

Below is a response to a La Leche League leader with three young children (5 and under) who wrote to us about her concerns with Babywise. Her original comments are bolded and in quotation marks. Though this dialogue occurred in 2005, this mother's comments were based on the 1993 version of Babywise which she personally read.

The responses were given by the Reeds, GFI leaders for over 10 years. The responses have been edited slightly to remove names and personal references, but are otherwise substantially the original answers. This dialogue is worth sharing, as it is a very good example of how opinions of Babywise (and the Ezzos) are formed by pulling statements out of context or using gross generalizations that cannot be substantiated, and how a reasonable dialogue can bring to light the truth.

Unfortunately, though many hours were spent trying to give a thorough and accurate response to this mother's concerns, she did not respond or acknowledge receipt of this letter, even though her husband had encouraged her to engage in the dialogue. We find this too frequently from those who openly criticize the Ezzos. They are quick to criticize but not so quick to respond when held accountable for their erroneous words.

Dear [name] and [name],

Before we begin, we'd like to reiterate that our goal here is not to make you change your parenting philosophy. We support your right to disagree with the Ezzos' teaching. We only want to offer a different perspective that may be helpful in your evaluation of the GFI ministry. This is a lengthy response, but after reading your e-mail, we felt that it was necessary to give as complete an explanation as possible. We'll take your comments one by one and try to give clarity where we can.

1. "But my major concern with it [Babywise] is that it presents as fact things that are completely unfounded."

Response: From what we can gather, there is very little *conclusive* research in the area of infant management from the medical community, either from the demand feeding side, from the scheduled feeding side, or from the Ezzos' flexible routine side, which is a balance between the two. There are only recommendations from the AAP which change from time to time, and which are open to wide variances in interpretation. When true scientific data is presented, we should certainly take heed knowing that we are ultimately responsible for the health and welfare of our children. A perusal of Dr. Sears' The Baby Book or Dobson's The Complete Book of Baby and Child Care would yield similar statements which are basically well-considered opinions, but not necessarily true "facts." Sears also uses the phrase "research shows" several times in his book but never actually lists the various publications that he is referencing. We will certainly stand corrected if you are aware of some studies that prove the superiority of one over the other with conclusive evidence clearly demonstrated. It is curious how in many cases, even in areas where there does seem to be conclusive scientific research, scientists and physicians today will write books that are totally at odds with one another--and both claim to prove their points using the latest research. So even if there *were* medical studies which seem to prove one over the other, we might take them with a grain of salt, depending upon how the study was structured, and might also look for consistent observable results to prove the validity of a particular theory. Each author is necessarily trying to make his case for the philosophy he is advocating, and in this "information age" we hope that people have learned to be discerning and not to believe everything they read—whatever the topic.

2. "...rather the authoritative tone seems to be an attempt to bully the reader into accepting its assertions blindly."

Response: As you know, opinions are highly charged on the topic of infant management. Some attachment parents are completely sold on their theories, and some with other views are completely sold on theirs as well. This is nothing new. It is, however, an author's job to present his case as clearly and as persuasively as possible. Whether it is The Baby Book, The Baby Whisperer, or Babywise, each book makes a clear, strong case for the philosophy the author is advocating. Parents are certainly free to read these books and reject their conclusions, and no doubt some do. Most people take what they can get from a book and leave the rest. If a parent reading a particular book already embraces a completely opposite philosophy of parenting however, and the book challenges some of their strongly held beliefs,

they are likely to take offense at the content of the book no matter how diplomatically the information is presented. A “bullying” tone may be something that is inferred by a reader whose theories and presuppositions are being challenged by the book, but we don’t think that is the perception of the average reader. The fact that the book remains so popular, ranking always among the top few books on infant parenting shows that people continue to enjoy it, share it with friends and family and recommend it to others. It could also be noted that we are not aware of any other authors (Sears & Dobson included) who make the strong point that the Ezzos make routinely in their material—namely, that **parents should search out other methods, do their own research, then come to their own conclusions about which methods will work best for their family.** This type of advice is not characteristic of “bullies” in our opinion. As to leading the reader to accept their conclusions “blindly”—we would assert that it is the job of the reader (of *any* book) to evaluate the evidence presented and to accept it or reject it based upon that evidence. Having said that, *Babywise* can speak somewhat authoritatively since one of its authors is a board certified pediatrician and a member in good standing of the AAP. Also, since the concepts taught are well within the guidelines set by the AAP, the authority of the AAP stands behind most of the conclusions made in it as well.

3. “A child does not experience separation anxiety when his mom is with his dad.”

Response: This statement can be misconstrued when taken out of the framework of the chapter in which it is found. However, the whole context surrounding the statement is that parents need to be careful to nurture their marriage relationship and make it as much a priority as nurturing the relationship with their baby. Just prior to this statement, parents are encouraged to continue to go out on dates if possible, and occasionally should feel free to leave the baby with grandma or someone they trust *if they so desire*, so that they can get some time together to make their marriage a priority. In all practicality, babies less than 6 months old are (generally) pretty easy to take along, so most parents will choose to take their young babies with them on their dates. But as you can see, given the context, the statement does make sense. An objective reader would understand that the point being made is that a young child (an infant under six months as referenced by the scope of the book) will benefit far more from his parents taking time to nurture their own relationship in the long run than it will from having mom’s physical presence at all times.

FYI, in the later edition of *Babywise*, a similar statement is under the subtitle “Achieving a Balance” (which further gives it context) and reads slightly differently: “Date your spouse. If you had a weekly date night with your spouse before the baby, get back in the swing of it as soon as reasonably possible. A friend or relative is quite capable of meeting your child’s basic needs. The baby will not suffer separation anxiety from one night without mom. If you never had a date night, start now!” So the context makes it clear that the authors are saying the baby will be fine if mom goes out on a date with dad and leaves baby with a trusted person now and then - reading anything else into the statement would require taking it completely out of context.

Speaking from our own personal experience with our five children, we have certainly found this to be true. Babies under 6 months of age do not generally experience what would be considered “separation anxiety” when separated from mom (or dad, for that matter) for brief periods as long as their needs are being met. Dr. Sears makes similar comments regarding separation anxiety in infants less than six months of age. So this statement in the context in which it is made does ring true. Baby’s needs do need to be met—but it doesn’t *always* have to be mom who meets them, and mom and dad also need to make sure their needs are met with each other (and the rest of the family) or the consequences of strained marriage can indeed produce anxiety in the child.

4. “Neither conscious or unconscious memory function can take place in the low-oxygen environment of the uterus. Memory function and synapse development depend on the brain receiving highly oxygenated blood, which comes from breathing.”

Response: In order to evaluate the context of this statement, we have searched page 35 and all surrounding pages in our 1993 edition. We actually do not see this statement anywhere in that edition, however we do see a similar statement in the 1998 edition: “More likely, newborns have zero memory at birth, let alone the ability to recall anxiety that is specific to the experience. Memory function and synapse

development depend on the brain receiving highly oxygenated blood which comes from breathing. Breathing cannot begin until the lungs inflate, which occurs after, not during birth. In addition, higher brain centers are still developing at the time of birth. Even if there is any minimal memory function, enough sophistication for baby to associate birthing with trauma remains highly unlikely.” We don't personally know the medical basis for these statements. If you know of any studies which might refute the statement, please let us know. We are not trying to be facetious here, but we personally have no memories of our pre-birth period, nor do we know anyone else who does. I do remember the matter being discussed in my Psychology classes in college, but it was more of a "fringe" concept than even some of the other psych theories that are more commonly accepted but have no basis in fact. I am also aware of regression studies by those behaviorists who are sold on the idea that there is a real prenatal consciousness that is logged into memory but these all seem anecdotal and really without reliable and consistent results. If it would help, we could check with the Ezzos and Dr. Bucknam to see if they can shed some more light on the matter. The Ezzos also have a pediatric neurologist who also serves on the GFI medical advisory board and I'm confident that this issue has been discussed. It may be one of those things that medical professionals disagree on--or it may be a commonly accepted supposition of the obstetric/pediatric medical community.

5. “A mother who takes her baby to the breast 12, 15, or 20 times a day will not produce any more milk than the mom who takes her baby to the breast 6-7 times a day.”

Response: The newest edition of *Babywise* reads slightly differently: “Certainly a mother who takes her baby to the breast seven times a day will produce more milk than the one who offers only two feedings. However, there are limits. A mother who takes her baby to her breast twelve, fifteen, or twenty times a day will not NECESSARILY produce any more milk than the mom who takes her baby to the breast eight or nine times a day.” (p. 67) (emphasis ours) This revised wording insures that the "for example" number of feedings used is within the AAP guidelines of 8-12 feedings a day for newborns. (The statement is clearly not intended to be a recommendation on how many feedings are acceptable, but we presume that the change might have been made to avoid it being misconstrued that way.) Certainly we don't want to argue milk production specifics here, but it is a supply and demand driven cycle, as you know. So the statement is a valid one. Just because a baby is nursing more frequently does not NECESSARILY mean that he is taking in any more milk, and therefore the mother does not NECESSARILY produce more milk from more frequent feedings. Many other factors come into play here, including (but not limited to) how long the baby nurses at each feeding and how efficient he is at sucking, both of which determine much milk the baby takes in at each feeding.

So, given the context of the entire paragraph (discussing whether milk production is directly related to the number of feedings offered) it seems that what is merely being stated is that a baby COULD get pretty much the same number of calories whether he feeds 20 times a day or 8 times a day. With the former he might simply take in smaller portions at each feeding, and with the latter, larger portions. Therefore, the quantity of milk being produced COULD be exactly the same in both cases. We don't think that there are any studies which could be cited to prove that the quantity of milk produced is always tied directly to the number of feedings offered, but we'll stand corrected if you are aware of some. Sorry for the long explanation, but this is an important question and it needed a thorough answer. We know that you probably have far more training in lactation than we have (though we have nursed 5 babies and read lots of breastfeeding books). But we hope we were able to show that, while that original statement could have been worded more carefully (using the word “may” instead of “will” would have helped), what they intended to say (as evidenced by the revision in the updated versions) does make medical and logical sense. (There is also a thorough discussion of qualitative vs. quantitative feedings on p. 67. We are not sure if this information was included in the 1993 version.)

6. "Between 9 and 12 months the nutritional value of breastmilk drops and food supplements are usually needed. Nursing beyond a year in our society is more out of preference than absolute nutritional need."

Response: Addressing the second statement first, "Nursing beyond a year in our society is more out of preference than absolute nutritional need..." we have copied below a direct quote from the most recent breastfeeding recommendations by the AAP:

"The policy recommendations include: ... Exclusive breastfeeding for approximately the first six months and support for breastfeeding for the first year and beyond as long as mutually desired by mother and child." (<http://www.aap.org/advocacy/releases/feb05breastfeeding.htm>)

So the Babywise comment seems to echo this recommendation from the AAP. Similarly, Dr. Sears, while encouraging breastfeeding beyond a year if desired, clearly makes the point that "Weaning is a personal decision. Basically, when one or both members of the mother-infant pair are ready, it's time to wean." (p. 188, The Baby Book) That is not to say that either Dr. Sears or Dr. Bucknam believe that breast milk does not offer immunological benefits well beyond a year--or other less measurable benefits, but that they both concur that the "absolute nutritional need" is not there due to the baby's growing ability to eat other foods.

Now, the first statement, "...Between 9 and 12 months the nutritional value of breastmilk drops and food supplements are usually needed..." is quite true. While no studies were cited for this in the Babywise book, perhaps that is because this fact does seem to be rather well documented in the medical literature and they did not anticipate that it would be questioned. We came up with several different medical sources which confirm the statement (see two of them below).

In the copy you sent us, the sentence right before this one states, "That is partly due to the fact that other food sources are now part of your baby's diet." So, while it is true that the nutritional quality of breastmilk does change with the duration of lactation, and certain nutrients (including protein) appear in increasingly lesser quantities (see reference below) we would say that the primary point being made is that breastmilk will make up a lesser percentage of the 9-12 month old baby's total caloric intake, so it therefore makes less of an impact nutritionally (unless the baby is not taking in any solid food, of course). Breastmilk certainly continues to be a valuable part of the baby's overall nutritional picture until it is discontinued and that fact is not disputed by this statement from Babywise.

Here is an article which includes information on the nutritional changes that occur in breast milk over the duration of lactation:

<http://www.unu.edu/unupress/food/8F174e/8F174E04.htm>
(United Nations University)

"Mature breastmilk composition also changes during the course of lactation, although not as markedly as in the early weeks [31, 36, 40]. Many nutrients show a gradual decrease in concentration of around 10% to 30% during the first year of lactation, often reaching a low plateau thereafter. A greater decrease occurs for some components, such as zinc [41]. Some components show little change, especially those involved in osmoregulation, including lactose and sodium, whereas a few, notably lysozyme, increase.... Breastfeeding will normally provide all the nutrient requirements of a baby for the first four to six months of life [59]. After this time some nutrients may become limiting, including not only dietary energy, but also essential minerals such as zinc and iron. Current recommendations are that solid foods are unlikely to be necessary before four months, but a mixed diet should be offered by six months [59]."

In addition, a local pediatrician who advocates Babywise to her patients shared the following excerpts from a primary medical text on breastfeeding to support the Babywise statement above:

From book called "Breastfeeding: A Guide for the Medical Professional," the 5th edition, written by Ruth M. Lawrence and Robert M. Lawrence. Ruth is a pediatrician and breastfed all 8 of her children. On page 337 on the text, it says:

"Nutritionally, it is appropriate to begin iron-containing foods at 6 months, the time the stores from birth are being diminished. The requirement at this age exceeds that supplied by human milk. An additional source of protein becomes necessary toward the end of the first year of life because the grams of protein per kilogram of body weight supplied by milk decrease as the infant grows heavier. The content of protein in the milk begins to drop slightly after 9 months of lactation. A human infant also needs bulk, or roughage, in the diet. The exact time this need becomes apparent is not known, but it may well be by the end of the first year."

Additionally, page 337 continues with this:

"Developmentally, the infant is ready to learn to chew solids instead of suckle liquids at about 6 months. Illingworth and Lister have suggested a "critical period of development" during which infants can and must learn to chew. Chewing is an entirely different motion of the tongue and mouth from sucking. The sucking fat pads in the cheeks begin to disappear at the end of the first year. The rooting reflex has been lost. Even though the teeth are not all in, the development of good dentition requires chewing exercise."

7. "These statements are all absurd, and scientifically unsound. And this is by no means a comprehensive list."

Response: So far, we hope we have shown that at least some of these statements which concern you are neither absurd nor medically unsound when taken in their proper context. You may not agree with them, but if you can look at them contextually, we think you will find that you have fewer issues than you thought. We can think of quite a few scripture passages that might be rather absurd taken out of context as well. (Not trying in any way to compare the Ezzos' teaching to scripture, just trying to make a point.) Context is very important. If I go through an author's work trying to pick an argument with him and to prove that he has made some wrong statements, I will undoubtedly find things to disagree with. I can put a slightly different slant on anything I like if I take it out of the context in which it was written. So we would humbly suggest that "absurd" and "medically unsound" might be a stretch--is it not more a matter of a difference of perspective and opinion?

8. "The book goes on and on about how feeding on a schedule organizes the baby's digestive system - if you are aware of research that supports this I'd love to see it."

Response: I have done a scan search of the 93 edition and I am not able to find any reference to how feeding on a schedule organizes the baby's digestive system. Do you have a page reference for me to evaluate? I am not sure what you are referencing by this statement so I am having a hard time answering it. We are not aware of any published research in this area, which does not mean that none exists and we will check on it. However, if you are referencing the flexible scheduling promoted in *Babywise*, a local friend who with her husband teaches the *Preparation for Parenting* class, is a former NICU nurse. She is now a stay at home mom of 4 boys, ages 7 and under. She tells us that when babies came into her NICU unit at the hospital for FTT (by the way, most occurrences of FTT are from demand fed babies according to the Wall Street Journal, et al), they were immediately put on a feeding schedule, usually 3 hours around the clock. She says that the point was to stabilize the baby's metabolism which helps insure that he takes in enough nourishment overall. We did find the concept of stabilizing the baby's metabolism mentioned in the 1993 *Babywise* (p. 37). Whether there are studies to

prove this not, in actual practice, this is what the medical professionals believe and act on. It works and it is standard operating procedure at hospitals. So, if this is what you are referring to when you say “organizes the baby’s digestive system,” this Babywise concept is far from absurd or medically unsound, it is well-accepted within the medical community.

9. "It stresses regular and predictable parental interaction; I would argue that a mother who carries her baby close to her body and answers her newborn baby’s cries promptly provides just that."

Response: We would certainly agree that it is important to keep a newborn close to you (that is, in close proximity), hold and cuddle them often, and respond to their cries promptly. In fact, we cannot imagine how a parent could ignore the cry of a newborn. Our own babies that were parented using the Babywise philosophy slept in a portable crib in the room with us until they were sleeping through the night routinely. We held them a lot because we enjoyed holding them (we had to stand in line behind our older 4 children to hold the youngest☺) and we always promptly answered their cries and took care of their needs. So, I think we’re on the same page here...we all (Babywise authors included) believe it is critical to hold and cuddle and comfort babies. We’re not sure if you’re saying that you feel it is *necessary* for a mother to carry her baby close to her constantly...? If so, we simply don’t know of any medical evidence or even empirical evidence that would indicate that such constant holding by mom is better for the baby in any way than allowing the baby to nap in a crib, play in a bouncy chair occasionally, be held by dad, siblings or interact with others on a periodic basis.

And our own personal experience bears out for us that there are some pitfalls that parents should be aware of when choosing to carry their babies around all the time. Our oldest daughter was our most extreme attachment parenting product. She almost never left Mama’s body and even when she was two she would only take naps in the backpack, in Mama’s arms or in the car seat (when the car was moving). The minute we put her down, or stopped the car she woke up and the nap was over. She did not sleep through the night until she was well over 3 years old, she slept in bed with us most of that time (with none of us getting much sleep), and she was whiny and demanding to the point of exhaustion for everyone, including her.

We have the advantage of being able to compare her attitude and behavior to those of our children who we parented much differently through the infant and toddler years using the Ezzos teaching on biblical ethics in parenting and managing infants. These children were light-years ahead of their sister (and her siblings who were similarly parented) in self-control and maturity at similar ages. Interestingly, they were much happier as well. We wonder if there might be a misconception that somehow using the PDF routine inhibits normal mother-child interaction and that babies nurtured in this way do not form a secure attachment relationship with their mothers and fathers. We feel that we formed very strong emotional bonds with all of our children; we were not emotionally distant or unattached to our little ones. On the contrary, we feel that the PDF plan enabled us to be more compassionate, sensitive, and responsive to our babies, as it helped us to study them and understand them more fully, and helped us have enough order to our lives to not be frazzled and exhausted but able to truly enjoy those precious fleeting infant months and treasure that little life that God had entrusted to us.

Perhaps we (your family and ours) are not so far apart on most of the more important issues of life and of parenting. Whether we practice shared sleep or extended nursing or demand or routine feedings—all of that pales in light of whether we respect our children as the individuals that God made them and we take seriously that God-given responsibility to train them in righteousness obedience and self-control, teaching them to love God and honor their parents and love and respect their siblings, to consider the needs of others and to serve with a cheerful heart.

10. "The anatomy and physiology of a baby is designed in such a way that he needs to be close to her and to feed often."

Response: We’re not sure exactly what is meant by the anatomy and physiology part of this, but we heartily agree that babies need to be close to their mothers and feed often. There is nothing in Babywise

that would argue that point. "Close" to mother does not necessarily mean that the mother must carry the baby with her or wear the baby on her body continually, though. Perhaps I could understand better if you could quantify and qualify that statement. It can simply mean close enough to hear baby's cries and attend to them promptly, and there is nothing that we have seen in Babywise to discourage a parent from holding their baby as often as they desire. "Feed often" should be as often as the baby is hungry, which (according to the PDF plan as well as the AAP) generally is anywhere from 2-3 hours for a newborn, though it can be sooner and sometimes a little later. A Babywise (or any "wise") parent should feed their baby WHENEVER they may sense that the baby is hungry--routine or no routine. Some of the quotes we included from the recent version of Babywise will affirm that the Ezzos and Dr. Bucknam would NEVER advocate ignoring a baby's hunger cues for the sake of a "schedule" or a routine.

11. "Babies are individuals. It makes no sense to think that there is some predetermined formula to follow that will lead to success with all children. For example: babies will have differences in stomach size, differences in their sucking ability, differences in their metabolism, and differences in the amount and fat content of the milk that their mother produces. To universally say that every baby (or even most babies) should eat at a particular interval ignores these facts."

Response: We would heartily agree that babies are individuals. Our five have each been very different from birth. Babywise teaches parents to plan an individualized flexible routine for THEIR individual baby. It does not give a "one size fits all" approach to infant management. Perhaps the later versions of Babywise do a little better job of making that point than the earlier version, but the fact that the revisions were made shows that they do embrace flexibility and individuality--they went to great lengths to make sure that was clear in the later editions. Now, as you indicated, that flexible (with a capital F) :-) routine will indeed be different for each baby. There are far too many variables for anyone but the baby's mother (with dad's input) to try to determine the ideal routine for that baby. The "eat, wake, sleep" cycle will be pretty constant for all babies (with some exceptions now and then) but it is made clear (in the later edition, certainly) that parents need to use the wisdom that God gave them to determine THEIR baby's needs and then to try to meet those needs on a flexible routine (as much as possible given the context of any given day). In all practicality, it may be as simple as: Baby wakes up. Baby is hungry. Mommy feeds baby. Baby is awake for a few minutes, Mommy plays with baby. Baby gets tired. Baby goes to sleep. Repeat as often as necessary throughout the day. :-) That is a routine. No time limits necessarily set, no strict adherence to schedules. For a newborn, this routine will usually occur every two and a half hours or so, but sometimes will be somewhat more or less. The time frames given are guidelines, not set in stone. If the baby wakes up early and is hungry, we feed him. If seems like he need a little more sleep during this particular cycle, that's okay too. We let him sleep a while longer. That's it. With my PDF babies, I (Evangeline) never "watched" the clock, and only consulted the clock now and then when I was trying to assess my baby's needs and why he/she might be fussy right now...is he hungry? Tired? Messy diaper? Where is he in the context of his little routine? If plan A didn't work, I went to plan B. I learned my baby's patterns and his/her individual needs, and worked their little routine into the family's schedule while never ignoring the baby's needs.

12. "As someone who works with pregnant and birthing women and mothers of young children, I can not tell you how many mothers I have had call me who are struggling with maintaining a milk supply or with weight gain in their baby due to following the advice put forth in this book. I am sure that there are women out there who have done so, but of the many Babywise moms that I know, I am unaware of any who were able to breastfeed beyond 6 months."

Response: We are sorry to hear about the struggles these moms have had. This is really not the norm in our experience. If you think it would help to get some advice from the PDF perspective for these moms, we would be more than happy to help them by e-mail or phone, and we have some wonderful contact moms in your area as well. We have a friend who is a certified lactation consultant whom we consult for advice when needed. We also have a friend here who is a board certified pediatrician (recently turned homeschooling mom) and a contact mom for GFI. We consult her when there are potential medical issues with a particular mom or baby, or when a medical perspective is needed.

Not to minimize your own experience with Babywise moms, but just to offer another side of the story; in our experience, almost all of the Babywise/Prep moms that we know of have nursed to a year or beyond

and had babies that stayed well within the normal weight guidelines. (Actually, some of them are off the charts on the heavy side...but that runs in the families.) :-) These moms received help when needed from GFI contact moms and other moms who were familiar with the PDF philosophy. We nursed all but one of our five babies to a year or well beyond (one to age three). The one child that stopped nursing at 6 months was actually one of our attachment parenting babies. In the most recent edition of *Babywise* there is an informal study cited in which demand fed babies were compared to flexible routine babies in two different medical practices, and there was no statistical difference between the two in any measurable area. The PDF babies actually had a slightly higher weight gain than the demand fed babies. On page 63 of the 1998 edition, there is another informal study which suggests that PDF moms on average do actually nurse longer than the general population. The national average is that 21.6% of mothers breastfeed into the 5th month, but among the PDF moms that they sampled, a full 70% of them continued into the fifth and sixth month.

13. "Perhaps this is unimportant to followers of the Ezzos, since they obviously believe that breastmilk is not beneficial for much longer than that anyway. But a great deal of research indicates otherwise - breastfeeding continues to offer valuable nutritional and immunological benefits for as long as it continues."

Response: "Followers of the Ezzos" sounds a little inflammatory. No offense taken there...just pointing out the subtle choice of wording, which taken with the tone of the rest of the sentence hints of sarcasm. As an attachment parent, you have most likely read Dr. Sears' *The Baby Book*, and agree with many of the ideas presented, but we would not call you a "follower of Dr. Sears." ☺ We are followers of the Lord Jesus who are attempting to raise our children to glorify Him. The Ezzos' teaching has been a useful "tool" to help us achieve our goals as Christian parents. We learn from the Ezzos, as we learn from our pastor and other brothers and sisters in Christ, but we don't "follow" them.

As to how long breastmilk is beneficial, we are not certain how you might have determined that the Ezzo and Bucknam "obviously believe" that breastmilk is not beneficial much longer than six months. Nowhere do the Ezzos or Bucknam teach that breastmilk does not benefit the child for as long as he is nursed. In fact, they discuss the immunological benefits (which do not decline, though the child's own immune system does strengthen as they get older), as well as the nutritional superiority of breastmilk over formula in some depth. As discussed in an earlier response, the point is simply made that other foods do provide a greater percentage of the child's nourishment as the child grows, so as the child matures (by 9-12 months) the overall benefit of breast milk to the child's diet does decrease as less of it is taken in.

14. "The book also asserts that attachment style parenting will promote dependence in the child. While it's true that babies and toddlers parented by this method are, well, more attached to their parents - i.e. stressed by being separated from them - this does not continue into childhood. When they are allowed to venture out into the world at their own pace and comfort level, secure in the knowledge that they can return home whenever they need to, they become outgoing, confident individuals. I've seen it happen with my own child as well as many others."

Response: We think it is great that you are following a philosophy that will produce the results that you desire. We didn't find that particular comment in the *Babywise* book (though it may be there), but since the book is limited to discussing issues with babies 0-6 months (mostly), that could explain why they don't mention anything about attachment parenting as it applies to older children. We do see a short discussion of "child centered parenting" in *Babywise* but only as it applies to infants. They go into more depth on this and "permissive parenting" (both tenants of attachment parenting) in other curricula such as *Growing Kids God's Way*. Your personal parenting philosophy may not be characterized by these particular attachment beliefs, but from what we have read in our own research (and personally followed as well) they are part of the generally accepted definition of attachment parenting. With our own 5 children, we certainly have some who were more "attached" to Mommy and Daddy than others and some that were more self-assured or confident (even as toddlers) than the others. But we see this as more of a God-given temperament issue than anything else, and curiously, it was not our "attachment parented" children who were always the more attached. ☺

Because we recognize that much of a child's personality is God-given, we do not tend to measure the success of our parenting philosophy by whether our children are outgoing and confident at age 5, but by

how they are continually growing in obedience and humility, respecting and honoring their parents, growing in love and compassion for their siblings, and developing a genuine concern for those around them (becoming less and less self-centered). Our ultimate goal is probably similar to yours—we want them to mature to the point of becoming self-legislating, operating with a full moral understanding (based upon the right and wrongs of scripture) under the direction of the Holy Spirit as they approach the teen years. However, even with these goals as a priority, each child is very different. One will be ready to take over the world at five while another will still be reserved and be content to let others do all the conquering. One will be slow-paced but with a keen sensitivity to the needs of others while another will be fast-paced but be relatively insensitive to the needs and feelings of others. God is not in the cookie cutting business and we all, even as adults, have our God-given strengths and weaknesses that influence how we react to the world around us. We also teach into our children the principle of of weism not meism, interdependence within the family, not independence of the family (as is too commonly seen even within the Christian community). We believe that teaching a virtuous way to our children begins at a very early age (making those deposits into their moral warehouse), but realizing that becoming a godly person is a process; as guardians of their hearts, we have the responsibility to be their watchmen until they demonstrate the ability to properly legislate their own moral actions.

15. "I am aware of the ezzo.info website as well, and have looked around there a bit but not extensively. If you believe that some of the information there is incorrect, you are welcome to share what you believe to be in error. I do find it significant that some major medical organizations and Christian leaders have voiced their concern over the method espoused by the Ezzos; however I must reiterate that my primary objections come from my own reading of the material."

Response: Sadly, most of the information there is not correct, in matter of fact. For example, NO major medical organization has voiced any concern over the PDF philosophy or the Ezzo/Bucknam book. The Ezzos were never kicked out of a church. And contrary to what many people seem to believe, what they actually teach about feeding babies is anything but rigid. Now, it is true that some strong attachment parenting advocates have petitioned the AAP to make a negative statement concerning *Babywise*, but they have never made one (confirmed by the AAP). Indeed, many of the AAP's own recommendations are right in line with what is taught in *Babywise*, so such a statement would not make much sense. These types of falsehoods are told and retold until they take on a life of their own and are even reported by major Christian publications--none even bothering to check with the AAP to see if it is true! Sad, but that is the state of our society, Christian publishers notwithstanding. Most people would rather believe the bad than the good, and are quick to report things (urban legends, etc.) and not so quick to verify that they are in point of fact, true. Unfortunately, when the damage is done through gossip and slander, it is done, and it is very hard to correct all the misinformation that has spread. As one saying goes, by the time gossip gets across the country, truth has hardly had time to get its running shoes on.

16. "It would take much more time than I have to go into all the things about this program that disturb me. It seems in discordance with nature (i.e., God's design), with science, and with the Biblical picture of motherhood painted by scripture. I appreciate that others may see things differently, however, and respect their right to make the choices that seem best to them."

Response: Yes, we agree that we each need to respect one another's choices in parenting philosophy and methodology. There is plenty of room for differing opinions even within the church. We have read many Christian books on parenting and frankly there are few that don't contain something that we disagree with. However we take what we can use from each one and discard those things that do not line up with our understanding of scripture. There are no perfect teachers on parenting or any other subject except God's Word read by a heart guided by the Holy Spirit. The primary commands in scripture that relate specifically to parenting are that parents must teach their children to "obey your parents in everything, for this pleases the Lord," fathers are instructed not to "exasperate your children, but to bring them up in the discipline and instruction of the Lord," and parents are encouraged to "train up a child in the way he should go and when he is old he will not depart from it." We also see the Deut. 6 passage instructing parents to impart moral truth purposefully into their children's lives "when you sit and when you stand and when you lie down and when you walk along the way." There are also many warnings about neglecting to train our children, especially in Proverbs. In addition, the story of Eli, the tragic father, and

his two sons Hophni and Phinehas is a good example of giving children over to their own devices (permissive parenting to the extreme).

So, while you may see the *Babywise* principles as in discordance with God's design, we see the underlying principles as fully in accordance with biblical truth—and the “peaceable fruit” that we have seen in our own family is confirmation of that for us. (We are not asserting that infant feeding philosophies are addressed in scripture, but that the principles on which the book is built—seen more clearly in the *Preparation for Parenting* curriculum—do come from scripture.) Generally speaking, a mother who follows the *Babywise*/Prep PDF principles using her God-given common sense and flexibility as the book encourages her to do (again and again) will enjoy her baby, meet his or her needs promptly, develop a strong mother/infant bond, get some much needed rest, (hopefully) be able to be a cheerful helpmeet to her husband, and will have a good chance of being successful at breastfeeding and continuing that nursing relationship as long as she is comfortable doing so. We see nothing unbiblical about these outcomes, however, as good Bereans, we'd be happy to consider any evidence to the contrary, and would welcome the opportunity for further study in this area at any time. Please feel free to dialogue with us about your biblical concerns with the *Babywise* principles. We could share with you a few of our biblical concerns with attachment parenting philosophies as well, and perhaps we would both be the wiser for it.

17. “I have certainly read the statements from John McArthur and Living Hope, as well as an article that was published by Christianity Today, and if what they assert is true, then it is definitely concerning. I am aware that there are always two sides to every issue though, so didn't necessarily take them to be absolute truth. Honestly, I didn't think about them much at all - it was sort of peripheral information. As I mentioned previously, my primary concerns are with the material itself.”

Response: You are right in saying that there are two sides to every issue. In accordance with Proverb 18:17 we would be happy to address those concerns at any time, but we feel we have bent your ear quite a bit in this communication.

18. “This is not at all how the book that I have reads. It is downright insulting to those with differing viewpoints. For example, on page 56, while discussing sharing sleep it states: Emotionally, this method is passively abusive. This does not seem to be respectful or encouraging of seeking out other options.”

Response: You will not necessarily see the *Babywise* book holding open arms to all parenting theories. However, I believe they do go on to explain *why* they believe that routine shared sleep is passively abusive, which is much different from just making such a statement with no explanation and moving on. While the statement may be a matter of opinion, they have backed their opinion on shared sleep up with a long list of facts and documentation from medical literature in the most recent edition. Incidentally, they do not teach that you should *never* sleep with your baby. In fact they state that context might sometimes allow or even require it. Nor does Dr. Sears teach that you *must* share sleep with your baby. He allows that some babies sleep much better in their own beds and that a parent must be willing to bend their philosophy to meet the child's needs. I (Evangeline) recently read Dr. Sears' *The Baby Book* and just cracked up when he made a reference to children being put in playpens as “inmates.” I could have been “insulted” since we have used playpens in our home and we believe strongly that they benefit our toddlers in developing focusing and concentrating skills from an early age, as well as provide sometimes necessary boundaries. Even if one believes in the philosophy that toddlers need to “explore” at will, the parents will necessarily have to put some sort of “boundary” in that exploration. It becomes a matter of perspective about how much freedom to give them, and where and when does it stop. I chose not to take his comments personally, just realizing that his perspective is different and that perhaps our goals are the same but we have found different methods to reach them.

So we did not intend to indicate that the *Babywise* book is open and understanding of all opposing opinions. Ezzo and Bucknam make no bones about their strong and reasoned views on many subjects, the dangers of shared sleep (explicit and implicit) and other leading tenants of attachment parenting being some of them. What we meant to say before was that the Ezzos are strong advocates for parents

informing themselves of all of the different parenting philosophies available, and then evaluating them in light of scripture as well as by the fruit that they produce in the children (of the families who practice them). They actively encourage parents to seek out other methods but they do not necessarily “agree” with those other philosophies. They will however, agree with any manner or method that is clearly guided by biblical principles.

Here is a quote from *Babywise* (1998) that speaks to that point: "Because every philosophy of parenting has a corresponding pathology, we invite new and expectant parents to consider, evaluate, and decide which philosophy is best for their family. Review all the options. Examine carefully the alternative theories, approaches, and specifically observe the end results. Determine which parenting strategy is right for you, especially when it comes to infant nurturing." (p. 39)

A similar admonition appears in the introduction to some of the video/audio curricula, including *Growing Kids God's Way*: "As was the case with previous editions, this curriculum is not intended to give all the answers or provide the reader with all he or she will ever need to know about the process of raising a child. Therefore, parents guided by their own convictions have the ultimate responsibility and duty to research parenting philosophies available today and then make an informed decision as to what is best for their family. Growing Kids God's Way is just one resource out of many available to guide parents along the way." (p. 8, 5th Edition)

Yes, *Babywise* makes some strong statements about attachment parenting theories. The point of the book, as with any such work, is to make as strong a case as possible for the parenting philosophy that the authors believe is the best. Other books on infant management strategies will make their strong case as well; and usually they will, by necessity, address opposing theories just as *Babywise* does to make their case or to make a point. Hopefully parents will follow the Ezzos' advice and do their own research by reading all kinds of opposing viewpoints, each author making his case as strongly as he can, and then decide for themselves which philosophy to follow after observing the fruit of the various philosophies (if possible), and prayer and consulting scripture (if believers).

19. “To some degree, I feel like I have to argue my perspective from a disadvantage. You have the advantage of time; you can say that you have older children and look how well this method has worked for you. Regardless of how well our children may turn out with our parenting method, I don't have the ability to show that at the present time.”

Response: From what we can gather you both love the Lord and want to do what is best for your children. Our point is not to make you feel that the path you've chosen is less than biblical or will not produce children who will glorify God. Our point is merely to try to point out that some of the things you have reacted to so strongly in the *Babywise* book may not be “absurd” and “medically unsound” at all--it may be your firmly held attachment parenting beliefs that are coloring your perception of what is actually a pretty balanced teaching. (*Babywise* takes the mid-line between demand-feeding and scheduled feeding...gives balance to both theories.)

20. "I am sorry you found the application of attachment parenting methods problematic. I won't say that it has always been easy for me to find the appropriate application for the theory, but I have found it to be a worthwhile endeavor. The mountain path that takes you to the best view is rarely the easiest one. I have no doubt that the fruits of our labor will be evident as the children grow up; in fact they already are. Not the mature fruit that I hope to see one day, but some blossoms and small fruit have begun to appear."

Response: Curiously enough, we didn't even know we were attachment parents back then. :-) It wasn't until much later that we did some more research and were able to put a label on how we had been parenting. Somehow, we had just absorbed the attachment parenting philosophy from a breastfeeding group, the numerous psychology-based parenting books, and college "philosophy of education" classes. (Which not only steered us down the wrong path in parenting, they were pretty useless in practical application to the classroom or even our homeschool as well.)

Taking the Ezzos' *Growing Kids God's Way* class for us was what began to turn our family around and give us hope that we could really enjoy our children and even the parenting process. The difference it made within the first few weeks was enough to encourage us to continue to parent with this philosophy and to even begin leading classes. We then later started to implement the infant/toddler teachings such as those found in *Babywise*.

The "mountain view" statement above is a great one. Parenting in a balanced and biblical manner and striving to reach the hearts of our children and not just address their behavior has been by far the most challenging task of our lives. We are grateful to the Ezzos for the tools they provided to help us along the way. There are many such tools out there--and yours may be different from ours, but with diligence and prayer and the Holy Spirit to guide us, we should both reach the same goal. And as you indicated, the view from the top is so worth the effort.

We have had the privilege of spending time around many, many families with children who are teens and even older who have been using the Ezzo's materials for many years. These are the key couples in the ministry who have been diligently applying biblical parenting principles in their homes and have been training other parents and other class leaders. The level of moral maturity in the older children in these families is just astounding, and the family relationships are close and joyful, and peaceful. The parents have not encountered teen age rebellion, but rather have grown into an adult friendship with their teens, with a strong sense of family identity. Being around these families is encouragement for us to stay the course and do the hard work required to reach the goals we have set...it is also confirmation that we're heading in the right direction. No matter which philosophy is chosen for parenting, we would encourage any parent to seek out such families, following their chosen philosophy, who have older children and to whom they can look to see what will be the likely end result of continuing along the path that they are on. Again, we want to stress that the Ezzo material is just one tool for bringing people to an understanding of biblical parenting principles. We also know many families who have never taken an Ezzo class or read their books that have wonderful, morally mature children.

21. "I must confess that the only reason I am having this dialogue is because my husband asked me to. I am very pleased with our current parenting method, and feel rather strongly opposed to the teaching of the Ezzos. As such, I don't really have questions I am seeking to have answered, but I am willing to discuss my concerns if this is perceived as beneficial."

Response: Thank you for being willing to dialogue with us. We do hope that some of the information shared will be useful to you both as you seek the best for your own family. As believers, we all must be truth-seekers, and that is what a dialogue like this is good for. It helps us to reevaluate some firmly held beliefs in light of new information and it might help us to embrace a more "true" opinion of a matter. Case in point: we recently purchased a used copy of Dr. Sears' attachment parenting book so that we could see if what we believed about his philosophies (from what we had been told by others or remembered from our reading years ago) were actually true. We were humbled to find that much of what he teaches is much more balanced than what we believed. We still do not agree with everything he says, but we see far more commonality than what we had expected to find. In some areas, we find that we strongly agree with him, even! ☺ At the very least, we hope that this dialogue may allow your heart to soften somewhat toward the Ezzos--they really are precious people with a heart for the Lord. The fruit of their teaching is good fruit...when applied as it was intended and as written.

We are not saying that everyone who reads *Babywise* or attends a Prep class or even a Growing Kids God's Way class agrees with everything the Ezzos teach on every point. And certainly there is a VAST disparity in how people apply what they learn—or whether they apply it at all—based upon their own temperamental strengths and weaknesses, their own spiritual condition and their experiences in their own family growing up. But overall, the alumni that we have met feel the material is balanced, practical, absent of legalism or rigidity, and full of common sense, and very biblically oriented. We have letter after letter from those who have been through our classes sharing their appreciation for what the class has done for their marriage and their family.

*May the Lord pour out His blessings upon your family,
Tom & Evangeline*

PS: Not to belabor the point, but here are a few quotes from the updated 1998 edition of *Babywise* that may help [name] as she works with PDF moms. We know *Babywise* contact moms in your area that would also be willing to help answer questions as needed and we certainly will be available to help.

"Responding PROMPTLY to a newborn's hunger cues is also a central part of Parent Directed Feeding." (p. 64) (emphasis ours)

"It [PDF] has enough structure time to bring security and order to your baby's world, yet it has enough flexibility to give mom freedom to respond to real needs at ANYTIME." (p. 65 emphasis ours)

(for newborns) "In those early days, most babies nurse between thirty and forty-five minutes." (per feeding) p. 89

"When it comes to nourishing baby, mothers' milk is clearly superior to formula." P. 80

"Feeding too infrequently" is one of the causes listed for "failure to thrive" babies. The Ezzos teach strongly against "hyperscheduling," and parents are warned about this: "This problem" (failure to thrive) "can be attributed to either 'hyperscheduling' or 'demand-feeding.'" The mother who insists on watching the clock to the minute lacks confidence in decision-making. The clock is in control, not the parent. The hyper-schedulist insists on a strict schedule, often nursing her baby no more often than every four hours." P. 97 (This "enslavement to the clock" is strongly denounced by the Ezzos.)

"Physical nurturing, holding, and cuddling" are listed as critical to a baby's survival. "The lack of these gestures can impact a child's ability to thrive. It is important that moms cuddle, hold, and talk to their babies frequently throughout the day." P. 97

"As stated above, there will be times when a situation dictates a temporary suspension of the guidelines presented. Remember, you are the parent--endowed with experience, wisdom, and common sense. **Trust these attributes first**, not an extreme of emotion or the rigidity of the clock." P. 116 (emphasis ours)

These statements show that there is actually a great deal of flexibility in this philosophy, and in the current version of *Babywise*; and if those *Babywise* moms could be encouraged to apply the philosophy flexibly, as intended, it might be one way to help them achieve the goal of extended breastfeeding, which is certainly a worthy goal.