SECOND OPINIONS

On parenting styles

Dear Members:

AAP News recently (April, May 1998) presented both sides of a discussion on a controversial parenting style proposed in the book "On Becoming Babywise," published by Growing Families International. The Commentaries evoked many impassioned responses from members and nonmembers alike, particularly regarding demand feedings vs. scheduled feedings.

While the Academy has allowed this discussion in its membership publication, it nonetheless stands by its latest policy statement (December 1997, Pediatrics), which states: "Neoborns should be nursed whenever they show signs of hunger, such as increased alertness or activity, mouthing or rooting. Crying is a late indicator of hunger. Neoborns should be nursed about every 3 to 4 hours, or every 24 hours until satiety... In the early weeks after birth, nondemanding babies should be aroused to feed if 4 hours have elapsed since the last nursing."

The Academy further recommends parents seek medical advice from their pediatricians to ensure the healthy and safe development of their infants, children and adolescents.

With the publication of this sample of members' responses, AAP News concludes its print discussion of the issue. However, additional comments can be sent electronically to the AAP Task Force on the Family: FamilyTaskForce@aap.org.

Joe M. Sanders Jr., M.D.
AAP Executive Director

Thank you, Dr. Aney, for your thorough and scientific exposé of how the parenting philosophy in On Becoming Babywise can lead to failure to thrive (April, AAP News). The parenting style recommended in this book is, in my opinion, a dangerous program that pediatricians must be aware of so they can caution new parents to be discerning. This program interferes with one of the parenting goals that we pediatricians have traditionally sought to instill in the mothers of our little patients: a strong mother-infant attachment.

In fact, co-author Dr. Bucknam, in his rebuttal (May, AAP News), even attacks attachment parenting. He ignores the fact that respected child development specialists such as Bowlby, Erickson and Bell and Ainsworth have scientifically demonstrated that the quality of mother-infant attachment is the single most important determinant of infant development. The infant behaviorists ignore the fact that the attachment style of parenting (including breastfeeding on cue, wearing baby in a sling and giving a nurturant response to cries) is practiced with positive benefits in cultures throughout the world, especially those cultures that do not have the "benefit" of babysitter baby books. They pontificate that the attachment style of parenting is now, all of a sudden, wrong. In fact, Bucknam's co-author Gary Ezzo has referred to these cultures as "primitive societies" with "no light," having "Third World maternal disorder," and the "end of the human spectrum." Many parenting organizations, such as the largest and oldest breastfeeding organization, La Leche League International, and the Christian organization Focus on the Family, have voiced concern over Babywise.

Years ago I attended an AAP Annual Meeting where Dr. Michael Lewis, professor of medicine at Rutgers University School of Medicine, presented a review of all the scientific studies on what contributes to brighter babies. His conclusion was that the single most influential factor on the emotional and intellectual growth of an infant is the responsiveness of the mother to the cues of the baby. Babywise advice runs contrary to this conclusion and to that of all the attachment studies. Psychologists and therapists report that attachment disorders are becoming epidemic. My concern is that the advice in this high-control, baby-training program will lead to more disorders of attachment. It is likely to create more distance between parents and baby in a decade when parents' lifestyles already are overbooked.

Bucknam and Ezzo deny some of these babies suffer poor weight gain or failure to thrive, but others have seen and reported it. Regardless, it would be wise if these authors would concentrate not just on weighing the baby's body, but on measuring the quality of mother-infant attachment. Is the pair really connected, or are the parents following a set of external controls that prevent them from using their intuition to work out a parenting style that's best for themselves and their baby?

Many thanks to Dr. Aney and the American Academy of Pediatrics for advising pediatricians about this new method of baby training that desensitizes parents to the cues of their infant.

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I have been a pediatrician in a busy practice in Johnson City, Tenn., for 18 years. Like most pediatricians, I was taught, and for many years advised parents, that demand feeding their children was the best, most nurturing course to follow. I also was spending a tremendous amount of time counseling mothers about their colicky babies and trying to help them deal with the sleep disorders that were so common from 6 to 12 months of age. I was staying very busy in my practice, but my heart really went out to mothers who were near exhaustion while trying to take care of these children.

Approximately four years ago, a mother in my practice introduced me to the principles found in On Becoming Babywise. Not wanting to offend her, I halfheartedly accepted the material. Frankly, I had seen so much on this subject through the years that I thought it would simply be more of the same.

As I began reviewing the material, it made so much sense, that, in light of the problems I was seeing in my practice, I thought I would give the material a try. I immediately ordered my first copies of On Becoming Babywise, and as I began giving this book out to new mothers, I was amazed at what took place. The amount of time I was spending counseling distraught, worn-out mothers started to decrease dramatically over the next few months. No, I didn't set up control groups and do a systematic, scientific study (I now wish that I had), but the results were so dramatic that there was no questioning the cause-and-effect relationship. Instead of seeing mothers who were questioning the wisdom of even having a child, I saw mothers who were parenting with great confidence and fathers who were becoming much more involved in the home and the parenting process.

I have not seen any babies in my practice who have failed to thrive or have had problems with dehydration due to Ezzo's material. The only child who has had a problem while their program was one who later was proven to have gastroesophageal reflux and esophagitis, which explained his difficulty.

The use of their material has notnegated the need for routine medical follow-up of these children, but I would think that many of the reported failure to thrive cases were due to misapplication of the principles involved. This misapplication can happen with any instructional material and should not be used to criticize the Ezzos.

It is almost as if some people believe they are producing

slicing a life

Nothing beats biting into a nice, juicy piece of watermelon on a hot, sunny afternoon.