**Episode 118-Early Parenthood: Managing Anxiety and Sleep Challenges**

You speak a little bit about anxiety there and you know anxiety is such a hallmark feature of early parenting and some mums don't have it at all in pregnancy. You mentioned that you did have it in pregnancy. What were the sort of things that you were anxious about? Something that wouldn't have stressed me out at all if I just maybe hadn't thought about it became quite stressful because it was like oh I can quickly just ask google and that was like the wrong thing to do completely.

Mums who were anxious tended to wake their babies at night which was completely counterintuitive but they would go in they'd hang over the cot and then if they couldn't see their baby breathing they'd put their hand on them and kind of see whether or not they were breathing and then they've woken them up. So I don't know if that's been your experience. Welcome to Sense by Meg Fora, the podcast that's brought to you by ParentSense, the app that takes guesswork out of parenting.

If you're a new parent then you are in good company. Your host Meg Fora is a well-known OT, infant specialist and the author of eight parenting books. Each week we're going to spend time with new mums and dads just like you to chat about the week's wins, the challenges and the questions of the moment.

Subscribe to the podcast, download the ParentSense app and Catchmaker every week to make the most of that first year of your little one's life and now meet your host. Welcome back mums and dads. This is Sense by Meg Fora and I am your host Meg Fora and I join you here every single week to explore the joys and the challenges of parenting and of course having a little bundle of joy comes with a whole lot of challenges and we all know about that and the interesting thing is that those challenges are really quite common in terms of the trajectory that they take in terms of age and so one of the things that we've done over the years on the podcast is have real mums join us and ask me questions and go through the joys and the challenges of their week and as they do that we can actually connect the dots to our own children and so that is what we're going to be doing today.

I'm very, very excited to be able to welcome Chelsea Atherstone here with me. Lovely to have you here Chelsea. Oh thank you so much Meg, it's great to be here.

Excellent and Chelsea is the mum to one little girl and she's about seven and a half months old Chelsea isn't she? Yes she is, seven and a half months of beautiful chaos. Nothing that you expected and everything that you didn't expect. Absolutely.

Oh wonderful. So I'd love to hear a little bit about your journey to becoming a mum and how the last seven months have been for you. Gosh, it's a big question.

So it took us quite a while to conceive and so I think maybe it was an amazing process but also a really stressful process and when we found out that we were pregnant for me I'm quite an anxious person so for me I kind of immediately went to all the things that I shouldn't be doing to make sure that this is like the healthiest pregnancy possible and I found that like now in hindsight looking back was super consuming and I don't know probably not the nicest way to experience it because I was so lucky I had the most beautiful pregnancy with no issues whatsoever and then kind of jumping straight into motherhood it was a shock to the system and you know we live, well I live really close to my dad but he runs a business full-time and was not really able to help very much and we live very far away from all of our other families so you know Logan was born and we had very little of we had very little support outside of pretty much my husband and I and that can be quite overwhelming when you know you have this little baby and she was I mean I feel like she was tiny she was 2.8 kgs at birth. That is small. Yeah right and I felt like every time I held her I was like oh my goodness is she going to break yes and it's quite it's definitely exactly what you said it's nothing that you expected and a hundred times more magical and yeah I just it was a lot I won't lie the first few the first few months that it took me a while just to kind of like she was perfect but I felt like I just had to kind of find my way and she was so she was so good to me and allowing me to find my way as well.

That's amazing so you speak a little bit about anxiety there and you know anxiety is such a hallmark feature of early parenting and some mums don't have it at all in pregnancy you mentioned that you did have it in pregnancy what were the sort of things that you were anxious about? So do you know what like I've spoken so much about this to friends of mine because I've got a lot of friends who are either currently pregnant or who have babies the same age as me and there is so much information out there and this is a blessing and a curse all at once and I think it's very maybe personality dependent but for me I'm quite meticulous I love to you know I love to research I love to plan I love to study I love to know what to expect and you can't really do that with the pregnancy because you never really know what to expect and everything's so different and for me it was you know you're like oh can I eat this you know as a pregnant woman and you google it and you get 50 pages saying yes and 50 pages saying oh my goodness don't touch it and and I just found I think it was not so much like something that wouldn't have stressed me out at all if I just maybe hadn't thought about it became quite stressful because it was like oh I can quickly just ask Google and that was like the wrong thing to do completely. Absolutely and I think you know I think what's become really tricky is and it's been a slow march towards complete confusion for mums because if you think about it you go back 150 years you would have given birth in a community and first of all you very likely would have seen a sibling delivered and breastfed by your mother because you guys would have had quite extended you know age gaps or age ranges within families without contraception so you know that was the first thing that we were prepared in that respect and then of course we were prepared because we were able to just pick on one person's mind or maybe two people's minds you know our mum and our aunt or you know just the community and a lot of what would have been passed around the community would have been the same information that everybody held so there would be nothing confusing. Fast track to where we are now we live in nuclear units which you have actually alluded to that you actually have got no support very little support you know maybe your dad but that's and then you've also got access to information and that information is unfiltered and uncurated and that's Google and also TikTok now you know and Instagram you know it's really uncurated the only way that Instagram and TikTok are curated is they're socially curated which means that you kind of pick somebody who you think you want to listen to but actually you don't really know whether or not she's talking sense or not very often because it's often influencers who don't have a medical background or don't have a way of actually filtering the information so yeah I mean it lands us as parents in a very very confusing world right now and I'm sure that's exactly what you experienced.

Oh 100 percent and my husband actually set a rule in our household that I wasn't allowed to Google anything and I had to tell him and then he would decide whether it was something that we could Google or not which was very helpful. I love it he sounds absolutely amazing. You know what he is he's fabulous he's very down-to-earth he's very grounded which is exactly what my kind of personality needs I'm very very privileged.

That's amazing that's incredible so you went through the birth and you come into new parenthood and the anxiety levels continue after birth but you said she let you in quite easily was she a good sleeper and feeder? Do you know do you know what we are so our breastfeeding journey was is incredible I'm still breastfeeding now and we I mean it was obviously just some teething problems in hospital not you know me not really knowing how the latch works and and what positions would be the best and the most comfortable and so all of those things but we kind of resolved those before we even left hospital so we feeding has been I don't know pretty textbook for us I think with such a blessing. Sleeping was amazing up until four months and then it all fell apart and I think that's probably what makes it quite hard is that we had like a textbook sleeper literally Logan would go to sleep at like seven o'clock at night and she would wake up at four o'clock in the morning for her first feed up until like four months in one week and then it just imploded and it's been chaos since then and so that's kind of where we are. It's that 17 week sleep regression that we all talk about that really is so frustrating and you know it's interesting for mums who listening and their little ones are around about four months it is pretty textbook unfortunately most babies go through it but they can you can navigate it I mean there are two key things there the one is to look at nutrition and at what age do you introduce solids and somewhere between four and six months it is a good idea to introduce solids and we can actually ramp them up quite quickly or little ones sometimes take it slowly but you know you can actually go at quite a pace you can follow your baby's lead very much so and then the other thing is that they've got to learn to self-soothe so when you were kind of muddling through that and you say that you're still not having great sleep were those the two things that you started looking at and what have you tried? So I'm going to start with the solids kind of part of it and I know today people look at starting at four months anytime between four and six months we were a little bit not late to the party we started at five and a half months on solids which I think yeah I think Logan was ready at that point and I also think I was ready at that point and you know all those markers that you kind of want to they need to be close to for that to start and I definitely feel like the solids helps her you know she's fuller she's I guess happier she loves her food I'm a proper little foodie which is so great which I'm loving but having a look at the other side the self-soothing I think this was probably where our biggest struggles came in because Logan is very dummy or pacifier attached I don't know which one we want to go with but she's very dummy attached loves her dummy and I wasn't prepared to take it away from her but it also meant that for a lot longer I was having to help her at night because she didn't have the ability to kind of find it and put it back to itself and I kind of resigned I'd accepted that fact and you know I was happy to do that because I don't know we at this weird place where our day sleeps are phenomenal and our night sleeps are terrible and I think it might just be the self-soothing coming in but yeah we basically worked through now she's at a point where she can put the dummy through and put the dummy in by herself she wakes up at night she finds that she pops it in she goes back to sleep most of the time but we have a lot of night wakings which I'm not really sure of and it's always difficult because so oh you're gonna you're going to give me a look I know you are so she's still sleeping in our room um in a cozy bed.

That was my next question. I knew you were gonna ask me um it's a bit of like a twofold problem I think at like five months I wasn't ready to move her out yet and then when I felt ready to move her out my husband and I chatted and and he was like oh and I hadn't even thought of this and he said to me her room is quite far away from ours I don't know if I'm comfortable moving her out and I thought about and I was like gosh her room is actually we don't live in a like with a passage and the door the room's all opening off a passage our other bedroom is literally like almost on the other side of the house yeah and that's now kind of where we are. Yeah so I mean you've brought up so many fabulous things there and I know it's perfect and I'd like to just pick a few of those as we go along so so first of all let's just start with the dummy story you know a lot of people ask me about whether or not babies should have dummies and when's the right time to get rid of them and what happens with this whole dummy patrol so I personally love dummies I think dummies are a great solution they help to calm little ones and they really can be used independently as you found at around about four to five months that kind of dummy habit can sneak in and so they wake up start waking up regularly for that dummy because that's how they fall asleep they fall asleep at the sucking they want the sucking when they wake up in the middle of the night which gives you kind of two choices the one is to get rid of a dummy at around four months the other one is to teach your little one to use the dummy between six and seven months and you have done exactly that so moms for those of you who haven't gone through that process you know kind of what Chelsea expressed there was exactly what happens you have to resign yourself to the fact that you will be assisting with dummy patrol for a period because your little one doesn't have the dexterity to get their dummy into their mouth and then between six and seven months you've got to actually apply your mind to actually teaching them to use it so the way that I like to do it is that during the day you put it in their hand from six months onwards instead of putting it in their mouth and then as soon as they're getting that right and they can put it in during daylight hours then you start the same at night putting it in their hand at night and eventually they work out how to pop it in so actually Chelsea your little one has done this absolutely perfectly I mean it sounds to me like Logan has done a textbook and there'll be a lot of moms who have a seven month old on dummy patrol and they'll be saying gosh I mean how did you get it right because you really did very well so that brings us to the next question which is the fact that she's waking up regularly still and you know there's this research that was done in Australia many years ago where they took a very large cohort of babies 50% of which were good sleepers and 50% of which were very poor sleepers and they put them into a situation where they had night cameras over their cots so they could observe them and they wanted to see how many times the good sleepers and how many times the bad sleepers work and what they found was what we never expected.

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Download ParentSense app now from your app store and take the guesswork out of parenting. And what they found was what we never expected which was that the good sleepers and the bad sleepers work the exact same number of times at night. The big difference was that the good sleepers didn't wake their parents and the bad sleepers did because the poor sleepers needed mom to come back and put the dummy in breastfeed, rock to sleep or whatever but the good sleepers could sort themselves out.

So when I listen to your story about Logan the reality is I think she's a good sleeper. The difficulty is that she's disturbing you because she's in your room. Now there's nothing wrong with that.

Choosing to have her in your room at this age is certainly not something that I would criticize in any way and especially because you have got quite good valid reasons that you don't want to put her far down and there's lots of reasons why parents have to co-sleep. I mean I never forget or cohabit a room. I'll never forget when I did a lecture in New York City in about 2012 and the moms there genuinely do not have a second room.

Real estate is so expensive that there is only one room in the house and it's like that for a lot of people in Africa as well. There is one room in the house and therefore that's the room that your baby and you both sleep in. So and that's what you've chosen.

Yours wasn't necessarily because you had to but it was because you've chosen that. But what it does mean is that she's going to wake you, you're going to wake when she wakes. Now there's a couple of ways you can get around.

That one is that you can use earplugs as if your husband was a big snorer you would put in earplugs and you don't listen to her. You'll still hear her I promise you if she needs you. Because what you're actually hearing when she wakes is probably some grunting, grimacing, a little bit of moaning and then she finds a dummy and she goes back to sleep.

Am I correct? Is that what's happening? Like 80% of the time? Yeah and those ones you just won't hear then. So that's one option. The other option is actually to put on some white noise in your room.

So you'll have your phone next to your bed I'm sure somewhere in the room. Find a nice white noise CD and the reason for that one white noise track and the reason that that works nicely is that not only will it put her into a slightly deeper state of sleep but it'll also mask the noise of her waking when she wakes. And so those are the two things that you can try barring the fact that you could move her to her own room.

Well it's definitely something that I'm considering more and more because I think we set each other off. You know she wakes me and then I kind of go and have a look and then I wake her up more and then it's just a bit of a vicious circle. I think probably what I'm struggling with the most is she's actually I feel like we have different sleep associations with day and night and I don't even know if that's like if that's a possibility but she literally goes to sleep during the day in her room like the blinds are closed she goes in a sleep sack white noise with her dummy and she goes in wide awake she doesn't get rocked fed bounced patted anything she puts herself to sleep no problems.

Same for nighttime sleep that initial kind of going to sleep easy as anything but I feel like her night wakings when she wakes up in the middle of the night she is starting to need more and more help to go back to sleep and I just it's kind of something I'm not really sure how to navigate at this point. Yeah so look option one is to move her to her own room and just see what that does because then you've got the same sleep associations day and night you know same sleep space and the fact that she sleeps well there during the day means that potentially actually she should go sleep there at night as well. You could have a good monitor and you'll hear her and you'll be able to get to her in good time as long as you feel safe with her being as far away as she is you know in terms of security in South Africa then I actually probably wouldn't mind it you know I would probably say why don't you guys try it why don't you do it for one night or two nights and see what happens because you might find that she just sleeps altogether better so I would definitely look at that.

The other things I would look at just I mean just a couple of things one is her day sleeps because sometimes when little ones are very wakeful in the night it's because they're sleeping too much in the day and she's seven months old so what what do her day sleeps look like? So we've just transitioned to two naps actually in the last I would say week and we still have our day where our odd day like today is going to be a three-nap day which is fine we just work with it but basically if we're looking at her two-nap day she'll sleep about an hour and 15 minutes twice a day and she's got awake windows that are generally about two and a half to a push three hours. Yeah so in terms of dropping day sleeps she's early to drop a day sleep we normally drop from three to two at nine months but having said that she's having long ones so most babies at seven and a half months will go 45 minutes hour and a half and then kind of 15 to 20 minutes and they'll start to fight that late afternoon sleep. So the fact that she's doing an hour and a half or hour and 15 hour and 15 means that it's probably okay to drop it but what you're doing which is really good is you are some days actually letting her have her three which is how you would normally transition.

So I don't think she's having too much sleep so that would be the one thing that we'd be concerned about she's not having too much sleep so that that is a good thing. Yeah so I think you're going down the right track with with those day sleeps I wouldn't actually shift anything there. Yeah you know I'm very happy with her day sleeps I think for me probably the biggest problem and it's not really with her it's with me which I think is probably what all of this really boils down to anyway is that night and she's going through this phase at the moment where she's often waking up and she just feels a bit inconsolable and you know everyone's like oh it's teething or it's this or it's that or it's a leap or you know there's so many factors that could influence it and sometimes you just hit a point where you're like I don't know what to do and then you kind of rely on the tools that are maybe not frowned upon but like that you are trying to avoid because you want them to self-soothe then you worry that you're making bad habits for going forward.

So I want to give you three little tips the one is has to do with the her sensory systems the other one has to do with your emotions and the third one has to do with habits so I'm going to go through each of those. First of all let's let's just start with these sensory systems it sounds to me and obviously I don't know her and you haven't done the sensory profile have you done the sensory course on the parent sense app yet? No I haven't. You must do that.

It sounds to me like she might be a settled baby or maybe a social butterfly. Now both of those babies fall into the camp of having what we call a very high threshold for sensory information and they tend to be good sleepers, good feeders and the fact that you'd said to me that early on she let you in lightly or she was really kind to you people who've got sensitive and slow to warm up babies don't say that so I think she has got a high threshold. Now that means that sometimes they wake up at night because they're actually needing a little bit of extra stimulation in the day.

So one of the things that I want you to do during the day is I want you to add in a swing in the afternoon so take her to a park or set up a little one of those little tire swings or one of those little swings that have got little bars around them somewhere in your garden or I mean I set mine up and I had batistrades inside with a double volume space and I actually set them up hanging through the double volume space in my in one of my areas in the home and that's where my kids were swung and in the late afternoon between four and five before supper I want you to give her a good 15 minutes of swinging. So crazy as it sounds it feeds into the vestibular system which some social butterflies and settled babies need a little bit extra of so I want you to do that a little bit of sense. Second thing I wanted to mention was anxiety and there's super interesting research that actually looked at it looked at postnatal depression which I know that you don't necessarily have but often anxiety is associated with that and they looked at the incidence of sleep deprivation and postnatal depression and our logic would all go oh well if you sleep deprived you're more likely to have postnatal depression as an example but what they found was it could actually work the other way and that was that moms who were anxious tended to wake their babies at night which was completely counterintuitive but they would go in they'd hang over the cot and then if they couldn't see their baby breathing they'd put their hand on them and kind of see whether or not they were breathing and then they've woken them up so I don't know I don't know if that's been your experience.

So I probably wouldn't say I'm as bad as that but I definitely like she makes a peep and I'll be like oh is everything is everything okay and because I think she's kind of maybe transitioning she immediately looks at me and once you've made eye contact like that's it. Absolutely and you know I always I always say babies will give you a job if you if they think you need one and so when you come to the cot and you look at her she'll go okay well you're here you want a job I can give you one and that'll be I need to be fed I need to be soothed I need whatever talk to played with and so I think you're going to have to deal with a little bit of restraint around over responding to her and you having her in a separate room might solve that for you if you don't not going to move her to the separate room you're going to have to lie with your hands underneath you don't move like dead still and see whether or not she resettles herself and I think she'll surprise you I really do. So that's kind of managing your own emotions and then the last thing I want to mention is just around habits because you said to me that you're starting to do all the things that you think you shouldn't do so the only thing that you really shouldn't do at this stage is put her all the way to sleep and the reason for that is that she will start to expect that and little little babies so moms who are listening who've got babies under four months of age this does not apply to you because there's a lot going on under four months of age where little ones actually need to be soothed potentially all the way to sleep and they don't develop habits but at this age they can develop habits so remember that whatever you do to get her to sleep will be what she expects in the middle of the night at the moment she's super clever because she's doing that all herself she's putting her dummy in she's sorting herself up when she goes to sleep and she can do that throughout the night but if you do start feeding her all the way to sleep or rocking her all the way to sleep or you know patting her all the way to sleep it will become something that she expects every night so it's not that you can't comfort her or that you know that comfort is not something that I would recommend because that's it you know you can comfort her it's just that you need to do it with something that she can use independently so an example would be when she wakes I would lie on my hands so I can't get up so just like lie dead still and listen and I would try and listen for as long as she until she is distressed so if she's moaning and iffing and batting and whatever, you know, that sort of noise, leave her alone. If she's really crying, then at that point, you kind of start counting for one minute and listen to her. Because often from that distress, they'll still settle themselves.

And if they haven't, the next step is voice. So we're going to go from distance to closer. So voice is obviously distance and you're going to go shh, shh, shh, shh, you know, like just a little shushing sound to see if she'll settle.

And if she won't settle, then go over to her and just put your hand on her and maybe turn her on her side, if that's a position that she does well in. And often little ones like, you know, they get stuck on their backs or whatever. And then, so moving them onto their side is a good idea.

And then move onto her side or whatever position she likes. And then again, go to your bed and start with the shh, shh, shh again and see if that works. The big piece is that you are going to try not to take her out of her cut unless it's actually time that she needs for a feed, which at seven and a half months, she doesn't.

Yeah. Yeah. I think that's probably my, that's why I say I'm fairly certain that this is a problem of my own making and I can totally acknowledge that.

But then again, it's, you know, it's something that I just have to work through and I'm definitely going to try those tips and tricks because I do, you know, as much as I really rely on sleep as I'm sure everybody does, I also want her to have really healthy sleeping habits because I mean, it's good for her. This is the foundation for her. Absolutely.

Absolutely. And the other thing you can do is also just to make sure that her nutrition is good. So she should at this age be on three solid meals plus two snacks.

And you want to make sure that there's quite a bit of iron in there as well. So either red meats or some nice legumes or some dark green, leafy vegetables would be recommended. Well, listen, we love your book and I think Logan's favorite meal is the lamb and aubergine and the sweet potato, spinach, raisins and coconut cream or milk.

Those are her absolute favorites. And that is actually, and that raisin and spinach one is a fabulous one because raisins are full of vitamin C, spinach is full of your, you know, the raisins almost in raw because they can also then have the vitamin C in them as well, because obviously vitamin C is very unstable. So it might get, with heat, it might be degraded.

But that's wonderful that she's enjoying it. So your weaning journey has been actually pretty easy. It sounds like.

Yeah, listen, again, I'm going to be honest. I've been blessed. She has really been kind to me from, because one of my biggest stresses as well was this whole idea of choking.

And there's so much again, online where they're like, oh, choking versus gagging and be careful. And you've got to be so careful about everything you feed your child. And so the whole process for me has actually been quite a stressful process.

And I've had to work really hard at putting her in a high chair and putting a big smile on my face and making it like an exciting thing for her so that she's not picking up on everything that I'm dealing with. And because honestly, she eats absolutely everything I put down in front of her and she loves it. That's great.

Yeah. Look, that choking versus gagging thing is just so important. And, you know, a couple of weeks ago we had a podcast with Sammy Hammond.

And if anybody hasn't listened to that, Sammy Hammond is a feeding specialist and she has just weaned her seven month old. She's also got a seven month old. And she went through, you know, really understanding the difference between choking and gagging.

And, you know, it was so fascinating when she was talking because she spoke about how gagging is not just like something you should ignore. Gagging is something that's really important. Like you shouldn't interfere with it because gagging is massively protective.

And actually, when we go in and we do anything to stop the gagging, that's when the choking can actually happen. So, you know, you definitely want to ignore every gag. And I, in that podcast, spoke about the poker face, which is what you've just spoken about, which is where like the inside of you is dying and the outside of you is smiling.

So that's exactly what you do need to do. And that's probably why she's a good feeder. Honestly, Chelsea, I think, you know, you've obviously mastered the poker face and you've got a husband who is a good foil for you.

And I think that combination is probably why she's, you know, she actually has given you quite an easy, easy road here. Absolutely. I think probably my biggest thing is I never quite like, I want to do the, I think it's called the baby led weaning where you give them like bigger pieces of food to work with, plus the chunky purees and things like that.

But I'm always a little bit nervous with the bigger stuff. So I do do some bigger stuff, but I'm very hesitant and cautious with it, even though she loves it and we've never had an incident. So I think that's probably one of my bigger fears.

Yeah. So very interestingly, so many moms were asking Kath and I about baby led weaning that we've just added a new chapter into Weaning Sense. And that book will hit the shelves actually around about the time of this podcast coming out, because it's any day now it'll be available.

So the new version, new edition of Weaning Sense has a full chapter on baby led weaning. And very interestingly in there, we take you through the progression because you don't just jump into chunks of meat. You go through your very first food that you'd give your baby is steamed butternut, which is super soft and it crushes between their gums.

And so one of the things that we talk about doing is, and what I did with my little ones was what I called a two bowl approach. So whatever I'm making for them in mush, I keep aside some of the stuff that's really mushable between, like if you can squeeze it between your index and thumb and it comes out flat, you can actually pop that onto her own plate and then put that in front of her because baby led weaning is not about nutrition. It's about sensory experience and it's about engaging with the food and touching it, mushing it, putting it in your mouth, spitting it out.

It's all about that. It's not necessarily about the nutrition and the bowl is about the nutrition. Okay.

Yeah. It's always, it's good to remember because I think as well, we often put so much pressure on ourselves to kind of do it the right way. And like, I don't know if there is a right way, you know, you've just got to kind of find what works for you and works for your child.

And that's often different for different people. So it is definitely like exploratory as you go. Absolutely.

And it's, and I think that's, you've kind of really hit the nail on the head there is that it is so different from one mum to the next. And it's one of the reasons why I have a real issue with mums having strong opinions about the way that other mums do their babies, because the reality is you're not that mum and you're not that baby, your baby isn't that baby. And so it will be so different.

So some mums who are listening will only have gone down the baby led weaning approach and that really works well for them. And other mums can't go there because they also do fear things like choking and, and they also want to get the nutrients in. That's in their mind all the time, you know, but I think, as you say, baby's journeys can be super different.

So, but Chelsea, I've loved this chat. You've touched on so many points that I think really do resonate with a lot of mums, you know, from baby led weaning and weaning, and then all the way through to, of course, sleep and that sleep regression. So I hope it's been helpful for you too.

Oh, it's been amazing. Thank you so much just for the opportunity to chat to you. It's a real pleasure.

So go and try that swing and let me know how it goes. Thank you so much. Will do.

Excellent. Thanks, Chelsea. Till next time.

Thanks to everyone who joined us. We will see you the same time next week. Until then, download ParentSense app and take the guesswork out of parenting.

That's great yeah look that choking versus gagging thing is just so important and you know a couple of weeks ago we had a podcast with Sammy Hammond and if anybody hasn't listened to that Sammy Hammond is a feeding specialist and she has just weaned her seven-month-old she's also got a seven-month-old and she went through you know really understanding the difference between choking and gagging and you know it was so fascinating when she was talking because she spoke about how gagging's not just like something you should ignore gagging is something that's really important like you shouldn't interfere with it because gagging is massively protective and actually when we go in and we do anything to stop the gagging that's when the choking can actually happen so you know you definitely want to ignore every gag and I in that podcast spoke about the poker face which is what you've just spoken about which is where like the inside of you is dying and the outside of you is smiling so that's exactly.