



Interval Method

Preparation for Sleep Changes

- There are many things parents can do before beginning a sleep intervention to help themselves and their child to prepare for the changes up ahead.
- If you are moving your child from the family bed, or from a shared room arrangement, please begin to get your child's room/nursery ready. Put up darkening drapes, if the room is very bright or on a busy street. If you are using the crib as a toy box area, pull out all toys from the crib, leaving only 1-2 soft-sided and small lovey-type toys. Also, pull out any quilts or blankets if your child is under 1 year old, as you will be using a sleeping sack such as Halo's Sleep Sack, to keep your child warm and safe for sleeping.
- Start to put your child in his crib for non-sleeping time, such as when you are in your child's room together. You can also add a mobile or a crib-side toy for your child to play with you put them in the crib.
- Start spending more time in child's room, bath time, diaper changes, playing, reading, cuddling, and getting dressed- you want to send the message to your child that their room is a secure and familiar place to be and you can do this by "building attachment" to the room.
- Remember to also spend time in child's room for play time too, such as floor time, or using a new favorite toy in your child's room. Again, think in terms of time spent in child's room helps them to feel confident about being in their room for sleeping.
- If you are moving your child into a toddler bed, remove any unsafe shelves that child may climb, or bolt to wall, and watch temperature of room, and location of vents (heat or air) if child is sensitive to air blowing on them
- Spend your child's bedtime ritual/routine in their room, reading books, and cuddling. After bath time, bring your child to their warmed bedroom, for massage, diaper, jammies, sing bedtime songs, breastfeed or bottle feed, cuddle, and let baby know, that soon this will be their room for sleeping too. Do not put child to bed in their crib/room yet until you and your child are ready to start the sleep changes. Remember, you can even make-up a little song about how this room is going to be your child's sleep room very soon, as sing it to baby during the massage, diaper and jammies time. Even very young children under 6 months respond to repetition and familiar words communicated by a parent.
- Start to talk to your child about the sleep changes that are coming up. You can do this very simply by saying to your child the following:
"Mommy/Daddy are noticing that you are waking up more at night from Mommy/Daddy night sounds. And, Mommy/Daddy are noticing that you are getting very big for your bassinet, or cradle in Mommy/Daddy's room. We have been spending time in your room playing, cuddling, and feeding, and soon you will be sleeping in your room. And, if you need Mommy/Daddy at night, you can let us know by calling out for us and we will be there."
- Try to "talk" to your child especially when doing the morning wake up, or before naps, or bedtime, and also when playing. Remember, children understand much more than we give them credit for. Additionally, talking about the changes will help parents to prepare for the sleep changes, especially if parents have mixed feelings about making the sleep changes, and/or are feeling guilty or anxious about making sleep changes.
- During the day, help your child to practice moving, rolling, getting onto their belly, and getting onto their back, and falling from standing so that they can do the same when they are sleeping in their crib. You can do this during floor time.
- Try to start to practice naps out of your arms, if you have been napping with your child and want to move them to their room/crib for naps. You can do this with naps in the stroller, or baby carrier. Try this for morning, or mid-day naps.
- If breastfeeding your child at night, start to notice how much/how long your child is eating at the breast. Is your child eating every few hours, or even less, and maybe using the breast to pacify at night? Notice how long your child is eating? Eating hungrily? Snacking, and sleeping?
- Set up a clock next to the bed, or across the room that you can read at night, to get a sense of how long, and start to experiment with slowly dropping one minute per feed at night. You can do this successfully by feeding sitting up, and also letting baby know that you are taking them off of the breast a little early. You can effectively and gently drop "snack feed" at night this way.
- Finally, when moving your child from family bed to crib sleeping, you can help them to get ready for the changes, by transitioning them from the family bed to a bassinet or pack-n-play or side bed before moving them to their room/crib. In this way, your child will begin to get used to a little bit more distance between mommy and child at night. Also, you can ask your partner/spouse to sleep closer to your child so again there is a little more distance between mommy and child, and your partner/spouse can comfort at night, rather than offering a feed to comfort child.



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Please follow these guidelines even if your baby has a bad night or two, fussing or waking more frequently. Don't be surprised if there's a little regression or protest after a few nights of success. If your baby gets sick, or is running fever during the sleep changes, you might want to pause or "freeze" until he's feeling better. If very sick, you might even have to hold at night during an illness to offer more comfort. But then resume your sleep changes when he recovers.

It is important that the parent control the touch. Instead of having him/her hold your hand or finger, you should pat his/hers. Make sure that you do not caress or comfort your child too steadily; do it on and off. You don't want to swap one negative association, like rocking, for another, like your constant touch or the sound of your voice. Don't depend too much on touch because later, you won't be touching as much. Light patting, or a firm hand on baby's chest, are also good ways to provide comfort/touch.

Try not to pick up- but if your child is extremely upset go ahead and pick your child up, over the crib if possible. Hold your child until your child is calm, but keep it brief. Put your child back down again while your child is still awake. If you are using the pick-up to facilitate weaning, or no longer using the pacifier, be judicious in counting down the minutes that you are holding. Try to use the quick pick up/hold and put back down quickly so you don't trade breastfeeding or pacifier for holding at night. If you can avoid picking up, will be less of a possibility of your child needing you to pick up at night later when the sleep changes are complete. For some children, picking up will not cease their crying and may make them cry more.

Try not to convey anxiety about possible tears to your child. Take deep breaths, remain calm, and know that you are helping your child to sleep well at night so that s/he can grow, and develop, and so that you can also start to get the sleep that you need too. Remember, you are making sleep changes so that the whole family can improve their sleep.

The next few days, before you start the crying/fussing intervention, talk with your child about the changes that are up ahead- it can sound a little like this: "(insert child's name here), you are learning and growing. Mommy/Daddy see your body growing and changing. Mommy/Daddy will help you to sleep in your bed. Mommy will be there if you feel frustrated or sad about sleeping a new way. You are not alone and if you need us all you have to do is call out to us and Mommy/Daddy will be there for a cuddle."

If baby is breastfeeding, or has recently weaned, the first few nights of the crying/fussing intervention works best when dad/partner (someone other than mom) can go to baby during the 5-10-15 minute intervals and provide comfort. You will help to minimize crying, as well as provide an alternative to breastfeeding/maternal comfort. This is less of an issue if baby has been weaned but can be an issue if baby has been recently weaned.

For night-feeding babies, you can successfully sleep train with the Interval Method and still offer x1-2 feeds per night. Please see the Dropping Night Feeds handout.

• **If baby is unable to fall asleep at bedtime (needs breastfeed/bottle/paci/bouncing/rocking to fall asleep) or 1st time sleeping in crib/nursery**

You can feed baby in a brightly lit room 30-60 minutes before bedtime to avoid baby falling asleep on breast or bottle. Following bedtime routine, leave lights on low and mommy, offer baby a breast feed with lights on. Keep awake by singing to baby or talking gently. Remember, you want to put baby in the crib drowsy, not asleep.

At bedtime, place baby in crib, Dad/partner stay for 1-3 minutes, no longer, comforting baby with shhh, lite pat, or hand on chest and leave promptly.

After leaving room, count out 5-10-15-15-15 (until asleep) minute intervals

After 5 minutes of crying, daddy/partner go to baby for 60 seconds of intermittent patting, shh-ing, or firm hand on chest. You can say "Sleepy-time sweetheart," or "Shhh" and leave room promptly.

If baby stops crying, or falls asleep while you are there for the 60 seconds, that is a bonus- you are only there to let baby know that s/he isn't alone, and provide parent comfort- if s/he ramps up as you are leaving, **don't** confuse baby by walking back to crib, and **do** continue to walk out of the room.

• **If baby is unable to go back to sleep for middle-of-the-night pop ups**

Go to baby right away when baby pops up at night, before beginning the intervals, and leave after 60 seconds. You are just providing a brief comfort and presence before starting the 5-10-15 minute intervals. Repeat the same intervals 5-10-15-15-15 (until asleep) minutes as you did for the bedtime crying/fussing/resettling until baby falls asleep. If you hear baby cycling between periods of crying/fussing/babbling and periods of silence, pay attention to his/her self-

soothing (babbling or fussing to silence) and stop the clock (stop counting)- don't go in at intervals as it may be a sign that baby is starting to go to sleep, and your going in may ramp him/her up rather than soothe- be judicious about this, and generally it works best to be conservative and not go in unless you hear him/her ramp up hard for a period of several minutes, in which case you would begin the intervals again- if you have to pick him/her up, do it for 1-3 minutes and quickly put him/her back down, just to break the cycle of crying and help him/her to settle but not fall asleep in your arms

Repeat the above until s/he falls asleep- 5-10-15-15-15 minute intervals- so a total of 1-1.5 hrs of off-and-on crying

End if baby has been crying 1.5-2 hrs and get baby/child to sleep the way your would normally get to sleep, feed or hold.

Average crying time for bedtime/middle of the night wakings is 15 min to 1-1.5 hrs for the first bedtime and later night wakings for night #1 to #3. If you are not seeing a lessening in the crying after 1-3 nights of doing the Interval Method, best to pause and wait another 1-2 weeks before starting again. Your baby may not be ready to start sleep training.

If you are weaning from breastfeeds, do watch your breasts for fullness and pump when necessary.

If you are weaning off of night feeds (breast or bottle), and using scheduled night feeds, remember to set your alarm clock for feed time. Go to baby and gently feed (breast or bottle) and gently put baby back in crib. Or you can feed baby in a feed window, feeding baby every 3-5 hrs at night.

If baby is due for a scheduled feed, and baby is just starting to cry/wake up (first 5-10 minutes) go to baby right away and feed. If baby is due for a scheduled feed, and baby has been crying/resettling, better to continue with intervals feeding baby later, 20-30 min after baby has gone back to sleep.

It's fine if baby falls asleep on the middle of the night feeds, just be sure that you don't feed baby to sleep if baby is doing intervals and practicing learning how to self-soothe.

Remember not to reinsert the pacifier and do offer baby a lovey, a small (10 inches by 10 inches), breathable blankie.

• **For early morning wake up's**

If baby wakes between 4-6 am, do avoid going to baby right away and see if baby will go back to sleep.

Use the 5-10-15 minute intervals to help baby to resettlegod back to sleep or do longer intervals 20-30 minutes long or don't go in for 1-2 hrs waiting until babies wake up time.

If baby wakes between 4-6am, do try to the 5-10-15 minute crying intervals. Do not give baby a diaper change unless baby has a bad diaper rash (use a Huggies Overnight Diaper- if concerned about leaking diaper and use a good overnight barrier cream like Desitin).

You are working towards a total of 10-12 hrs of sleep time at night (which may include x1-2 feeds depending upon babies age)

Be patient as early morning wake up's are more difficult to change.

• **Extinction Burst**

When using the Interval Method you may have an "extinction burst." As you change sleep patterns, some babies will have a few good nights and night 3 or later, will have a night of sleep training regression and cry as much on that night as they did the first night. This can cause parents a good deal of concern and many parents who don't know about extinction burst will pull the plug on sleep changes. Try to hang in there through extinction burst and continue with the method. Not all babies/toddlers have an extinction burst, maybe 25% and it will usually occur after several good nights in a row of sleep changes.