**[0:00 - 1:24]**
**Meg Faure:** Join us for an enlightening episode where we delve into the wonderful world of early developmental milestones with our regular guest, Nina, who's mom to adorable 16-week-old Josh. Nina shares the delightful journey of watching Josh grow and hit all those little milestones now, things like rolling over and taking interest in the world. Here is what you are going to learn today. You're going to discover how to unlock the milestone of rolling and also the meaning of this really important milestone for long-term development. We also talk about the benefits of baby classes, the priceless perks of attending these sessions from making mom friends to gleaning expert advice, and also just ensuring that you have one-on-one time with your little one. And then if you have got a four-month-old and you are worried about sleep, then we are going to be tackling the notorious sleep regression topic head-on. I offer Nina step-by-step advice on gently guiding her baby towards self-soothing and independence on his sleep journey, so don't miss out on that. And then Nina's also still battling with car seat struggles. Josh, he cries every time he's in the car and so we talked a little bit about what she can do in that space. This episode was jam-packed with practical advice and heartfelt conversations that really will resonate with you if your little one is under six months of age. So whether you're curious about upcoming milestones, you're looking to overcome sleep hurdles, or you're just looking for support, this episode has really got you covered. Do not miss out.

**[1:25 - 2:07]**
**Announcer:** Welcome to Sense by Meg Faure, the podcast that's brought to you by Parent Sense, the app that takes guesswork out of parenting. If you're a new parent, then you are in good company. Your host Meg Faure 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 Parent Sense app, and catch Meg here every week to make the most of that first year of your little one's life. And now, meet your host.

**[2:10 - 2:37]**
**Meg Faure:** Welcome back mums and dads. Always good to have you join us on Sense by Meg Faure. This week is one of our fabulous episodes where we have a real mum come and join us and bring her questions of the moment. Today we have the pleasure of having Nina join us again. Nina has two little boys. We've been tracking baby Josh since he was really tiny, and that was his name in the beginning. I think you still sometimes refer to him as tiny Nina.
**[2:38 - 2:45]**
**Nina Clark:** Yeah, no, that probably won't ever leave him, even though he is the very opposite of that, but I'm sure we'll get to that.

**[2:46 - 2:59]**
**Meg Faure:** Brilliant. Well, it's always good to hear about your journey. And of course, he's 16 weeks old now, which means that we're going into really a big developmental shift. Lots happens around about the four month mark. And so we're going to be talking about that. So welcome back.
**[3:00 - 3:01]**
**Nina Clark:** Brilliant.
**[3:01 - 3:09]**
**Nina Clark:** Thank you for having me. Always such a highlight.
**Meg Faure:** Brilliant. So how have things been? Tell me some of the positives and fabulous things about this stage.

**[3:10 - 4:11]**
**Nina Clark:** Yeah, no, it really like now feels like such a fun time. This kid is smiling all the time, chatting a mile a minute, laughing, rolling over Meg, like literally now just before I jumped on this call, I had him on his play mat on his back and did something quickly in the kitchen and the oke was just suddenly on his tummy. And he did that earlier this morning as well. And for the past couple of days, he's sort of been doing like the rolling onto the side and then he gets a little bit stuck there thing. But now apparently we've gotten over that hurdle. So he's doing that. He's swivelling as well. So, you know, if he needs to get to something that's a little bit more on the side when he's on his tummy, he moves himself around there. But he's just such a like a little kid. Like I'm really now starting to enjoy. Well, not starting to, but like more and more every day. Just enjoying him so much.

**[4:12 - 4:43]**
**Meg Faure:** So that's so precious. And of course, rolling is such a variable milestone. So some people will be freaking out that their 16 week olds aren't rolling. And you know, big, big thing with rolling is that they have to have had a lot of tummy time in order to hit it at the targeted age. And the targeted age is around about four months. Some little ones do it as early as kind of 12 weeks. Some little ones do it earlier and then don't do it again for like weeks and weeks. And then others do it closer to six months, but certainly a 16 weeker who is rolling, it's absolutely spot on. So that's really good.
**[4:44 - 4:50]**
**Nina Clark:** That's so interesting. Babies who do it earlier and then they don't do it again. What is that? What's up with that?

**[4:51 - 8:00]**
**Meg Faure:** So that's actually something that's super interesting. We call it competition of skill. And I don't actually think that I've spoken about competition of skill before on the podcast. So it's very appropriate that we talk about it. So when a milestone emerges, a new milestone, and we see it a lot with walking and talking as well, sometimes they forget a prior milestone. So they would have worked on something and then something else comes in and it competes with their brain energy. And then they kind of almost forget the prior milestone and it can freak us out because we can think, "But I know that he can do this," you know, "I know he can roll." And suddenly he is now not rolling. And he's almost like seemingly almost forgotten how to roll. And then sometimes what they're doing is they're just consolidating some more of the underlying foundations that are needed to do it properly. And then they come back to it. So in the case of rolling, as an example, when you get a very early roller, it's often what we call log rolling, which basically means that they almost like flip themselves in a cylinder over. So like the head and feet go around about the same time, they just kind of go over flops. And it's not a very coordinated, skilled roll. It's more of a almost, you could almost say it's an accidental roll, but it is rolling, it does happen. But to really consolidate good rolling, you need to do what's called segmental rolling versus the log rolling. And the segmental rolling means head goes, shoulder goes, tummy goes, legs go, and you're like actively using all those little muscles to actively move over. And that's obviously a much more skilled execution of rolling. And so you get these little log rollers early on who kind of seem to forget how to do it. And then they go and they practise a bit more of the stuff that they need, which is things like lying on their back and playing with their knees and their feet or lying on their tummy and pushing up on their arms. And those two things together, kind of like a yoga exercise are working the core muscles around the back and the tummy so that when they do return to rolling, they now can do it in a much better manner, in a much more controlled manner. So that's usually why our very early rollers stop rolling. He, it sounds like to me is actually segmental rolling because what he's doing is he's getting, he got himself to his side and then he had to probably actually work quite hard this morning on working out, "Okay, so now I've got to go back a little bit more with my shoulders and get myself going over." So if you start to watch his rolling, he'll really be actually working his muscles, not just flopping over. So, yeah, but rolling is an incredibly important milestone because when you roll, the messages have to go from the left side to the right side of the body and therefore the left to the right side of the brain. And so it's a very central milestone for things that come later, like crawling, coordination, skipping weirdly much later on, because all of those things require big coordination between the two sides of the body. So awesome that he's doing it at 16 weeks. And if moms are listening and their little one hasn't quite got there, focus on tummy time, put little toys up to the side that they are incentivised to roll over for, put something on the side and maybe even kind of turn them towards it a bit and then let them do the last little bit. Those are all the things you could do to encourage it more and more.
**Nina Clark:** Brilliant.

**[8:00 - 8:24]**
**Nina Clark:** I went to a baby class this week where the lady was saying that, you know, as soon as they do start rolling, and I guess this makes total sense, you don't need to be as stressed about forcing the tummy time anymore, because obviously they'll just be rolling onto their tummies now anyway. They'll sort of be like guiding when they want to do that. Is that kind of correct? Would you say that kind of guidance?

**[8:25 - 9:51]**
**Meg Faure:** Yeah, I would still focus on the tummy time. And the reason that I would still focus on, sorry, I would still focus on floor time. So let's separate out tummy time and floor time. So tummy time, obviously we do because we want to activate the back muscles. Once they're rolling, they actually will choose their position. And so then there's no point in focussing on the tummy time. And that's probably exactly what she was talking about, is that because sometimes a mom will get stressed, she'll put her baby on her tummy and they keep flipping themselves onto their back. And then the mom goes, "They're not getting tummy time," but that doesn't matter. So she's spot on correct that the minute they're rolling, you're not trying to focus on them being on tummy time. But in terms of floor time, which is something different, yes, you absolutely must keep focussing in on it because now that he's got it, he's actually going to, first of all, enjoy floor time a bit more because he's actually going to be able to control it himself instead of being a victim of gravity. And so, yes, I call it tummy time, but it's just floor time is really important. And also what's interesting is that some little ones will roll from back to tummy and other ones roll from tummy to back. And if you go and look at the milestones, any chart you look at will usually say one and then the other. And actually the reality is that it's very random. Some little ones go, like Joshie has gone from back to tummy, right? Or has he gone from tummy to back?
**Nina Clark:** Back to tummy.
**Meg Faure:** And soon he will do tummy to back as well. So he'll get that right, yeah.
**Nina Clark:** Okay, fab.

**[9:51 - 10:21]**
**Nina Clark:** Yeah, I think that is, and she was saying, if they haven't rolled yet, you are potentially just not giving them enough time on the mat. So maybe your baby is strong enough, you're doing a lot of time with them upright, holding them so that they're clearly engaging all the muscles, but maybe they're just not spending enough time flat on the mat, whether it's front or back and actually setting them up for being able to roll.
**Meg Faure:** Exactly, exactly.

**[10:21 - 11:08]**
**Meg Faure:** And I think one of the biggest risks there that other moms might experience, you may not have, is starting to rely on Bumbo seats at this age. It's very tempting. So Bumbo seats are those kind of wide base, low on the floor, little chairs where they kind of stick their legs through two little holes. Well, they're not holes, they're kind of indentations. And it's very tempting to put your little one into Bumbo seats at this age. And particularly as moms start to wean, they like to put their babies into Bumbo seats and then they leave them there for a while. And the Bumbo seat is a real inhibitor for developing core muscles, because they're just being lumps sitting there. It doesn't help them to sit early. It really doesn't help them with crawling and later on rolling, so rolling and then later on crawling. So he obviously probably isn't having too much Bumbo seat time, but I do caution people against that for sure.

**[11:10 - 11:59]**
**Nina Clark:** So actually just a question on that, I suppose, as an alternative, we don't have a Bumbo. So when I do need to put him somewhere where he can also be upright and he wants to see, because I think sometimes he gets frustrated when he is on the floor and we're vibing somewhere else and he can't see us. We've got the BabyBjorn bouncer and he sits in that. We've actually, if he's on the floor and he's around us and it's sort of on a play mat, we actually leave it unlocked and then he sort of flips himself out and he does like a lot of the movements and he's definitely still using his core. So I wouldn't say he's just chilling there and the muscles aren't working, but that's our alternative. Is there anything, I mean like what would you say in terms of like needing a thing to keep them somewhere? What's the options?

**[12:00 - 13:32]**
**Meg Faure:** It's like with most things in parenting, it's kind of the 80-20 rule. For 20% of the time, if you're needing to get your hands free and pop them somewhere that they have to be, use these things in moderation. And that goes for things like the Jolly Jumper, any of those little kind of springy seated devices. And even I suppose the Bumbo seat, although less so because that's very passive. But yeah, do try not to overuse it. And I think a lot of moms have those beautiful baby swings and that keeps the little babies calm when they're going through colicky patches and then it just becomes easy to leave them in there, those swings that swing themselves. And they tend to be very passive positioners. So going with the 80-20 rule, try and limit the amount of time in those. But like you say, there's just always comes a time in the reality of life where you've got to rely on tools that just make your life sane as a mom. And so maybe you're doing something with your older little one with Max and you're potty training him or whatever, you're pushing on a swing and you just need Josh to be safe. And so using it in those situations, or he just wants to be upright to see the world, like you said, those situations, I would use it, but I would try and limit it. It's better the minute you get to a location where there is a floor that is safe, get your little one out of a car seat, a pram, a Bumbo seat, whatever it is, get them on the floor as much as possible. I also love the fact that you're going to a mom and baby group, just out of interest, which one are you going to?

**[13:33 - 14:19]**
**Nina Clark:** I'm going to Toptots. Yeah, it's called Toptots, the one in Gardens. And I've just gone for a trial class now. And I think I'm only going to sign up with him in the second semester, just because there's so many holidays and getaways this next couple of weeks. But I didn't actually originally think it would be necessary for me to go, but obviously, A, lovely to be hanging out with other moms who are going through a similar phase. But B, you actually do learn things. I walked out of there going, "Okay, quite a few little nuggets that I picked up on that I did not think about." Even if it is second time around, there's always something that you can learn. So yeah, I think it is pretty valuable.

**[14:20 - 17:12]**
**Meg Faure:** I'm a huge fan of them, but not for the reasons that people always think. Sometimes you think "my baby needs to go because then they'll achieve their milestone." So there's very much a baby focus, stimulation focus on it. But actually, the beauty in those occasions and those outings are so much richer than that. Number one, you've mentioned one, which is connecting with other moms. And in fact, one of my daughter, my third daughter was a little bit of a late bloomer. So I knew I had to be very intentional about making friends with moms of her contemporaries. And so those were some of my closest friends I made at my mom and tots class. I went to Mom's Tots in those days. So that's the first thing. It definitely connects you with other moms and we need our village. The second thing is that sometimes in our busy lives, and particularly if you've got a mom who's really working a lot and very preoccupied, and often in our new hybrid environment where we often working from home, I mean, we're working just as hard as we ever would, if we were going into an office. And so we're not really having good quality time with our little ones. And also, if it's your second or your third, they don't get as much as the first. And so, you know, it gives you like really focused time with them. But for that reason, I always do think it's important to make sure you really are focused on them. They're not just there for the social. And then of course, there's the wonderful input from these amazing women who run these franchises. What I do always say to moms is two things. One is don't go to one that's miles away from you, because you kind of want to make your village in the area where you live. And that particularly, often those moms will be the moms that you'll start a playgroup with, or that you do afternoon play dates with, or that your child actually ends up going to school with, and you'll be going to school hopefully in your area. So don't drive 45 minutes to get to that one woman that everybody talks about. Like, do it in your village, number one. And number two, don't be over-pressurised about it. If your little one doesn't love it, and if you're not like feeling the love around it, then that person is potentially not the right person for you. And then the second thing is that you want to choose somebody who really fits well with you. And, you know, I actually really shopped around with my third child. My first two, I just immediately gelled with the person. She was in Kommetjie. We lived out in Noordhoek at the time. So I gelled with her immediately. It was awesome. My third one, I actually shopped around. Like, my third one, I went to like three different groups before I found the person who I really liked and loved. Her name was Lisa in Constantia. And so, you know, you actually do need to just make sure that the mix is right. And I mean, I remember taking Emily to, I think it was called Kindermusik, thinking "she's so musical, let me take her to Kindermusik." And the pace, and just what was going on was just terrible for her. And she hated it. I didn't like the person who ran it. And so, you know, I shopped around a bit. And so I think those are the important things. Choose one in your village and the other one, choose the right person.

**[17:13 - 17:26]**
**Nina Clark:** No, absolutely. That's such a good point. I think I actually need to try one or two others out. I didn't even think about, yeah, sort of just sussing out whether there's anybody else who might be a better fit, so.

**[17:26 - 17:32]**
**Meg Faure:** Yeah. Yeah. Excellent. And any other challenges? Because 16 weeks does bring some challenges sometimes.

**[17:34 - 18:12]**
**Announcer:** This episode is brought to us by ParentSense, the all-in-one baby and parenting app that help you make the most of your baby's first year. Don't you wish someone would just tell you everything you need to know about caring for your baby? When to feed them, how to wean them, and why they won't sleep? ParentSense app is like having a baby expert on your phone guiding you to parent with confidence. Get a flexible routine, daily tips, and advice personalised for you and your little one. Download ParentSense app now from your app store and take the guesswork out of parenting.

**[18:13 - 18:17]**
**Meg Faure:** And any other challenges? Because 16 weeks does bring some challenges sometimes.

**[18:19 - 21:28]**
**Nina Clark:** No, I do feel like we are potentially knee-deep in a bit of a regression. I don't know if it's worse. It doesn't feel like it is terrible at the moment. So he has, up to this point, been definitely a very good night's sleeper. I would say from maybe two, three weeks in, he was either sleeping through, let's say until four or five in the morning, or he would maybe do one very quick feed, max two on a very bad night. But it would be, you know, pick him out of the cot, on the boob, five minutes, down again, and he's happy as Larry. So also, you know, it didn't really impact my sleep. The past couple of days, he has had a few nights, but then it'll get better. And then there'll be like last night, he would have about four wake-ups. Again, not screaming, you know, not massively harrowing for us, but it is a wake-up. It is, you know, he does need a feed to be able to settle again. And then the falling asleep as well is suddenly a lot more difficult. So where I would usually just, I am a feed to sleep mom, but I would, you know, put him on the boob, he would fall asleep. Sometimes it would take, you know, up to sort of 40, 45 minutes for him to like properly settle into sleep before I can put him down, which is okay. Usually I had the time for that, but now he would either really struggle to sort of settle onto the boob and make and find it a comforting place to be, or he would feed, but then still be awake. And then it would take all of my techniques to try and get him down. And an hour and a half later, we're still there. So, you know, it would be everything from the bouncing, the rocking, the walking around, taking him outside again, bringing him back in, lying next to him, curling him up a little bit, you know, trying to do dummy with that or boob with that or whatever. It just, nothing would cut the mustard basically. So that's becoming a bit frustrating. And then the day sleeps as well, which has actually been Josh since the very beginning. So I'm not going to lump that into the regression, but it is something that I am struggling with. If we're talking about challenges, I suppose, is that he really is still very dependent on being on someone for his day sleeps. And so he can sleep for hours if someone holds him, literally that boy can just sleep the whole day. But if we don't, every single time I put him down, he will wake up. And so I'm now struggling with this toss up of, "Should I just, you know, train him to now just sleep on his own? And, you know, he sort of give up on however many hours of sleep that he would have had during the day, because, you know, obviously those sleeps are then going to be very short. Or do I just lean into it and hope it passes and just hold this kid and he gets his multiple hours of sleep a day?"

**[21:29 - 27:24]**
**Meg Faure:** Yeah. So yeah. And I remember our conversation very well in our last podcast where we actually spoke about the contact napping in the day. And at the time he was sleeping so well at night. And I said to you, "You know what, if they're sleeping well at night and you're enjoying the contact naps, you can go with the flow." And I think I did say to you, "But this could become a habit." And that is where we've arrived. And, you know, this is one of the really hard parts about being a sleep advisor as I am, because part of you wants to say to moms, "Go with the flow," you know, "hold them. The time is short, feed to sleep if you can do it and just, you know, go with the flow," which is what we had spoken about last time. But another part of me does want to say that actually you are going to end up with habits. And that is definitely where we've landed. So at this point, and, you know, often up until about 12 to 14 weeks, they don't have long-term memory. So they don't have these sleep associations that "this is how I fell asleep at 6 p.m. Therefore, this is what I need at 10, 2, 5," you know, all the way through. So they don't have those associations where now they really do. The way that they fall asleep for most of their sleeps is then what they expect throughout the night. And they actually need, they start to need a huge amount of support in order to actually go back to sleep and they won't stay asleep. And unfortunately, I would love to say to you, this is going to get better, but I don't think it will. I think that this is, you're going to either need to get your head around the fact that you're going to do multiple night wakings, and you're going to have to use strategies to try and get them to sleep at all costs day and during the night, or you are going to have to go, "Right, we're going to have to do some sleep training." And, you know, the sleep training doesn't have to be cry it out. It doesn't have to be hectic, you know, particularly not below six months, because he's also not on solids yet, I presume. So, but I do think that you're going to start to have to aim high and you're going to have to create consistency, which means that my suggestion would be that you stop feeding him to sleep ever, that's day and night. You separate sleep from feeds. So if it's a feed time, it's a feed time, you're sitting upright. So, you know, kind of a whole thing of like waking up at two o'clock in the morning, sticking him on the boob and then, you know, that you actually stop doing that. So this is your alternative option. And you go into very much "feed is for feed time." There's obviously comfort with it, but it's not associated with sleep and you separate it out. And then what you do for every single sleep, day sleeps and evening sleeps is you really work very hard on a sleep routine that sets them up to fall asleep. So that means you'll give them a feed. You'll then have the room dark. You'll do the sleeps consistently in the same place. It's just for a couple of weeks or a week while you set this up. It doesn't have to be forever, but once, because once you've got a good sleeper again, then we start to break rules again, but you need to be quite rigid while you're setting this up. So day sleeps, bedtime and middle of night, room is dark. His sleep space is always consistent. So if that is next to your bed in a co-sleeper that's there, if it's in his own cot, it's there, preferably not in your bed now, 'cause that's going to make it very hard for him not to just access your breast all the time. And then you're going to try strategies like initially you can rock him to drowsy. And we're going to have to be honest about what does drowsy look like? What does asleep look like? And drowsy is he's kind of still, eyes are open. His eyes are, eyelids are heavy rather than his eyes are closed. And the minute he looks like he's drowsy, actually putting him down and then supporting him all the way to sleep. So sitting with him and stroking him, patting him, whatever it takes at that point, you stay with him. Now, what that does is you're not taking away your comfort. You're not taking away your love. You're still supporting him and you're teaching him to self-regulate, but you're not doing the final bit. He has to do it himself. And you do that consistently for day sleeps, bedtime, and in the middle of the night. So if he wakes up at 10 o'clock tonight, give him that feed, but do it sitting upright in a chair and then put him down, make sure that he's actually awake. He hasn't fallen asleep on the breast, put him down and then sit with him and be super consistent. And for about three days, you might find that you look at 45 minutes soothing sessions where you like really are working hard with him to help him settle. He might do a bit of crying, but you're not leaving him. So that's why I say it's not a cry it out scenario. You are with him. You're stroking him. You're using your voice. You're using your touch. You're using your comfort, but you're not doing that last part. And what you'll usually find at this age, if you do do it at 16 weeks, you know, before six months is that it's actually quite, it's quite easy. It isn't as hard as you think. Within three nights, he works out that actually being out of your arms and going to sleep is actually a little bit easier than being in your arms and being fussed with and walked with. And so they get it. And then quite quickly within a week, you would definitely see that you're able to then put him down and you're not, don't have to support him as much. So then maybe you just take your hand away and you sit next to him and use your voice. And then a few nights later, you just walk out the room and he will put himself to sleep. So that method of sleep training is more gentle and it is developmentally appropriate because, you know, and I think this is where people get stuck is that they think, "Oh, I'm, you know, this feels very draconian and, you know, he's so little. And so why should he be learning to do this himself?" But actually, when you look at developmental milestones, just like we spoke about rolling earlier, the developmental milestone of self-regulation to put myself to sleep is a milestone that does need to be achieved. If they miss it now, it doesn't matter. You can teach them later, but at some point he has to learn to do it. And this is actually quite an easy age to do it because those habits aren't long-term entrenched. If you've got a nine-month old who's breastfeeding to sleep, that's hell. Like breaking that habit is really hard. And so that's why I say, you've almost got to pick it now for the long-term. Either you're going to feed to sleep, support to sleep and do a lot of the work yourself, but then expect that for the foreseeable future. Or you can start now to put in place strategies that make him a little bit more independent to sleep.

**[27:25 - 28:30]**
**Nina Clark:** Okay, amazing. Well, that is incredibly encouraging to know that this is an easier time to do it. One thing that you mentioned and then a follow-up question as well, but the other encouraging thing that you said, which, because last night I was just, again, it took about an hour, hour and a half and I was just like, this boy is so frustrated because everything I'm doing is not working. So he's just getting more irritated. And especially when you're walking around and it's the bouncing and all of that, and he's frustrated. And I just thought, "Oh, he must hate this. We both do." But what you said about, they actually figure out that this is so much calmer and potentially so much more comfortable for me to just fall asleep in my cot on my own. I think that was quite encouraging to hear. With regards to, so you were saying sort of try and keep the routine the same or consistent for every bedtime or for every nap. Would you also say that now is a good time to be quite rigid about time of sleep as well? Or does that not really make a difference?

**[28:31 - 29:59]**
**Meg Faure:** Not yet, but be rigid about awake time. So, you know, in the Parent Sense app, there is the awake time for him and it's about 75 to 90 minutes. So 75 is what I would be looking at in the morning. So when it gets to about an hour and 10 minutes, I would be starting to get him into a wind down space in the morning. And the late afternoon, you can go up to an hour and a half and then get him into a wind down space. When you've got two kiddies, it can be quite limiting in that, like you've got to now go and take Max to a swimming lesson, or you've got to pick him up from school or whatever it is. And now you've got a little one who's not going to have regular day sleeps in the right place, not just falling asleep in the car. But as I said, it's just a short period until he's sleeping well. Once he's sleeping well, then you can start to be much more flexible. And one of those sleeps can be taken in the car or on the run or whatever, but just until you've got it sorted out. And I would say, just do seven days. What I would actually recommend, Nina, I don't know if you've ever done my sleep course. Have you done my sleep course?
**Nina Clark:** I haven't, no.
**Meg Faure:** Okay. It is inside the ParentSense app. So moms, you can find it there. And Nina, I'll definitely send you a link so that you can do it. Moms who are with one of our medical aids do it for free, but otherwise moms do have to pay for it. I'll definitely send it to you because it takes you through the science behind sleep in 10 lessons. And you kind of move through each one and it really empowers you. And I think if you're empowered, you know what you're doing, you know that crying is not going to...

**[30:00 - 30:09]**
**Meg Faure:** He's going to be okay. And you'll see a lot of what I've said to you today is actually in the course in a much more structured manner and I think it will really help you.
**Nina Clark:** Oh, amazing. Well, thank you, Meg. That's very kind of you.
**[30:09 - 30:13]**
**Meg Faure:** So, Nina, it's been an absolute pleasure as always. And hopefully when we chat again, he is back to his good old sleeping self.
**[30:13 - 30:16]**
**Nina Clark:** I'm sure he will be. Thank you so much for the advice.
**[30:16 - 30:17]**
**Meg Faure:** Pleasure.
**[30:17 - 30:20]**
**Nina Clark:** I'll check in with you again and let you know how it goes.
**[30:20 - 30:23]**
**Meg Faure:** Excellent. Thanks so much. Bye, Nina.
**Nina Clark:** Bye.

**[30:23 - 30:33]**
**Announcer:** 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.