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ABSTRACT

Family solidarity runs strong in Appalachia, where young adults typically settle near their parents in kin-based rural neighborhoods. One child rearing practice that may contribute to this closeness is parent-child co-sleeping. Interviews with 107 mothers in eastern Kentucky focused on the sleeping location history of one child. Most subjects were working-class housewives with high school educations, living in nuclear family households of two adults and two children. The children had a mean age of 5.6 years, with a range of 2 months to 22 years. First sleeping location was the parents' bed for 36% of the children and different bed in parents' room for an additional 48%. At the time of the interview, 36% of the children were sleeping in parents' bed or room, 23% were with siblings, and 41% had their own rooms. The oldest child reported to co-sleep with a parent was 8 years old and was in transition to sleeping with a sibling. Variations in the overall pattern of children's sleeping locations were related to the child's birth order, number of rooms in the house, mother's place of birth (Appalachia versus elsewhere), and mother's and father's educational attainment. Mothers were more likely to have negative feelings about moving their child's sleeping location to another room if the move was sparked by a sense of "appropriate" behavior than if it was motivated by situational or demographic factors. This report contains 12 references and 7 tables and figures. (SV)

"HOW CAN YOU EXPECT TO HOLD ONTO THEM LATER IN LIFE IF YOU BEGIN THEIR LIVES BY PUSHING THEM AWAY?" COMPARATIVE PERSPECTIVES ON AN EASTERN KENTUCKY CHILD REARING PRACTICE

by

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INTRODUCTION

The literature on Appalachian families talks about the depth of family solidarity. Values like "familism" are high where children, or at least some of the children, settle next door to their parents and, in turn, raise their children in kin-based rural neighborhoods throughout the region. Beyond the resource of available parental land for building sites, there is the stark economic necessity for family support because of the nature of the local economy (Brown 1952, Hicks 1976, Bryant 1981, Batteau 1982, Beaver 1986). What are the socialization mechanisms, now and in the past, that result in young adults with a powerful emotional motivation to remain in close proximity to parents and extended family? This is a crucial question because the larger nation of which the region is part follows a contrasting pattern --at least for its middle and upper middle class urban segments. Children are expected to pack their bags and leave home to make their fortunes as soon past eighteen as possible. Do Appalachian parents who are raising their children not to leave home, engage in different socialization strategies?

This paper presents new data collected in eastern Kentucky on the practice of parent-child co-sleeping from infancy through the early years of childhood. Judging by an examination of memoirs and other publications from the region (e.g., Hartman 1957, p. 203-04; Montell 1986, p. 29; Slone 1978, p. 60), the practice is of long standing. As Verna Mae Slone, a 75 year old Knott County, Kentucky, woman put it in her 1978 autobiography Common Folks, "how can you

expect to hold onto them later in life if you begin their lives by pushing them away (p. 60)?" She prefaced her observation by saying "I don't care what doctors say, I believe it best for the mother and child to be together. . . These new mothers are loosing two of the greatest blessings that God gave mothers --the pleasure of sleeping with your child, and letting it nurse. A closeness that cannot be understood unless you have experienced it." Contrast Mrs. Slone's views with those expressed by T. Barry Brazelton in a recent Newsweek cover article:

> A child is likely to need a "lovey" or a comfort object, an independent resource to help her break the day-to-night transition. Learning to get herself to sleep means having a bedtime ritual that is soothing and comforting. BUT A CHILD SHOULDN'T FALL ASLEEP IN HER PARENT'S ARMS; IF SHE DOES, THEN THE PARENTS HAVE MADE THEMSELVES PART OF THE CHILD'S SLEEP RITUAL. Instead, after she's quiet, put her in bed with her lovey and pat her down to sleep. When she rouses every four hours, give her no more than five minutes to scrabble around in bed. Then go in and show her how to find her own comfort pattern for herself (Feb 13., 1989, p. 69, emphasis added).

Brazelton's baby sleeps alone from the beginning learning to take comfort in soft, fuzzy, and transitional objects rather than her family.

METHODOLOGY

These data were collected as part of a larger, on-going study on social class differences in family life and child rearing in an eastern Kentucky county between February and August 1987. During my stay in the county, I became aware that parent/child co-sleeping was probably a wide-spread local practice. In an effort to document this, I devised a short interview schedule for mothers focused on one of their children which would query them about that child's

sleeping location history, as well as provide basic demographic information about the child's mother and father. Two pediatricians working in a local general medical clinic were similarly interested, and arranged for access to mothers bringing children for treatment. The initial 23 interviews were carried out by the pediatricians in their consulting rooms, but I completed an additional 64 when the pediatricians were unable to continue because of the press of their daily workload. I interviewed the mothers in the waiting room while they sat with their child before they saw the doctor. Every woman with a child in the waiting room on the days when I was visiting the clinic was approached by me and asked to participate. Only 4 refused and most found the topic interesting. Eighty-seven mothers were interviewed in the clinic setting.

Another sample of 20 mothers, stratified for social class, were interviewed in their homes on a wider array of child rearing practices during the same field season. Questions about the history of their child's sleeping locations since infancy were included in the interview. The responses of these mothers have been combined with those from the pediatrics clinic for this analysis resulting in a final sample of 107 mothers. An earlier analysis showed no significant differences between the responses provided by the two groups of women.

The questionnaires used in the medical setting were changed by the addition of questions about the number of rooms in the house, where the husband slept, and total number of adults and children in the house after the initial set had been collected by the pediatricians. At this time the twenty in-home interviews had also

been completed, and so they too lacked this information as well as information about why they changed and how they felt about the change. The discrepancies in the Ns for some of the analyses reported later in the paper are a result of these differences in information collected with these interviews.

Table 1 about here

Table 1 reveals that the sample is predominantly working class with high school educations, but includes some middle and upper middle class with college and professional school educations. The majority of the mothers are housewives (58.8%) and a significant proportion of the fathers are unemployed or retired or disabled (21.9% of which 16.7% are without work). This is representative of the county unemployment figures when the data were collected. Unemployment is typically high in the local coal-dominated economy. It is also a predominantly local population --90.1% of the fathers and 78.3% of the mothers were born in the immediate Appalachian region. Most were married to their original spouse (76.2%) or remarried (6.7%), leaving 15.1% who were currently single parents. Most lived in homes with 6 rooms, with a range of 3 to 11. Very few lived in other than nuclear family households with two adults present and the average number of children per household was 1.93. This pattern is typical for the county.

Male children are over-represented in the sample. No effort was made by me to balance male children vs female children while interviewing in the clinic and this is the source of the imbalance. The twenty interviews in the community were deliberately balanced

for sex of child. No significance should be attributed to the imbalance other than sampling error. Clearly this is an opportunistic sample. The very poorest elements of the county's population are under represented, and the middle class may be as well though the local middle class is proportionally smaller than the U.S. middle class as a whole.

The mean age of the children described by these mothers is 67.4 months or 5.6 years. The range was extensive: 2 months to 22 years.

The interviews were coded by me and analyzed using the SPSSX statistical package utilizing standard statistics for mostly nominal scale variables.

RESULTS

Table 2 combines the mothers' responses to three questions: what was the child's first sleeping location? when you moved the child, where did she/he sleep? and, what is the child's current sleeping location? Thirty-six percent of the children were reported to have started out their lives in their parents' bed, and an additional 47.7% occupied their own crib or bed in the parents' bedroom. In other words, 84.1% of the children were placed in close proximity to their sleeping parents, while only 14% were assigned to their own room.

Table 2 about here

Figure 1 will help us interpret the responses to the second question about where children were moved when the parents' decided to change the initial sleeping location. First, only 71 children

have been moved. Fourteen children started out in their own room and they remained there. An additional 22 children were still sleeping in their original sleeping place --their parents' bed or bedroom.

Figure 1 about here

Figure 1 shows us the ages when mothers reported they first moved their children. The pattern reveals a series of annual peaks for reported initial moves after the first year. This pattern may reflect a systematic memory distortion on the part of the mothers, but to the extent that it does, the cultural pattern being reflected is not that of the presumed American urban norm. Among those 12 months of age or younger, 10 were moved from a crib in the parents' room into the parental bed, while four who were occupying the parental bed were moved into a different bed in the parents' room. Five others were moved out of the parents' room into a room with a sibling, and the final 11 were moved out of the parents' room into a room of their own. Among those over one year of age, one 16 month old, one three year old, and one seven year old were moved into the parental bed; one 20 month old, one two year old, three three year olds, one four year old, and one five year old were moved out of the parental bed into another bed in the parents' bedroom, and the rest were moved into sibling's rooms or rooms of their own. Going back to Table 2, the above movements, combined with those who stayed in place, results in the distribution reported for "Second Sleeping Location": about one fourth remain in the parents' bed, a fifth in the parents' room, a little less than a fifth are rooming with

siblings, and 36% now have their own room. Finally, at the time of the interview, 35.6% were sleeping in their parents' bed or room, 23.3% were with siblings, and 41.1% had their own room. The oldest child reported to co-sleep with a parent was eight years old, and that child was in transition to co-sleeping with a sibling, so eight is the upper bound for this sample. In exploring variables that might be expected to account for variations in the overall pattern of children's sleeping locations, the child's birth order, number of rooms in the house, the mother's place of birth, and educational level of the mother and the father are all related. Each will be discussed in turn.

Birth Order of Child

The child's birth order has no relationship to selection of initial sleeping location (Chi^2 =7.7068, sig.=.56), nor does its relationship with the selection of a new sleeping location when the child is first moved reach an acceptable level of significance (chi^2 =14.11820, sig.=.1182). Its relationship to the child's current sleeping location, however, is what we would expect --middle and last born children are more likely to end up sleeping with siblings, while only children are more likely to get their own room as are last borns, possibly because departure of older children frees up sleeping space (Chi^2 =17.75295, sig = .0360).

Number of Rooms in the House:

Another obvious factor that might affect where children sleep is the availability of space in the house, and so number of rooms should be explored. Table 3 displays the relationship. The number

of rooms in the house is related only to the selection of the final sleeping location of the child. Those who live in houses with 5 or more rooms are more likely to place children in rooms by themselves with the pattern strongest for those with houses of 9 or more rooms --75% of those children slept alone compared to 12% among those living in houses with five or six rooms and .9% of those living in houses with seven or eight rooms.

Table 3 about here

Although there is a relationship to the absolute availability of space, the total proportion of children placed outside the parental sleeping area is small overall, and so it is not possible to say that space is a major factor in creation of the overall pattern. Six room houses, the mean house size in this sample, should typically have a living room, kitchen, dining room or area, and three bedrooms. Three bedrooms would supply suficient space for the average local family of two parents and 1.9 children to be bedded in the presumed urban U.S. pattern of parents together and each child alone, a pattern not followed by most of these families.

Educational Level of Parents

The next variable related to children's sleeping locations is educational level of the parents. Both the mother's and father's level of education have statistically significant relationships (mothers, Chi^2 =24.1435, sig = .0041; fathers, Chi^2 =17.06442, sig =.009) to the selection of a child's initial sleeping location such that those with university educations are less likely to share their

bed with their child. This is so for both local and non-local mothers, but only for local fathers.

A somewhat different relationship exists when we look at the answers to the question about the child's current sleeping location. The relationship to maternal education only remains for mothers born elsewhere (Chi^2 =13.2857, sig =.0387) and fathers born locally (Chi^2 =22.87863, sig =.0008). Once past the initial selection of a place to sleep, other factors may influence locally-born women, but not their educational level.

The continued relationship between a college education for local men and subsequent sleeping locations for their children is puzzling at first glance since the relationship does not hold up for college-educated local women. The reason for this continued association can be found in local marriage patterns. Local men are three times as likely to be married to women who were born elsewhere; 8% of these women compared to 24% of the men are married to non-local spouses. Local men are also more likely to marry women who match them, or are very close to them in educational achievement, than the locally-born women. It is not unknown for a woman with a college degree to be married to a man with only high school or less than high school education. No locally-born man in this sample has contracted such a marriage. These marriage patterns result in a situation in which local college-educated men frequently marry non local college-educated women, or non-local women with more than high school education which brings together in one household persons who are the least likely to share their sleeping space with their children.

Parent's Birth Place

Mother's place of birth is the last variable that has a relationship to children's sleeping locations. This is the crucial finding. It suggests that it is regionally specific and it is under control of the mother. Table 4 displays mother's birth place correlated with the child's initial sleeping location. Here we find that locally-born mothers are more likely to have their babies and young children in bed with them (39.8% vs 26%), while non-local mothers are more likel, to put their children in their own bed in the parents' room (52% vs 47%) or in a sibling's room. Both groups of women are equally likely to put children in a room alone (local = 13.2%, non-local = 13%).

Table 4 about here

Father's place of birth does not correlate with their children's sleeping locations.

Reasons for Change

Now that some of the factors that are associated with children's sleeping locations have been identified, we can examine the reasons mothers' give for changing their children's sleeping location for those who started out sleeping in either their parents' bed or bedroom. The mothers' reasons can be grouped into three broad categories. The first includes reasons that imply a cultural model about what should happen as a child matures, what is appropriate and what is not. This category includes statements like "it was time", "he should be moved", or "she was going to start

kindergarten and so it was time to encourage more independence." I call this category "cultural model". The second category I labeled "demographic reasons". It includes all reasons that signified change in parental status and family structure via demographic processes including birth, adoption, death, divorce, and remarriage. Finally, the third category includes all reasons that were presented as situational or behavioral, for example, "the bed was too crowded", "we couldn't get any sleep and we both work and need our sleep", "the child was sick", or "the child cried too much". This category was labeled "behavioral/situational reasons".

The only variable that had a significant relationship to reasons for changing the child's sleeping location was sex of the child to be changed, and the relationship holds only for local mothers. Table 5 shows that locally-born mothers are more likely to give cultural reasons for moving a boy (c. 57%) than for moving a girl (c. 35%), while they are more likely to give behavioral or situational reasons for moving girls (58.8% vs. 14.3%). They are also more likely to cite demographic reasons for changing boys (28.6%) than for changing girls (5.9%).

This can be interpreted to mean that cultural models for gendered behavior are called into play at earlier ages for boys than for girls by women born in the region. At the very least, gender is a salient category for justifying behavioral change in the area of children's sleeping locations for locally-born women in a way that it simply does not operate for women who were born in Michigan and Ohio and California. This is consistent with ethnographic literature on the region which describes a relatively sharp division between men's and women's worlds that is still in place, and is consistent

with my own observations.

Mothers' Feelings About Moving Their Children

Mothers were then asked how they felt about moving their children once they had decided they were to be moved from the parental nest. Their reports of their emotional reactions ranged from "good" and "relieved" through "no reaction" and mild distress to intense distress coded by words like "deserted" and comments like "I was very worried and checked several times during the night; I was afraid of fire or that something awful would happen." I grouped these responses into three categories as well. The first I called "good"; it included all the upbeat comments as well as the neutral responses. The second category I called "missed" which included all mild levels of distress represented by comments like "I missed him" with no elaboration when said in a matter-of-fact tone. The final category, "deserted", was reserved for those responses that indicated the most intense levels of distress including statements that the women felt deserted, and other comments like "I try to sneak him back with me whenever I can," related by a woman who had to move her child out when she remarried.

None of the variables included in this study had any relationship to mothers' reports of their reactions to moving their child except the reasons given for the change itself (see Table 6). Those that gave cultural reasons for the move were more likely to report mild to high levels of distress over the move, while those who gave demographic reasons or behavioral/situational reasons were the most likely to say they felt good about the move. This relationship held for both locally-born and non-locally born women.

Apparently a change that is stimulated by a mother's desire to reduce some undesireable irritant in her interaction with her child, e.g., alleviating crowded sleeping conditions in her bed so she can get some sleep, or a change that is motivated by the birth of a new child who will replace the one who is being moved out, or by the death or divorce of a husband that results in a child being moved in to fill a now empty space are typically experienced as positive changes, but it is culture in the form of the "shoulds" and "oughts" of life, the need to push the child on to the next stage of greater independence that causes these mothers' distress, sometimes quite poignantly stated as "I felt deserted". These mothers would often add, "but I knew it had to be done."

CONCLUSIONS

These findings demonstrate a regional cultural pattern in the preference for parent/child co-sleeping in the early years of life. Educational levels of the parents have some impact, particularly among those with university educations, the ones most likely to have taken courses in child development or psychology where they may have been exposed to discussions of the horrors of parent/child enmeshment brought on by child rearing techniques like sleeping with your child, or alternately have come to rely on advise by experts like Dr. Spock or Dr. Brazelton. It is clear from an oral history interview I carried out at the same time with a local woman in her 70's, a retired school teacher who had read voraciously all of her life, that she had decided to put her babies in their own bed, though still in their parent's bedroom, in the 1930's because she had read that it was not good to sleep with your children. She also indicated that her practice was unusual in her local rural

neighborhood --it provoked a visit from a censorious "country woman" who insisted on challenging her about this new practice, apparently convinced that babies who didn't sleep with their mothers would be neglected and not properly cared for.

Mothers seem to be the more important parent in determining this pattern. They talked about it as "I sleep with my child", or as one mother said, "I never slept away from my babies when they're little, never slept alone." Even though most were also sharing their bed with their husband, no mother ever said, "we sleep with the baby." Among the married women, only five reported their husband to sleep somewhere else in the house. The mothers apparently conceive of co-sleeping as a two person event, an interaction between themselves and their child despite the presence of a third party.

Barry and Paxson's (1971) coding of the Standard Cross-Cultural Sample revealed that in 44% of the 173 societies with information about infant sleeping locations, mothers shared their bed with their infant, while an additional 56% (N=97) shared a room with their infant. No infants were put in rooms by themselves or with siblings. Within this context, these eastern Kentucky mothers are closer to what has been the pan-cultural human pattern for treatment of infants for most of human history. Mel Konner points this out in his recent popular article written for the New York Times Magazine (January 8, 1989). It has been usual for infants to sleep with their mothers, a practice that has had advantages for both the mother and the infant.

But what about parental co-sleeping with older children? Once a

child is beyond infancy -say past two years of age, what is accomplished by following this practice? Under what conditions is it likely to be followed? The eastern Kentucky pattern is reminiscent of the Japanese pattern described by Caudill and Plath (1966) because the age of transition for a significant subset of the Kentucky children is in middle childhood. Caudill and Plath report that the Japanese age of transition away from sleeping with parents is eleven, and the process is not complete until 15 or 16 years, considerably beyond the oldest case found in this study. These Kentucky families seem to fall midway between the Japanese and those cultures that co-sleep only through infancy.

Kentucky families have been engaged in co-sleeping for a long time. One historical source based on oral histories collected during the past ten years in rural Kentucky, and using 1890 as its ethnographic present reports:

> Another narrator stated that she and her sister slept in the same room with their parents until the sisters were married. A male informant observed that he slept with his mother until he was 13 years old; his brother, four years older, slept with their father. I asked him if he ever felt a need for privacy during those years. "Well, not too much," he responded. "You see, if you ever take off from home, you'll crave it. It's just what you grow up with (Montell 1986, p.29).

Appalachia has changed from subsistence farming and commercial agriculture to coal mining and light manufacturing since that late nineteenth century ethnographic present, but the practice still remains. Why has it remained? What are the larger ecological, economic, political, and historical causes that create and perpetuate an emphasis on family solidarity with co-sleeping as an element in the pattern? Perhaps it's the historical and current

experience of economic uncertainty that promotes continuation of strong family bonds; perhaps it's a local political system that is conducted in a discourse that draws heavily on images of family and relies on family allegiances that have their roots in some cases in the Civil War and earlier. Perhaps it's the patronage system associated with local jobs (a scarce commodity) that are handed out through personal, often kin-based connections. Perhaps its all of the above, and other things as well. What it is not is some kind of quaint holdover from an archaic past; it is a currrent well-situated pattern of child rearing that is withstanding the onslaught of advise by contemporary child rearing experts. These women are aware of alternate practices, sometimes they express some doubt about what they are doing, but most of them still continue to rear their children in ways reminiscent of the way their grandparents were reared.

NOTES

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TABLE 1: DEMOGRAPHICS -EASTERN KENTUCKY SAMPLE PARENT/CHILD CO-SLEEPING STUDY

1.	CHILD'S SEX		
	Male	60	56.1%
	Female	47	43.9%
2.	CHILD'S AGE IN MONTHS		
	Mean	67.4	
	Range	2-264	
	s.d.	51.6	
3.	PARENTS' AGE IN YEARS		
	Mother		
	Mean	29.87	
	Range	18-58	
	s.d.	7.31	
	Father		
	Mean	33.26	
	Range	20-61	
	s.d.	8.75	
4.	PARENTS' EDUCATION		
	Mother		
	Mean	11.97	
	Range	5-22	
	s.d.	2.64	
	Father		
	Mean	12.41	
	Range	3-19	
	s.d.	2.54	
5.	PARENTS' OCCUPATION		
	Mother		
	Housewife	63	58.8%
	Pink Collar	36	33.7%
	Manag/Entre/ Professional	8	7.5%
	Father		
	Unemployed/Retired	21	21.9%
	Blue Collar	57	59.4%
	Manag/Entre/ Professional	18	18.8%
6.	PARENTS' BIRTH LOCATION*		
	Mother		
	Local[a]	83	78.3%
	Non-local[b]	23	21.7%
	Father		
	Local	91	90.1%
	Non-local	12	9.9%

TABLE 1 continued

7.	PARENTS' MARITAL STATUS*		
	Married	80	76.2%
	Remarried	7	6.7%
	Divorced	14	13.3%
	Never Married	4	3.8%
8.	NUMBER OF ROOMS IN HOUSE*		
	Mean	6.15	
	Range	3-11	
	s.d.	1.61	
9.	NUMBER OF ADULTS IN HOUSE		
	Mean	2.18	
	Range	1-6	
	s.d.	.84	
10.	NUMBER OF CHILDREN IN HOUSE		
	Mean	1.93	
	Range	1-4	
	s.d.	.93	

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*Lower N due to missing data

a
Local includes all Appalachian counties in eastern Kentucky and Tennessee, western Virginia and North Carolina, and all of West Virginia

b
Non-local includes any other birth place

TABLE 2: CHILDREN'S SLEEPING LOCATIONS AS REPORTED BY MOTHER

	Parents Bed	Parents Room	Sibs Room	Own Room
First Sleep Location	36.4%	47.7%	1.9%	14%
Second Sleep Location*	23.4%	21.5%	18.7%	36.4%
Current Sleep Location*	15.0%	20.6%	23.3%	41.1%

N = 107

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* Those moved plus those not moved

TABLE 3: NUMBER OF ROOMS IN HOUSE BY FIRST SLEEPING LOCATION, COMBINED SAMPLE*

Rooms	Parents Bed	Parents Room	Sibs Room	Alone
3 or 4	4			
5 or 6	13	9		3
7 or 8	4	5	1	1
9 or 11	1			3

N = 44

Chi^2 = 19.2319
Sig = .0233
df = 9

* Subsequent sleeping location did not reach acceptable levels of significance.
Second sleeping location: Chi squ = 6.35, sig = .3851
Current sleeping location: Chi squ = 10.8326, sig = .2874

Figure 1. Child's age in months when original sleeping location first changed: children who began life sleeping in parent's bed or bedroom.

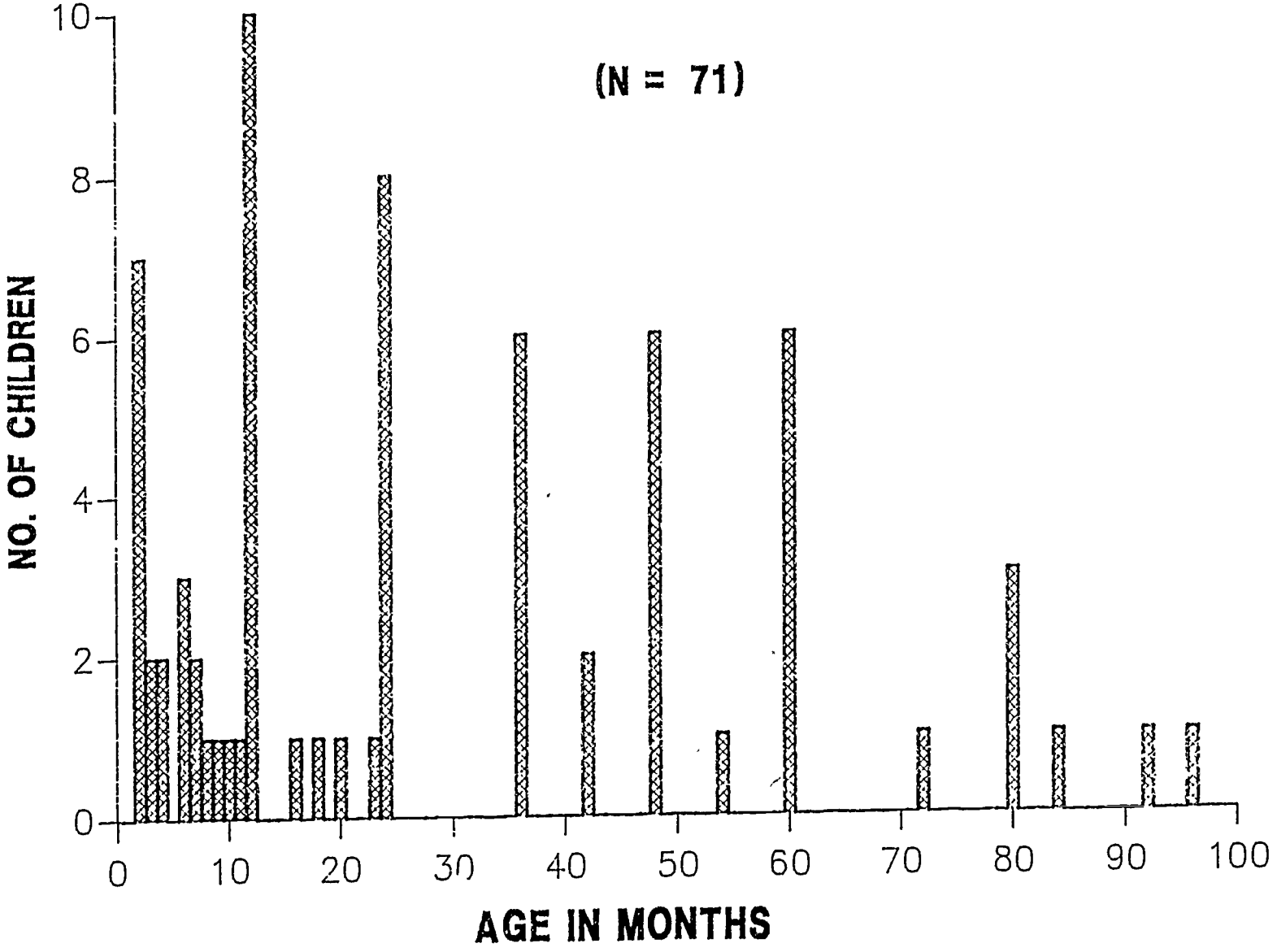

TABLE 4: MOTHER'S BIRTH PLACE BY FIRST SLEEPING LOCATION*

	Parents Bed	Parents Room	Sibs Room	Alone
Local	33	39		11
Non-local	6	12	2	3

N = 106

Chi^2 = 8.23363
Sig = .04
df = 3

* Subsequent sleeping locations did not reach acceptable levels of significance.
Second sleep location: Chi squ = 2.49853 Sig = .4756 df = 3
Current sleep location: Chi squ = 2.98170 Sig = .5609 df = 3

TABLE 5: SEX OF CHILD BY REASON FOR CHANGE, LOCAL MOTHERS ONLY*

	WHY MOVED		
	Cultural Model	Demographic Reasons	Behavioral/ Situational
SEX			
Girl	6	1	10
Boy	16	8	4

N = 45

Chi^2 = 10.4998
Sig = .005
df = 2

*Non-local mothers did not reach acceptable levels of significance.
Chi squ = .000 Sig = 1.000 df = 2

TABLE 6: REASON FOR CHANGING SLEEPING LOCATION BY MOTHER'S FEELINGS ABOUT THE CHANGE, COMBINED SAMPLE

	MOTHER'S FEELINGS		
WHY	Good	Missed	Deserted
Cult Model	2	7	10
Demo-graphics	6	1	2
Behav-ioral/ situa	9	1	5

N = 43

χ^2
Chi = 13.1326
Sig = .01
df = 4