I have. We are sorry, but please understand that people do have problems they may not solve right away, so they fight and they create heartaches for everyone. This is our problem and we are working on it. Whatever happens, our love for you will not change, and we will try to make it easier for you. We are not perfect and we are learning from this. We are sorry that this is happening.' The parent may even explain some of the details, emphasizing that there is always a solution.

"Occasionally, I have the mother encourage an older child to 'tell Mom how you feel,' especially if the child is not willing to talk about it when awake. Of course, there can be many variations in this portion, and sometimes the mother will find herself crying. That's okay, too.

"The final part is just a repetition of loving thoughts and the parent's reiteration of her commitment to helping her child grow up healthy and aware."

Dr. Diaz has found that the best time for a session seems to be in the early morning, before the child wakes up (which is a deep sleep). Sessions can be done with children who are just dropping off to sleep and this seems to also work, but the morning session works most dramatically.

I work with clients to help zero in on what they might "sleep talk" about with their child. I have found with many parents in my practice that previously unrecognized traumas during infancy, birth, pregnancy and even conception often prove to be avenues for discovering clues to troubling "inexplicable" behavior or developmental issues. These often serve as key points to be addressed through sleep talking. So that is Step One – thoughtfully and intuitively zeroing in on these kinds of events or experiences that may have planted the seed for these later issues.

Step Two is to prepare at least an outline of the main points you will touch upon in each of Dr. Diaz' four parts of sleep talking. Here is just one "script" example from a parent in my practice. (Note Dr. Diaz' four elements – which are Steps Four through Seven of my adapted protocol):

James, you are our precious boy and we love you so much... and we're so proud and happy to be your parents... and that you came to be our son.

We notice that you're sometimes very dreamy and you're not quite present with us... like you're up flying in the clouds. Sometimes what happens is that we get impatient or frustrated trying to reach you... and then that creates a separation between us. We would like to bring you back to earth, and help you really be here, and feel comfortable with us here.

When you first came to us, we hadn't expected you, and so we were surprised. We were really happy you were coming, but we realized we had to make a lot of changes to get ready for you... and so there was some chaos and crazy times and some really hard work we had to do. So we're thinking that might have made you feel unsure about whether or not you really belonged here with us. Maybe you got the idea that if you really came to us it would cause too much trouble.

We want you to know that we're so happy you're here, and all the changes we made in preparing the way for you were wonderful changes. You've enriched our lives so much, and we love you and want you to be fully here with us, all the way, with your entire being. We look forward to all our happy years with you, all of us growing together.

So what is the missing Step Six? Sitting with the material you plan to discuss with your child long enough to process out any “emotional overload.” As I learned from the brilliant psychiatrist Myriam who works with babies in a Parisian neonatal intensive care unit – effecting miraculous healings by simply speaking their (usually difficult) prenatal or birth stories to them – it is more effective when we can speak with words that are straightforward and unclouded by too much sentiment or emotionality.

To read more about this gentle, compassionate and useful technique, visit Dr. Diaz' site at whilechildrensleep.homestead.com.

A member of *Mothering* magazine's online expert panel, and a popular international speaker, **Marcy Axness, PhD**, is a professor of prenatal development, and she also has a private practice coaching parents-in-progress. She provides training for childcare, adoption, education, and mental health professionals about the latest findings in the science of human thriving, and is the author of a new book that distills that research: *Parenting for Peace: Raising the Next Generation of Peacemakers*. She invites you to join her at www.marcyaxness.com.