Bed-sharing and your baby: the facts
Settling your baby at night

Your baby needs to know you are close during the day and night. They may wake because they are hungry or for comfort. If a feed alone doesn’t settle them, skin-to-skin contact between you both can be useful. If your baby cries for unusually long periods, they may be unwell so consult your Doctor or Child Health Nurse. When you are very tired, it may be safer to breastfeed lying down in bed rather than feeding on a chair or sofa.
Breastfeeding and sharing a bed with your baby

The public health organisation, Red Nose, encourages breastfeeding because it reduces the risk of Sudden Unexpected Death in Infancy (SUDI), including Sudden Infant Death Syndrome (SIDS). Many mothers find it easier to breastfeed at night while sharing a bed with their baby as they can respond more quickly to their baby’s needs. Mothers who share a bed with their baby tend to breastfeed for longer, both exclusively and in total duration of breastfeeding.

When sharing a bed with their baby, breastfeeding mothers tend to form a protective ‘C’ shape around their baby (see images). This position, which many mothers adopt by instinct, helps to keep their baby at breast level and stops them from moving under covers or into any other bedding. When breastfeeding next to their mother, the baby will usually be lying on their side. When they are not feeding, they should be placed on their back to sleep. If you think you may fall asleep during the feed, make sure they have room to return to their back after the feed where their face will be clear of your breast and any bedding. It is very important to ensure babies have a clear face and head in shared sleep spaces to protect their airway. It is also important to avoid any objects or positions that may place baby in a chin-to-chest position which is likely to make it harder for a baby to breathe. Ensure pillows are removed from the baby’s sleep space.
Sharing a bed with your baby

*Red Nose* recommends that babies sleep in their own safe sleeping space next to the parent bed for the first 6 to 12 months of life to help prevent infant deaths. However, *Red Nose* recognises that many parents may choose to, or have no option but to, share a sleep surface with their baby. The evidence indicates that it is not bed-sharing alone that is dangerous, but other factors which may interact in bed-sharing and shared sleep environments to increase the risk of SUDI for a baby.

Many parents find that bringing their baby into their bed helps them to care for them at night. Australian studies have found that around 75% of babies spent at least some time sharing the parent bed in the first 3 months of life, whether parents had meant to bed-share, or not. It’s important to know how to make bed-sharing safer in case you happen to fall asleep with your baby. Unplanned sleeping settings are often the most dangerous for babies and most likely to occur when parents are exhausted or their baby is ill. Adult beds were not designed with infant sleep safety in mind and may contain hazards for babies. There are also some situations where shared sleeping greatly raises the risk for babies. Parents should avoid these.

**It is not safe to share a bed with your baby:**

- If anyone sleeping in the bed is a smoker or if the mother smoked during pregnancy.
- If you have consumed any alcohol or taken illegal drugs or medicines that make you sleepy.
- In the early months, if your baby was born very small or premature.
- If you are very tired or have taken sedating medication, to a point where you would find it hard to respond to your baby.

In addition:

- Don’t sleep with your baby on a sofa, waterbed, armchair, bean bag or other soft surface. Sofas are particularly dangerous due to the risk of entrapment in gaps, and should be avoided.
- Don’t let your baby sleep in a bed, on a sofa, bean bag, car seat or pram if no one is watching them.
If sharing a bed with your baby:

- Put your baby on their back to sleep, never on their tummy or side.
- Create a clear sleep space for baby to sleep.
- If your baby lies on their side to breastfeed, return them to their back to sleep. Do not place items around them that may stop them lying on their back to sleep. Make sure that bedding cannot cover your baby's face.
- Avoid pillows in baby's sleep space. Pillows are a suffocation hazard or may position baby's head in a chin-to-chest position which reduces baby's ability to breathe freely.
- Make sure the mattress is firm and flat.
- Sleep your baby beside one parent only, rather than between two parents.
- Ensure your partner knows your baby is in the bed.
- Instead of bedding, a well-fitting infant sleeping bag may be used so that the baby does not share the adult bedding.
- Don't wrap or swaddle a baby if sharing a sleep surface.
- Make sure baby can't fall off the bed. If necessary, place the mattress on the floor. Do not use pillows as barriers as they make it more likely for a baby to suffocate.
- Ensure that baby cannot get trapped between the bed and the wall. Move bed away from the wall.

- Tie up long hair and remove all jewellery including teething necklaces from baby during sleep (if used).
- Avoid use of doonas. These bulky, soft items create a suffocation hazard with the potential to cover baby as bed-sharing parents and babies move during sleep.
Contacts

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References

Full references are available at aba.asn.au/bed-sharing

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