

The Dream Baby Blueprint

A Step-by-Step Guide to 12-Hour Nights

For the mama who's done counting ceiling tiles at 3am.

◆ Science-backed wake windows
by age

◆ A 5-step bedtime ritual

◆ Month-by-month cheat sheets



You are not failing.

You've Googled "how to get baby to sleep through the night" at 2am while bouncing on a yoga ball with one eye open. You've read the forums. You've gotten the contradicting advice. You've tried the things. And you're still here — exhausted and hopeful — because that's exactly what a good mother does.

Your baby is not broken. Your instincts are not wrong.

And 12-hour nights are not a myth reserved for "easy babies." They are a learnable skill — for your baby, and for you.

This guide is built on one simple promise: gentle methods, real results, and a routine that actually fits your life. No cry-it-out required. No rigid military scheduling. Just science-backed wake windows, a calming environment, and a bedtime ritual your whole family will come to love.

You've already done the hardest part — you showed up. Now let's get you both some rest.

This guide is designed for healthy, full-term babies. Always consult your pediatrician before making changes to your baby's sleep routine, especially in the first 3 months.



The Science of Sleep

Why Babies (& Moms) Can't Sleep

Two hormones are running the show in your baby's sleep world. Understanding them takes about three minutes and changes everything about how you approach the day.

MELATONIN

The sleep hormone. Triggered by darkness and consistent routines. Melatonin tells the brain it's time to power down. Babies need cues — the same routine, same room, same time — to produce it reliably.

CORTISOL

The stress hormone. Triggered by overtiredness. When a baby is kept awake too long, cortisol floods the system. The wired-and-tired baby who fights sleep harder than ever? That's cortisol speaking.

THE TAKEAWAY

The goal every day: maximize melatonin, eliminate cortisol. You do this by catching sleep windows at the right time, keeping the room dark, and using a consistent routine that the brain learns to associate with sleep onset.

Wake Windows: Your Secret Weapon

The #1 game-changer most parents never learn.

What is a wake window?

"A wake window is the ideal stretch of awake time between sleeps — the sweet spot where your baby is tired enough to sleep, but not so tired that cortisol has taken over."

Age	Wake Window	# of Naps	Pro Tip
0–6 weeks	45–60 min	4–5 naps	Watch for yawns at 45 min
6–12 weeks	60–90 min	4 naps	First wake window is shortest
3–4 months	1.5–2 hrs	3–4 naps	Last window before bed = longest
5–6 months	2–2.5 hrs	3 naps	Transition to 3 naps
6–8 months	2.5–3 hrs	2 naps	Consistent nap schedule starts
9–11 months	3–3.5 hrs	2 naps	Watch for 2-to-1 nap readiness
12–18 months	5–6 hrs	1 nap	Nap at 12:30–1pm is the goal
18–24 months	5–6 hrs	1 nap	Bedtime 7–8pm protects night sleep

The 5-Step Bedtime Ritual

Same order. Every night. This is where the magic happens.

01 BATH OR WARM WIPE-DOWN

Warm water signals a drop in core temperature — nature's sleep trigger. 10 minutes max. No need for full baths daily; a warm cloth works perfectly on non-bath nights.

02 MASSAGE & LOTION

Touch releases oxytocin (the bonding hormone) and turns off cortisol. Use lavender-scented lotion. 3–5 minutes of gentle strokes. This step is short but neurologically powerful.

03 FRESH DIAPER & SLEEP OUTFIT

Use the same sleeper style each night — this becomes the "sleep uniform." A consistent sensory cue tells the nervous system rest is coming. Sleep sack over loose blankets, always.

04 FEED (BREAST / BOTTLE / DREAM FEED)

Feed in a dim room with no screens. Keep baby awake enough to notice when feeding ends. Goal: drowsy but not fully asleep at the breast or bottle. This distinction matters enormously.

05 FINAL WIND-DOWN & PUT DOWN

One short song, white noise on, room dark. Place baby in the crib drowsy but awake. This last step is the one that builds independent sleep skills over time. Do not skip it.

TIMING

Total routine: 25–35 minutes. Same time every night = melatonin on autopilot. A "good enough" routine done consistently beats a perfect one done sometimes.

The Sleep Environment Checklist

The room is your silent, 24/7 sleep cue. Get it right once.

DARKNESS

- **Blackout curtains / blinds**
No gaps. Hold your hand up at 2pm — can't see it? Perfect.
- **No nightlights in sleep space**
Red light only if needed for feeds. No blue or white light.
- **Cover indicator lights**
Black electrical tape over the baby monitor and sound machine.

WHITE NOISE

- **Consistent background sound**
60–65 dB — about the level of a running shower. Dedicated machine.
- **Run all night, no timer**
Turn off only when your family is noise-proof.
- **Place near the door**
Muffles outside sounds. Never directly next to baby's ears.

TEMPERATURE

- **68–72°F (20–22°C) is ideal**
Slightly cool promotes deeper sleep. Check chest/back, not hands.
- **Sleep sack instead of blankets**
0.5–2.5 TOG depending on room temp. Dress for the room.

SAFE SLEEP

- **Firm, flat mattress**
No pillows, bumpers, or stuffed animals until 12 months (AAP).
- **Own sleep space**
Own crib or bassinet in your room for first 6 months recommended.
- **Swaddle under 8 weeks**
Stops the Moro reflex. Transition to sleep sack when rolling starts.



Age-by-Age Guide

Month One through Month Twelve

A complete, hour-by-hour blueprint for every month of the first year. Read the month you are in. Bookmark the next one. Return here whenever the schedule stops working — it usually means your baby is ready to move forward.

Month 1 · MONTH ONE

The Fourth Trimester — Survival Mode is Valid

WAKE WINDOW	NAPS / DAY	TOTAL SLEEP	NIGHT SLEEP	NAP SLEEP	BEDTIME
45–60 min	5–6	15–17 hrs	8–9 hrs	7–8 hrs	8–10 PM

Month one is not about sleep training — it is about survival, bonding, and learning your baby's language. Newborns have no circadian rhythm yet. Their brains literally cannot tell the difference between day and night. Your only job this month: feed on demand, watch for early sleepy cues at the 45-minute mark, and protect your own sanity. The schedule above is a loose rhythm, not a rigid timetable.

THE PERFECT DAY — Hour by Hour

DEVELOPMENTAL MILESTONES

7:00 AM	Wake & Feed (breast/bottle) First feed. Diaper change. Skin-to-skin.
7:45 AM	Nap 1 begins First wake window SHORTEST. Do not push past 60 min.
9:00 AM	Wake & Feed Watch for hunger cues. Newborns cluster-feed constantly.
9:50 AM	Nap 2 begins Swaddle tight. White noise on. Dim the room.
11:15 AM	Wake & Feed Tummy time on your chest counts. Even 3 minutes.
12:00 PM	Nap 3 begins Try the bassinet. Use motion if needed.
1:30 PM	Wake & Feed Your biggest awake stretch. Rest when possible.
2:20 PM	Nap 4 begins Try putting down drowsy this nap.
3:45 PM	Wake & Feed Fussy hour approaching. Keep stimulation low.
4:30 PM	Catnap (30–45 min) Bridge to bedtime. Do not skip it.
5:30 PM	Wake & Feed Witching hour peak. Carrier, white noise, dim lights.
7:30 PM	Bedtime attempt Do not expect a long stretch yet. This is normal.
10:30 PM	Dream feed (optional) Feed drowsy to extend first night stretch.

Moro Reflex (Startle)

Arms fling when startled. Wakes baby from sleep. Tight swaddle is non-negotiable.

Day / Night Confusion

No melatonin production yet. Expose to morning sunlight daily to begin circadian training.

Cluster Feeding

Non-stop evening feeding is normal and necessary. Not a hunger or supply issue.

Visual Focus at 8–12 in

Your face is their whole world during feeds. Connection is the priority.

HOW THIS AFFECTS SLEEP

The Moro reflex is the single biggest sleep disruptor in month one. It fires during the transition from light to deep sleep — typically 15–20 minutes into a nap. A tight swaddle prevents the arms from flinging and allows baby to stay asleep through the cycle transition. Without it, the 20-minute nap becomes your reality every single time. Additionally, newborns spend up to 50% of sleep in active (REM) sleep, which looks like grimacing, twitching, and grunting. This is NOT waking up. Wait 60 full seconds before responding to any sound during sleep.

NIGHT EXPECTATIONS

Realistic night: 2–3 hour stretches, waking every 90 minutes to 3 hours to feed. This is biologically normal and necessary for weight gain. By the end of month one, some babies will string together one 3–4 hour stretch early in the night. Celebrate this. Night feeds should be quiet, dim, and boring — this begins teaching the day/night difference.

WATCH FOR THIS MONTH

- Consistent waking at exactly 20–45 min (Moro reflex — tighten the swaddle)
- Clicking sound during feeds (possible latch issue — see a lactation consultant)
- More than 3 hours of inconsolable crying daily after week 2 (discuss with pediatrician)
- Not returning to birth weight by day 10–14 (flag for your provider immediately)

PRO TIP — MONTH 1

Wait 60 full seconds before responding to any sound your newborn makes during sleep. Newborns grunt, squeak, and cry briefly during sleep cycle transitions. If you rush in at every sound, you interrupt a natural self-settling process. Count to 60. You will be amazed how often they resettle on their own — even this young.

You are not behind. There is no schedule to fall behind on. You are doing it perfectly.

Month 2 · MONTH TWO

First Smiles, First Patterns — Light at the End of the Tunnel

WAKE WINDOW	NAPS / DAY	TOTAL SLEEP	NIGHT SLEEP	NAP SLEEP	BEDTIME
60–90 min	4–5	15–16 hrs	9–10 hrs	5–6 hrs	8:00–9:30 PM

Month two brings the first real gift: the social smile. Around week 6–8, your baby begins smiling in response to your face — a profound neurological milestone signaling the brain is wiring for connection. Sleep-wise, loose patterns begin to emerge. This is the month to start a consistent bedtime routine, even a simple 15-minute version. Consistency right now lays the neurological track for everything that follows.

THE PERFECT DAY — Hour by Hour

DEVELOPMENTAL MILESTONES

7:00 AM	Wake & Feed Consistent wake time starts training the circadian clock.
8:15 AM	Nap 1 (45–90 min) First wake window is still the shortest.
9:45 AM	Wake & Feed + Active Time Batting at toys, social smiling, tummy time.
11:15 AM	Nap 2 (45–90 min) Mid-morning nap. Aim for bassinet or crib.
12:45 PM	Wake & Feed Longer awake stretch. Walks outside help circadian rhythm.
2:15 PM	Nap 3 (45–90 min) Afternoon nap. Keep room dark.
3:45 PM	Wake & Feed Watch the 90-minute clock from now.
5:00 PM	Catnap (30–45 min) Bridge nap to avoid overtiredness at bedtime.
5:50 PM	Wake & Final Feed Witching hour — carrier, dim lights, calm voices.
6:45 PM	Bedtime Routine starts Bath, massage, PJ, feed, song.
7:30 PM	BEDTIME Bedtime getting earlier this month. This is healthy.
10:30 PM	Dream feed (optional) Can extend first night stretch to 4–5 hours.

Social Smiling

First smile around 6 weeks. More alertness means harder to soothe — watch the window.

Increased Wakefulness

Baby spends more genuine awake time. Do not miss the sleepy cue.

Gut Maturation

Colic and gas peak at 6 weeks. Evening fussiness may be gas, not sleep refusal.

Neck Control Starting

Holding head up briefly. Can do more tummy time. Burns more energy.

HOW THIS AFFECTS SLEEP

The emerging social brain is a double-edged sword this month. Your baby is alert enough to become genuinely overstimulated — and overstimulation leads directly to overtiredness, which leads to cortisol flooding, which leads to the impossible-to-settle 8pm baby. The solution: shorten activities before sleep, watch the 90-minute clock, and start your soothing ritual earlier than feels necessary. The moment you see the first yawn or eye-rub, you have a 5–10 minute window before cortisol kicks in.

NIGHT EXPECTATIONS

By 8 weeks, many babies will have one longer stretch of 4–5 hours early in the night. This is the foundation of the future 12-hour night. If you are seeing it, protect it. Adding a dream feed at 10:30pm can push that first stretch even later.

WATCH FOR THIS MONTH

- Naps consistently under 20 min (try tighter swaddle and louder white noise)
- No social smile by 8 weeks (mention at the 2-month pediatrician visit)
- Arching back during or after feeds (possible reflux — discuss with provider)
- Extreme fussiness 5–11pm daily (colic peak — ends by 3 months for most families)

PRO TIP — MONTH 2

Start the bedtime routine NOW, even if bedtime is still 9pm and inconsistent. The brain learns sequences. Bath, massage, feed, song, dark room — same order every night for 14 days. By the end of month two, many babies will begin to yawn during the song. That is melatonin responding to a learned cue. You just hacked your baby's brain.

The 6-week mark is the hardest. If you're reading this at 3am — you're almost there.

Month 3 · MONTH THREE

End of the Fourth Trimester — The Corner is Turning

WAKE WINDOW	NAPS / DAY	TOTAL SLEEP	NIGHT SLEEP	NAP SLEEP	BEDTIME
75–105 min	4 naps	14–16 hrs	9–11 hrs	4–5 hrs	7:30–8:30 PM

Welcome to the end of the fourth trimester. At 12 weeks, the fog begins to lift. Colic resolves for most babies, social smiling is in full swing, and you may be seeing stretches of 5–6 hours at night for the first time. Your baby's circadian rhythm is now genuinely developing — meaning consistent routines are starting to have a measurable impact. This is also the month to begin preparing for the swaddle transition if your baby is showing any sign of rolling.

THE PERFECT DAY — Hour by Hour

7:00 AM	Wake & Feed Try to keep this consistent within 30 minutes each day.
8:30 AM	Nap 1 (60–90 min) First nap in a dark room. Practice crib placement here.
10:15 AM	Wake & Feed + Play High activity time. Talking, singing, floor play.
12:00 PM	Nap 2 (60–90 min) Target the longest nap of the day midday.
1:45 PM	Wake & Feed Good time for a stroller walk or errands.
3:15 PM	Nap 3 (45–60 min) This nap becomes the most inconsistent. That is okay.
4:30 PM	Wake & Feed Wind-down period begins. Keep lights dimmer after 5pm.
5:45 PM	Catnap (30–40 min) if needed Only if showing tired signs. Skip if not needed.
6:00 PM	Bedtime routine begins Bath, massage, diaper, feed, song. Same every night.
7:15 PM	BEDTIME First sleep is now the longest. Protect it fiercely.
11:00 PM	Night feed (expected) Brief, dark, boring. Back down in 10–15 minutes.
3:00 AM	Night feed if needed Many babies drop to one night feed this month.

DEVELOPMENTAL MILESTONES

Swaddle Transition

Rolling begins 3–5 months. If baby can roll, arms **MUST** be out. Transition to sleep sack now.

Circadian Rhythm Develops

Melatonin production begins. Consistent routines now create measurable results.

Social Engagement

Cooing, babbling, laughing. Overstimulation risk increases with engagement.

4-Month Regression Building

Sleep cycles are reorganizing. Increased wake-ups weeks 11–12 are the preview.

HOW THIS AFFECTS SLEEP

Month three is a tale of two halves. Weeks 9–10 often feel like a breakthrough — longer stretches, more predictable naps, an earlier bedtime that actually works. Then weeks 11–12 arrive with a sudden increase in night waking and shorter naps. This is not regression — this is the neurological groundwork being laid for the 4-month sleep change. The brain is reorganizing its sleep cycle architecture. Stay consistent with your routine. Babies who enter the 4-month regression with a strong routine navigate it significantly better than those who do not.

NIGHT EXPECTATIONS

Night sleep is consolidating. Expect 1–2 night feeds around 11pm and 3am. Some babies drop to a single night feed this month. If you are still seeing 3+ night wakings at 12 weeks with a healthy-weight baby, consider whether feeding has become the primary sleep association.

WATCH FOR THIS MONTH

- Rolling attempts beginning — transition arms out of swaddle immediately
- Sudden increase in night wakings at weeks 11–12 (4-month regression preview — normal)
- Naps shortening to 30–45 min consistently (sleep cycle consolidation underway)
- Catnaps becoming harder to drop (sign baby is ready for more awake time)

PRO TIP — MONTH 3

Begin the swaddle transition this month, even if rolling has not started yet. Going cold turkey from a swaddle to a sleep sack at 3–4 months is a significant disruption. Instead, start by leaving one arm free for 3–4 nights, then both arms free, before switching to the sleep sack. Products like Zipadee-Zip or Love to Dream Swaddle UP make this transition seamless.

Three months in. You are no longer a new parent. You are an experienced one. Feel that.

Month 4 · MONTH FOUR

The 4-Month Regression — The Hardest Week You Will Face

WAKE WINDOW	NAPS / DAY	TOTAL SLEEP	NIGHT SLEEP	NAP SLEEP	BEDTIME
1.5–2 hrs	3–4	14–15 hrs	10–11 hrs	3.5–4 hrs	7:00–7:30 PM

Month four is infamous for a reason. The 4-month sleep regression is not a phase that passes on its own — it is a permanent neurological change. Your baby's sleep cycles have restructured from simple newborn patterns into adult-like cycles with light and deep sleep phases. They now partially wake between every cycle — roughly every 45 minutes. If feeding or rocking was how they fell asleep, they will need that same thing to reconnect cycles all night. This is not a bad baby. This is a baby whose brain just grew. The answer is not more soothing — it is teaching independent sleep skills.

REGRESSION ALERT

THE 4-MONTH REGRESSION IS PERMANENT. Sleep will not improve without intervention. This is the moment to build independent sleep skills. The routine you establish this month determines your nights for the next 12 months.

THE PERFECT DAY — Hour by Hour

7:00 AM	Wake & Feed Try hard to keep this anchor time consistent every day.
8:45 AM	Nap 1 (45–90 min) First wake window: 1.5 hrs. Watch for early tired cues.
10:30 AM	Wake & Feed + Active Play Second wind. Talking, reaching, floor gym.
12:15 PM	Nap 2 (60–90 min) Target the longest nap here. Blackout room essential.
2:00 PM	Wake & Feed Good time for fresh air. Baby carrier or stroller.
3:45 PM	Nap 3 (45–60 min) No props you cannot repeat at night.
4:45 PM	Wake & Feed Cap last nap by 4:45 to protect bedtime.
5:45 PM	Bedtime routine begins Bath every other night, massage, PJ, feed, song.
6:45 PM	BEDTIME Earlier bedtime = better night sleep. This is science.
10:00 PM	Dream feed (optional) Begin fading this by end of month.
2:00 AM	Night feed (expected) Brief, boring. No lights. Back down in under 10 min.

DEVELOPMENTAL MILESTONES

Sleep Cycle Maturation

Permanent change. Adult-like light sleep phases now exist between each cycle.

Rolling Attempts

Many babies attempt tummy-to-back rolls. STOP swaddling the moment any rolling occurs.

Hand Discovery

Baby finds their hands. Hand-sucking can become a self-soothing tool — encourage it.

Object Permanence Begins

Baby begins to understand you exist when out of sight. Separation gets harder.

HOW THIS AFFECTS SLEEP

Here is what is actually happening at 3am: your baby wakes naturally between sleep cycles and looks for whatever was present when they first fell asleep. If that was your breast, your arms, or a rocking chair, they will cry for exactly that — every 45–90 minutes all night. The term is "sleep onset association." Whatever you use to get baby to sleep at bedtime will be required again every cycle all night. This month, begin putting baby into the crib drowsy but awake — not fully asleep. This one change is the foundation of every sleep improvement that follows.

NIGHT EXPECTATIONS

Expect significant disruption this month regardless of what you do. The regression itself lasts 2–6 weeks. Babies who had independent sleep skills before month four navigate it faster. Hold your routine. Do not introduce new props. Begin practicing the drowsy-but-awake placement every night at bedtime.

WATCH FOR THIS MONTH

- Swaddle exit: any rolling = arms must be free immediately
- Hourly night wakings lasting more than 3 weeks (time to use a sleep training method)
- Refusing all naps — likely overtired, move bedtime 30 minutes earlier
- Nursing or bottle every wake-up all night (feeding association — address now)

PRO TIP — MONTH 4

After your full bedtime routine, place your baby in the crib when drowsy — eyes heavy, body relaxed — but still technically awake. Sit next to the crib with your hand on their chest if needed. You are not abandoning them. You are giving them the chance to experience falling asleep in their sleep space. Do this for bedtime only at first. It takes 3–7 nights. Once they can do it at bedtime, night wakings begin to decrease automatically.

This is the hardest week. It ends. And what comes after is the best sleep you've had in months.

Month 5 • MONTH FIVE

Rebuilding After the Regression — Patterns Are Possible

WAKE WINDOW	NAPS / DAY	TOTAL SLEEP	NIGHT SLEEP	NAP SLEEP	BEDTIME
1.75–2.25 hrs	3 naps	14–15 hrs	10–11 hrs	3.5–4 hrs	7:00–7:30 PM

If month four was the earthquake, month five is the rebuilding. The neurological reorganization is complete, and now you have a genuine opportunity. Your baby's sleep cycles are stable, wake windows are becoming more predictable, and with consistent drowsy-but-awake practice, many babies begin sleeping 5–7 hour stretches at night by the end of this month. Solid foods may begin around month five or six — always offer milk first, solids second.

THE PERFECT DAY — Hour by Hour

DEVELOPMENTAL MILESTONES

7:00 AM	Wake & Feed Morning anchor. Same time daily within 20 minutes.
9:00 AM	Nap 1 (60–90 min) Wake window 1.75 hrs. Watch for yawning and eye-rubbing.
10:45 AM	Wake & Feed + Active Play Sitting with support, reaching for toys.
12:45 PM	Nap 2 (60–90 min) Midday anchor nap. Aim for 60+ minutes.
2:30 PM	Wake & Feed Solid foods may begin. Always milk first.
4:15 PM	Nap 3 (30–45 min catnap) Bridge nap. Do not let it run past 5pm.
5:00 PM	Wake & Feed Wind-down begins. Dimmer and quieter after this point.
6:00 PM	Bedtime routine begins Bath, massage, PJ, dim feed, song, crib.
7:00 PM	BEDTIME Drowsy but awake placement. Practice every single night.
3:00 AM	Night feed if needed One feed is normal. Two or more — check associations.

Rolling Both Ways

Full rolling by 5–6 months. Sleep sack only. No exceptions. Check for rolling in crib.

Sitting with Support

Core strengthening. More physical activity = more genuine tiredness at sleep time.

Solid Food Introduction

Starting solids can briefly disrupt digestion. Introduce new foods in the morning.

Increased Babbling

Language areas activating. Overstimulation risk is higher. Wind-down is more important.

HOW THIS AFFECTS SLEEP

Month five is when you can begin to see the payoff of the drowsy-but-awake work from month four. Babies placed in the crib awake at bedtime for 2+ weeks often begin connecting sleep cycles — meaning a 5, 6, or 7-hour first stretch is possible. The 30-minute nap (the crap nap) is still common this month. The Troubleshooting section of this guide covers the full nap extension technique in detail.

NIGHT EXPECTATIONS

Goal for this month: one, ideally zero, night feeds. A well-nourished 5-month-old at a healthy weight can generally go 6–8 hours without feeding at night. If still feeding 2–3 times, gently space the feeds 30 minutes later every 3 nights. Your body will adjust.

WATCH FOR THIS MONTH

- Nap 3 shortening to 20 min or less (normal — bridge nap transitioning out)
- Early morning waking before 6am (bedtime may paradoxically be too late)
- Solids causing gas at night (introduce new foods in the morning only)
- Night feeds increasing — check for new sleep associations created during regression

PRO TIP — MONTH 5

The 5-month nap schedule is a bridge: three naps now, two naps coming at months 6–8. The third nap will become increasingly hard — short, fought, and unreliable. Do not drop it yet. Without it, baby will be overtired at bedtime and will actually sleep worse. Keep the third nap as a 30–40 minute bridge and let it fade naturally around month 6–7.

The breakthrough you've been waiting for is this month. Trust the process. Stay consistent.

Month 6 • MONTH SIX

The Golden Window — 2-Nap Schedule & Longer Nights

WAKE WINDOW	NAPS / DAY	TOTAL SLEEP	NIGHT SLEEP	NAP SLEEP	BEDTIME
2–2.5 hrs	2–3	13.5–15 hrs	10–11 hrs	3–4 hrs	6:45–7:30 PM

Six months is a landmark. Your baby can sit supported, is exploring solid foods, laughs out loud, and recognizes you completely. It is also the month when consistent, consolidated sleep becomes genuinely achievable. The two-nap schedule is your new target. Wake windows stretch to 2–2.5 hours, making the day more predictable and manageable. This is also the last recommended month for room-sharing per the AAP — if you plan to transition baby to their own room, month six is a developmentally supported time to do it.

THE PERFECT DAY — Hour by Hour

7:00 AM	Wake & Feed Firm morning anchor. Blackout curtains prevent 5am starts.
9:15 AM	Nap 1 (60–90 min) First wake window: 2 hrs. First consolidated nap.
11:00 AM	Wake & Feed + Active Play Sitting independently. More floor play.
1:15 PM	Nap 2 (60–90 min) Afternoon anchor nap. Most important of the two.
3:00 PM	Wake & Feed + Solids Practice Solids 1–2x daily. Always milk first.
4:45 PM	Catnap ONLY if tired signs Begin phasing out. Most 6-month babies can skip it.
5:30 PM	Feed + Wind-down play Low stimulation. No screens. Floor play only.
6:00 PM	Bedtime routine begins Full ritual: bath, massage, PJ, dim feed, 2 books, song.
7:00 PM	BEDTIME Two full naps = earlier, easier bedtime is possible.
2:00 AM	Night feed if needed Healthy babies at 6 months often need zero feeds.

DEVELOPMENTAL MILESTONES

Sitting Independently

Core strength developing. More energy expenditure = genuinely tired at bedtime.

Object Permanence

Baby knows you exist when absent. Separation anxiety builds. Routine is key.

Stranger Anxiety Onset

Introduce new caregivers during awake times first to protect sleep.

Teething Begins

First teeth often arrive 6–10 months. Disrupts sleep 1–2 nights around breakthrough.

HOW THIS AFFECTS SLEEP

Month six is often called the golden window for sleep training because several factors align: the 4-month regression has passed, wake windows support consolidated naps, and the circadian rhythm is fully operational. Babies at six months have the cognitive ability to learn self-settling, the physical ability to go without night feeds if weight is healthy, and the emotional resilience to adapt within 5–7 nights. The Methods section of this guide walks you through the Chair Method and Pick-Up/Put-Down in full.

NIGHT EXPECTATIONS

A six-month-old at a healthy weight, with strong self-settling skills and two solid naps, is fully capable of sleeping 11–12 hours with zero night feeds. If this is not your reality, it is a solvable problem, not a baby problem. The most common culprit is a feeding-to-sleep association.

WATCH FOR THIS MONTH

- Room transition sleep disruption (normal for 5–7 nights — stay consistent)
- Teething disruption: 1–2 bad nights is teething; a week of bad nights is habit
- Separation anxiety at bedtime — consistent routine and brief check-ins help
- Early AM waking 5–5:30am (try blackout curtains and white noise near the door)

PRO TIP — MONTH 6

The two-nap transition is not a cliff — it is a gradual fade. Watch whether baby fights the third nap or skips it 3+ days in a row. When that happens, do not force it. Instead, move bedtime to 6:30pm on days without a third nap. Do this for 2 weeks until the two-nap schedule is firmly established.

Six months. Half a year. You built a whole human and kept them alive and loved. That is extraordinary.

Month 7 • MONTH SEVEN

On the Move — Crawling, Cruising & Separation Anxiety

WAKE WINDOW	NAPS / DAY	TOTAL SLEEP	NIGHT SLEEP	NAP SLEEP	BEDTIME
2.25–2.75 hrs	2 naps	13.5–14.5 hrs	10.5–11 hrs	3–3.5 hrs	6:45–7:30 PM

Month seven brings movement — crawling, pivoting, pulling to stand. Each new physical skill requires enormous neurological energy, which means genuine physical tiredness at sleep time. But each new skill also disrupts sleep as the brain practices it overnight. You may notice your baby waking and immediately trying to pull to stand in the crib, unable to figure out how to get back down. Separation anxiety also peaks this month. A consistent, predictable bedtime routine with a clear and loving goodbye is your most powerful tool.

NOTE FOR THIS MONTH

Separation anxiety intensifies this month. A consistent bedtime routine with a predictable, loving farewell ritual helps baby feel safe. Avoid sneaking away — always say a clear, brief goodbye.

THE PERFECT DAY — Hour by Hour

7:00 AM	Wake & Feed + Breakfast Oatmeal, pureed fruit. Milk first, always.
9:30 AM	Nap 1 (60–90 min) Wake window 2.25 hrs. Note crawling-practice fatigue.
11:15 AM	Wake & Feed + Active Floor Play Crawling practice. Pull-to-stand attempts.
1:30 PM	Nap 2 (60–90 min) Cap at 90 min to protect bedtime.
3:15 PM	Wake & Snack + Outside Time Fresh air and movement consolidates night sleep.
5:15 PM	Feed + Wind-down Dim lights. Quiet play only. No screens.
6:00 PM	Bedtime routine begins Bath, massage, PJ, milk, books, song.
7:00 PM	BEDTIME Drowsy but awake. Stay consistent even on hard nights.
2:00 AM	Night feed if needed Healthy babies often ready to night-wean at 7 months.

DEVELOPMENTAL MILESTONES

Crawling / Pre-crawling

Physical milestone. Brain practices overnight. Expect 5–7 nights of disruption.

Pulling to Stand

Baby stands in crib and cannot get down. Teach the reverse during day play.

Pincer Grasp Developing

Fine motor skills improving. More self-feeding = less feed-to-sleep tendency.

Separation Anxiety Peak

Peaks 7–9 months. A loving, CONSISTENT goodbye ritual reduces this significantly.

HOW THIS AFFECTS SLEEP

Every new motor skill temporarily disrupts sleep for 3–7 days as the brain consolidates the new neural pathway overnight. This is called sleep-related motor memory consolidation — a sign of healthy development. The night disruption from crawling or pulling up is not a regression; it is a milestone. Practice the new skill extensively during the day (especially the reverse: teaching baby to lower themselves from standing) and maintain bedtime consistency. Babies with a strong sleep foundation weather these disruptions in 3–5 nights.

NIGHT EXPECTATIONS

A 7-month-old with two solid naps and good independent sleep skills should be sleeping 10.5–11 hours with zero to one night feeds. If still feeding twice or more, the night-weaning approach in the Troubleshooting section walks you through gradual reduction.

WATCH FOR THIS MONTH

- Standing in crib: practice the sit-down sequence during the day (20+ reps daily)
- New separation anxiety at bedtime (do not skip the goodbye ritual — keep it brief and loving)
- Sudden nap strikes lasting 3+ days (likely motor milestone — maintain schedule)
- Early 5am waking (check room temperature, white noise level, blackout completeness)

PRO TIP — MONTH 7

The standing-in-crib problem is solved during the day, not the night. When baby pulls to stand during awake play, guide them through the sit-down sequence: hold their hands, gently bend their knees, guide them down to sitting. Say "sit down" calmly. Do this 20+ times per day for 5–7 days. Once they can do it during the day, they will do it in the crib at night. No nighttime intervention required.

Every time your baby learns something new, your sleep pays the price. That means they're thriving.

Month 8 · MONTH EIGHT

Cruising to Independence — The 8–10 Month Sleep Shift

WAKE WINDOW	NAPS / DAY	TOTAL SLEEP	NIGHT SLEEP	NAP SLEEP	BEDTIME
2.5–3 hrs	2 naps	13–14.5 hrs	10.5–11 hrs	2.5–3.5 hrs	6:45–7:30 PM

Month eight is a confidence-builder. Your baby is cruising along furniture, communicating intentionally, and demonstrating a personality that is all their own. Two solid naps are firmly established, and bedtime at 7pm should be working consistently. The 8–10 month period brings a mini-regression driven by language acquisition, increased physical activity, and deepening object permanence. Babies with solid sleep foundations barely notice it.

THE PERFECT DAY — Hour by Hour

7:00 AM	Wake & Feed + Breakfast Thicker purees, soft finger foods. Milk remains primary.
9:30 AM	Nap 1 (60–90 min) Wake window 2.5 hrs. Do not be tempted to extend it.
11:15 AM	Wake & Feed + Active Play Cruising along furniture. Very physical.
1:45 PM	Nap 2 (60–90 min) Second nap anchor. Aim for 60+ min consistently.
3:30 PM	Wake & Snack + Outdoor Play Physical activity improves night sleep depth.
5:15 PM	Feed + Wind-down Bath every other night. Calm activities after 5pm.
6:00 PM	Bedtime routine begins Same sequence. Every night. Non-negotiable.
7:00 PM	BEDTIME Independent sleep skills should be firm by now.

DEVELOPMENTAL MILESTONES

Cruising Along Furniture

Pre-walking skill. Major physical energy expenditure. Genuinely tired at bedtime.

First Words Building

Language explosion beginning. Brain is working hard. Wind-down becomes more important.

Intentional Communication

Pointing, waving, gesturing. Higher stimulation risk. Wind-down window matters.

Object Permanence Firm

Fully understands you exist when absent. Goodbye rituals matter enormously.

HOW THIS AFFECTS SLEEP

The 8–10 month period sometimes produces a secondary mini-regression: increased night wakings after weeks of sleeping well, fighting naps that used to be easy, and more protest at bedtime. This is driven by the language explosion and increasing social awareness. The solutions are the same: consistency, earlier bedtime if overtired, and no new sleep props. This mini-regression lasts 2–3 weeks maximum for babies with established sleep skills. Cap naps at 90 minutes — naps over 2 hours can steal from night sleep.

NIGHT EXPECTATIONS

Month eight should be close to the goal: 10.5–11 hours of consolidated night sleep with zero night feeds for healthy-weight babies. If still seeing 1–2 night feeds, it is habit rather than nutritional need. The Troubleshooting section covers night-weaning strategies.

WATCH FOR THIS MONTH

- Mini-regression nap shortening after weeks of consistency (maintain routine — it passes in 2–3 weeks)
- Bedtime fights after previously easy nights (try 15 minutes earlier)
- Waking 45 min after falling asleep every night (sleep cycle junction — needs settling practice)
- Language explosion keeping baby stimulated — increase wind-down time to 45+ minutes

PRO TIP — MONTH 8

Introduce a lovey or comfort object this month. At 8 months, baby is old enough to form a genuine attachment to a small stuffed animal or soft toy. Sleep with it one night so it smells like you. Then introduce it consistently into the bedtime routine. Most babies with a lovey learn to resettle independently at night faster than those without one.

You have kept this tiny human alive for eight months. You are more capable than you know.

Month 9 • MONTH NINE

Almost Walking — Consolidating Sleep & First Long Stretches

WAKE WINDOW	NAPS / DAY	TOTAL SLEEP	NIGHT SLEEP	NAP SLEEP	BEDTIME
2.75–3.25 hrs	2 naps	13–14 hrs	11 hrs	2.5–3 hrs	7:00–7:30 PM

Nine months is the developmental checkpoint where most parents begin to see the promised land: consistent 11-hour nights, two predictable naps, and a baby who actually seems to enjoy the bedtime routine. If you have been consistent with wake windows, drowsy-but-awake practice, and the bedtime ritual, you are likely reaping the reward now. The first signs of the 2-to-1 nap transition may appear on the horizon — though that is still 3–6 months away for most babies.

THE PERFECT DAY — Hour by Hour

7:00 AM	Wake & Feed + Breakfast Finger foods, soft solids. 3 meals per day.
9:45 AM	Nap 1 (60–75 min) Wake window stretching to 2.75 hrs.
11:15 AM	Wake & Feed + Active Play Walking with support. Climbing. Very physical.
2:00 PM	Nap 2 (60–75 min) Wake window 2.75 hrs before this nap.
3:30 PM	Wake & Snack + Physical Play Walking practice. Park. Soft climbing.
5:30 PM	Feed + Wind-down No active play after 5:30. Reading, calm music.
6:15 PM	Bedtime routine begins Full ritual. Lovey introduced at start of routine.
7:15 PM	BEDTIME 11-hour target. Blackout room, white noise all night.

DEVELOPMENTAL MILESTONES

Standing Independently

First unassisted stands. More balance practice = more overnight neural consolidation.

First Steps Approaching

Some babies walk at 9–10 months. Expect 5–7 days of sleep disruption.

3 Solid Meals Daily

Full solids schedule. Night feeding is now habit, not nutritional need.

Social Imitation

Waving, clapping, peekaboo. High social engagement — wind-down must counter this.

HOW THIS AFFECTS SLEEP

Month nine is a sleep stabilization month for most families. Motor milestone disruptions are navigated faster because baby now has strong independent sleep skills. Early morning waking before 6am is the most common challenge at this age. The cause is usually one of four things: a room that gets light too early, white noise that is too quiet, a bedtime that has crept too late, or a nap that ran too long. Address these systematically — one change every 3 days — before assuming early waking is permanent.

NIGHT EXPECTATIONS

By 9 months with a healthy-weight baby, zero night feeds is the realistic and achievable target. An 11-hour night from approximately 7:15pm to 6:30am with no parental intervention is the goal this guide has been building toward. If you are there — congratulations. The sleep training methods section starting later in this guide gives you what you need if you are not yet there.

WATCH FOR THIS MONTH

- First steps arriving — 5–7 days of sleep disruption is normal and temporary
- Consistent early waking before 6am — address room environment first
- Nap resistance on high-activity days (may need earlier nap time)
- Bedtime taking 30+ minutes — check wake window, consider moving bedtime earlier

PRO TIP — MONTH 9

Start using an OK-to-Wake clock this month, before you need it. The Hatch Rest or LittleHippo Mella are popular choices. Set the light to change color at your desired wake time (6:30–7am). Spend 3–4 days teaching your baby what the color change means — make a celebration of it in the morning. By the time toddler FOMO arrives, your baby will already understand that the clock tells them when to get up.

Nine months outside, nine months inside. The version of you before this baby seems like someone else.



Month 10 • MONTH TEN

First Steps on the Horizon — Sleep is Settling

WAKE WINDOW	NAPS / DAY	TOTAL SLEEP	NIGHT SLEEP	NAP SLEEP	BEDTIME
3 hrs	2 naps	12.5–14 hrs	11 hrs	2–3 hrs	7:00–7:30 PM

Month ten is a consolidation month. The dramatic changes of months four through nine are behind you, and the schedule is becoming genuinely predictable. Wake windows have stretched to a full three hours, naps are solid, and an 11-hour night is achievable and expected. First steps may arrive this month. When they do, expect 5–7 days of disrupted sleep as the motor program consolidates overnight. Beyond that, month ten is about enjoying the rhythm you have built.

THE PERFECT DAY — Hour by Hour

7:00 AM	Wake & Feed + Breakfast Three solid meals established. Milk 3–4 feeds per day.
10:00 AM	Nap 1 (60–75 min) Wake window now a full 3 hours. Do not rush to nap.
11:30 AM	Wake & Lunch + Active Play Cruising, first steps, physical games.
2:30 PM	Nap 2 (60–75 min) Second nap 3 hrs after first wake.
4:00 PM	Wake & Snack + Outdoor Play Physical activity now. Quieter after 5:30pm.
5:30 PM	Feed + Wind-down Calm play. No roughhousing after this point.
6:15 PM	Bedtime routine Bath, massage, PJ, feed, 2 books, song.
7:15 PM	BEDTIME 11-hour target. Consistent independent settling expected.

DEVELOPMENTAL MILESTONES

First Steps (some babies)

If walking begins, expect a 5–7 night disruption. It passes within a week.

Pointing & Gesturing

Communication expanding. Baby uses sleep to consolidate language daily.

Cup Drinking

Transitioning from bottle to cup. Affects nighttime feeding habits.

Increased Independence

More active exploring = more genuine nighttime tiredness.

HOW THIS AFFECTS SLEEP

Ten months is often the calmest sleep month since before the 4-month regression. The primary sleep challenge at this age is early morning waking that can occur when the second nap shifts slightly later. If baby begins waking at 5:30am, check whether the afternoon nap is ending after 4pm. Moving it 15 minutes earlier often solves the issue within a week. This is also a good month to review and tighten the sleep environment heading into winter.

NIGHT EXPECTATIONS

Zero night feeds. Eleven hours straight, 7:15pm to 6:15am. If this is your reality, the work you have done is paying off completely. If not, the sleep training methods section has exactly what you need.

WATCH FOR THIS MONTH

- First steps causing 5–7 night disruption — maintain routine, it passes
- Second nap ending after 4:30pm — causes early morning waking
- Routine creeping past 40 minutes — trim back to 30 minutes maximum
- Fighting the first nap suddenly — may signal readiness to push it slightly later

PRO TIP — MONTH 10

Month ten is a great time to audit the bedtime routine for length creep. Routines that started at 20 minutes can quietly grow to 40–50 minutes as you add songs, extra books, and prolonged feeds. A longer routine is not better — it can actually keep baby more awake. Aim for 25–30 minutes total from bath to crib.

Look at the schedule you have built. Look at the baby you have raised. You did that.

Month 11 • MONTH ELEVEN

Walking & Words — Nap Transition on the Horizon

WAKE WINDOW	NAPS / DAY	TOTAL SLEEP	NIGHT SLEEP	NAP SLEEP	BEDTIME
3–3.5 hrs	2 naps	12.5–14 hrs	11 hrs	2–3 hrs	7:00–7:30 PM

Month eleven feels like emerging into sunlight. Most babies are walking or nearly walking, producing first real words, and sleeping in long consolidated stretches. The schedule is something you can plan your life around. Two naps remain the target, though you may begin to notice early signs of the 2-to-1 nap transition: fighting the first nap, taking longer to fall asleep, or waking very early from the second. Do not rush the transition — most babies are not ready for one nap until 14–18 months.

THE PERFECT DAY — Hour by Hour

7:00 AM	Wake & Breakfast Mostly solid foods now. Milk 3 feeds or sippy cup.
10:00 AM	Nap 1 (60–75 min) Wake window 3 hrs. Do not let exhaustion dictate timing.
11:30 AM	Wake & Lunch + Active Play Walking practice. Physical games. Outside time.
2:45 PM	Nap 2 (60–75 min) Second nap wake window now 3+ hrs.
4:15 PM	Wake & Snack End nap by 4:30 to protect bedtime.
5:30 PM	Dinner + Bath Nightly bath now appropriate and calming.
6:15 PM	Bedtime routine Books, song, lovey, crib. Predictable and brief.
7:15 PM	BEDTIME 11 hrs. Some babies beginning to consolidate toward 12.

DEVELOPMENTAL MILESTONES

Walking (most babies)

Full walking by 11–13 months. More exhaustion at bedtime. Sleep usually improves.

First Words

5–10 words emerging. Language acquisition peaks during sleep.

2-to-1 Nap Signals

Some babies show early signs. Do not transition before 14 months without clear readiness.

FOMO at Bedtime

Baby wants to be with people. Keep routine firm — do not add extra stimulation.

HOW THIS AFFECTS SLEEP

Walking is a significant sleep milestone in the positive direction. Babies who are walking use dramatically more energy than crawlers, which means genuine physical tiredness at bedtime. Many families notice that once full walking is established, their baby falls asleep faster and sleeps longer. The language explosion also burns enormous cognitive energy, making the wind-down period genuinely necessary. Keep screens off and stimulation low in the hour before the routine begins.

NIGHT EXPECTATIONS

Eleven hours of uninterrupted night sleep with zero night feeds and independent settling is the standard at this age. If not yet there, the Chair Method on pages 24–25 is particularly well-suited to 11-month-olds with strong object permanence.

WATCH FOR THIS MONTH

- Refusing first nap more than 3 days in a row (push start time 15–20 min later)
- FOMO bedtime protests — keep routine firm, do not add extra stimulation
- Early waking before 6am (check second nap end time — should end by 4:30pm)
- First molars beginning — 1–2 nights disruption around breakthrough is normal

PRO TIP — MONTH 11

Start using an OK-to-Wake clock this month, before you need it. Set the light to change color at your desired wake time (6:30–7am). Spend a few days teaching your baby what the color change means. By the time toddler FOMO arrives at 12–15 months, your baby will have learned that the clock — not crying — tells them when to get up.

Eleven months. They say their first word and it stops your whole world. Treasure this.

Month 12 • MONTH TWELVE

One Year — The 12-Hour Night Is Yours

WAKE WINDOW	NAPS / DAY	TOTAL SLEEP	NIGHT SLEEP	NAP SLEEP	BEDTIME
3.5–4 hrs	2 naps	12.5–14 hrs	11–12 hrs	2–3 hrs	7:00–7:30 PM

One year. Stop and acknowledge that for a moment. You have grown, nourished, and guided a human through their most vulnerable twelve months. And you have built a sleeper. At twelve months, the schedule is stable, the routine is second nature, and most families who have followed the principles in this guide are experiencing 11–12 hour nights consistently. The 2-to-1 nap transition is approaching but not yet here for most babies — the average age is 14–18 months. This month, enjoy the rhythm you have built.

NOTE FOR THIS MONTH

MILESTONE: One full year. You built a sleeper. You built a bond. You survived the 4-month regression, the teething, the growth spurts, and the 3am Googling. Happy first birthday to you both.

THE PERFECT DAY — Hour by Hour

7:00 AM	Wake & Breakfast Table foods. Sippy cup of whole milk (consult your pediatrician).
10:30 AM	Nap 1 (60–90 min) First nap pushing later. Wake window now 3.5 hrs.
12:30 PM	Wake & Lunch Social lunch. Finger foods. Conversation.
3:00 PM	Nap 2 (45–75 min) Second nap. This one will be first to shorten.
4:15 PM	Wake & Snack + Active Play Walking, climbing, exploring.
5:30 PM	Dinner + Bath Full bath nightly. Strong and calming sleep signal.
6:30 PM	Bedtime routine 2 books, song, lovey, lights out. 25–30 min total.
7:15 PM	BEDTIME 11–12 hrs. The 12-hour night is fully achievable here.

DEVELOPMENTAL MILESTONES

First Birthday

One full year. Solid walking for most. 5–20 words. Full personality emerging.

Milk Transition

Formula or breast milk transitions to whole milk at 12 months per AAP.

2-to-1 Nap Horizon

Not yet for most babies — typically 14–18 months. Watch for readiness cues.

18-Month Regression Prep

The hardest toddler regression hits at 18 months. A strong foundation is your preparation.

HOW THIS AFFECTS SLEEP

Month twelve is a gift. The schedule works. The routine works. The night sleep works. What you want to protect this month is the consistency you have built, because the 12-month period often brings life events that can disrupt sleep: birthday parties with late nights, holiday travel, and the general loosening of routine that comes with celebration. One or two late nights is fine — babies recover quickly. A week of inconsistency can erode weeks of good habits. Protect the routine.

NIGHT EXPECTATIONS

The 12-hour night. It is real. It is achievable. And it belongs to babies whose parents did the work described in this guide — the consistent routines, the drowsy-but-awake practice, the wake windows, the dark room, the white noise. If you have a 12-month-old sleeping 11–12 hours: you earned this.

WATCH FOR THIS MONTH

- Holiday routine disruption — one week back on schedule resets fully
- Milk transition affecting sleep (gas or discomfort — introduce slowly)
- Second nap shortening to 30 min consistently (2-to-1 transition beginning)
- 18-month regression approaching — tighten routine now as the best prevention

PRO TIP — MONTH 12

Begin preparing for the 18-month regression right now by making sure your bedtime routine is airtight. The 18-month regression is driven by a language explosion, toddler autonomy, first molars, and developmental leaps — all simultaneously. Babies with a rock-solid routine navigate it in 2–3 weeks. Babies without it can have 6–8 weeks of disrupted sleep. Keep the bath, the books, the song, the lovey, and the drowsy-but-awake placement. Every single night.

Twelve months. Twelve hours of sleep. You did not just survive this year. You mastered it.



What If...?

Four Scenarios. Four Complete Solutions. No Fluff.

These are the four questions that arrive at 3am. You will find more than a tip here — you will find the full step-by-step fix, the science behind it, and the honest reality of how long it takes.

Read the scenario that matches your night. Then do the work.

Scenario 1 · "My baby wakes up the second I put them d

The Transfer Problem — Every parent has cried over this one. Here is exactly how to fix it.

WHY THIS HAPPENS — The Science

When a baby is in a light sleep phase and is moved, the change in temperature, position, and sensory input triggers a partial arousal response. Newborns spend up to 50% of sleep in active (light) sleep, making successful transfers genuinely difficult before 4 months. The solution is two-pronged: timing the transfer to coincide with deep sleep, and gradually reducing the sensory difference between arms and crib.

THE EXACT FIX — Step by Step

1 Wait for Deep Sleep — The 20-Minute Rule

After baby falls asleep in your arms, wait a full 20 minutes before attempting any transfer. In deep sleep, baby's body will be completely limp, their jaw will relax, and breathing will slow and regularize. Moving before this point is the single most common reason transfers fail.

Tip: Gently lift one arm — if it drops limply, they are in deep sleep. If they resist, wait 5 more minutes.

2 Warm the Crib First

Use a heating pad or hot water bottle on the crib mattress for 5–10 minutes before the transfer. Remove it completely before placing baby. The temperature difference between your warm body and a cold mattress is a primary arousal trigger. Eliminating it dramatically improves transfer success rates.

Tip: Never leave the heating pad in the crib. Remove it fully — this is for pre-warming only.

3 The Head-Last Transfer Technique

Lower baby bottom-first into the crib. Keep your hands fully supporting their weight. Once the bottom touches the mattress, slowly lower the back, then the shoulders. The head is the last thing to make contact. Keep your hands in place for 30–60 seconds after placing, then slide them out very slowly.

Tip: Keep your face close to theirs during withdrawal. Your smell and breath warmth help maintain sleep.

4 The Pressure-Then-Release Method

Once baby is in the crib, place one firm hand on their chest and one on their legs. Apply gentle but firm pressure for 60 seconds — this mimics the held feeling and prevents the Moro reflex. Then very slowly reduce the pressure over 30 seconds rather than lifting abruptly.

Tip: If baby stirs, briefly increase pressure and add a loud shush. Do not pick up immediately.

5 The Long-Game Solution — Drowsy But Awake

The four techniques above are band-aids on the deeper issue. If a baby can only fall asleep in arms, transfers will always be difficult. The permanent solution is practicing drowsy-but-awake crib placement at bedtime — placing baby in the crib when eyes are heavy but still open. It takes 5–10 nights. After that, transfers become unnecessary because baby falls asleep independently from the start.

Tip: Start with bedtime only. Once bedtime is consistent, apply to naps.

REAL TALK

The honest truth: if your baby is over 4 months old and still only falling asleep in your arms, transfer techniques will improve success rate but will not solve the underlying issue. Step 5 is the real fix. The other four steps are survival tools for the newborn phase.

With perfect technique and timing, transfer success improves to 70–80% within one week.

Scenario 2 · "My baby only naps for 30 minutes every si

The Crap Nap — One sleep cycle, then wide awake. Here is how to link them.

WHY THIS HAPPENS — The Science

Babies complete one sleep cycle approximately every 45 minutes (newborns: 20–45 min). At the end of each cycle, they rise into light sleep and partially arouse. Babies with independent sleep skills quietly resettle into the next cycle. Babies without them wake fully and call for help. The 30–45 minute nap wake is the exact cycle junction — this is not a nap length problem, it is a self-settling problem applied to naps.

THE EXACT FIX — Step by Step

1 Confirm It Is the Sleep Cycle Junction

Track your baby's nap wake time for 5 days. If it is consistently between 30–45 minutes, that is the cycle junction wake. If it varies widely (20 min one day, 60 the next), the cause may be environmental — noise, light, or temperature — rather than a settling issue. The fix differs depending on the cause.

Tip: Cycle junction wakes are within 5 minutes of the same time every nap, every day.

2 Anticipate the Wake and Intervene BEFORE It Happens

Set a timer for 5 minutes before the expected wake time. Go to the room before baby wakes and place your hand on their chest with firm, steady pressure. You are preventing the full arousal rather than responding to it. This interrupt technique works best between 3–5 months. Do this for 5–7 days consistently.

Tip: This technique requires you to be near the nursery at the 25-minute mark. Use a monitor.

3 The Resettle-In-Crib Method (4+ months)

When baby wakes at the cycle junction, do not go in immediately. Wait 5 full minutes. Many babies will fuss and then resettle independently — especially if they have been practicing drowsy-but-awake at bedtime. If they escalate after 5 minutes, go in and use your settling technique but keep them in the crib. The goal: fall back asleep in the same position they woke in, without being removed from the sleep environment.

Tip: Each successful resettle makes the next one faster. Track progress over 14 days.

4 Environmental Audit

Before assuming a settling issue, rule out environmental causes. Is the room truly dark at nap time? Many rooms have significant light intrusion during daytime naps — sunlight through curtain gaps, skylight reflections, or monitor lights. Is white noise loud enough (60–65 dB) and running continuously? Some machines have an auto-shutoff that can trigger a wake at the cycle junction.

Tip: Test each variable independently. Change one thing for 3 days before changing another.

5 The Developmental Patience Play (Weeks 12–20)

For babies between 12–20 weeks, the 45-minute nap is often developmental — sleep cycles are not yet consolidated enough to naturally link. The most effective strategy is consistency and patience. Offer the crib, maintain the dark-and-loud environment, practice drowsy-but-awake, and wait. For most babies, nap extension happens naturally between 5–6 months as sleep architecture matures.

Tip: Do not cap wake windows to compensate for short naps — this creates a negative spiral.

REAL TALK

The crap nap is one of the most exhausting patterns in the first year because it means you never get a real break. The fastest fix for babies over 4 months is consistent drowsy-but-awake practice at bedtime, every night for 2 weeks. Once independent settling is established at bedtime, it typically transfers to naps within another 2 weeks.

Most families see nap extension within 2–3 weeks of consistent independent settling practice at bedtime.

Scenario 3 · "My baby stands up in the crib and cannot get down"

The Standing Trap — 7–9 months. Every night. Here is the only thing that actually works.

WHY THIS HAPPENS — The Science

Pulling to stand is a powerful, involuntary motor drive at 7–10 months. The brain has learned the up sequence (grab rail, pull, stand) but has not yet wired the reverse (bend knees, lower, sit). This is not defiance — it is a motor sequencing gap. The only lasting solution is teaching the reverse sequence during waking hours until it becomes automatic enough to execute in a half-awake state.

THE EXACT FIX — Step by Step

1 The Daytime Reverse-Stand Practice — Non-Negotiable

This is the fix, and it requires daytime work. During every awake period, when baby pulls to stand at the crib rail, coffee table, or couch, guide them through the sit-down sequence: hold their hands, gently bend their knees, and guide them down to sitting. Say "sit down" calmly each time. Do this a minimum of 20 repetitions per day for 5–7 days. The brain requires repetition to wire a new motor sequence. There are no shortcuts.

Tip: Do NOT do this during the night or naptime. Only during fully awake, alert play sessions.

2 Lower the Crib Mattress — For Safety, Not as the Solution

Lowering the mattress reduces the risk of falling out — which is important — but it does not solve the standing problem. Baby will still pull to stand, still get stuck, still cry. Lower the mattress for safety once baby is pulling to stand consistently, and pair it with the daytime practice above.

Tip: Mattress should be at the lowest setting before baby can pull to stand reliably.

3 The Nighttime Check-In Protocol

When baby stands and cries at night, wait 2–3 minutes first. Many babies will figure out the sit-down on their own after a few days of daytime practice. If they escalate, go in with minimal engagement: no lights, no talking, no eye contact. Gently and silently guide them down to lying, hand on chest for 30 seconds, then leave. Do not pick up. Do not feed.

Tip: If you pick up, you create a new incentive to stand. Picking up = reward = more standing.

4 The Standing Sleep Phase — Temporary and Safe

Some babies, after mastering the sit-down sequence, will still choose to stand in the crib at sleep time and eventually fall asleep standing up, then slump down on their own. This looks alarming. It is safe. If your baby is in the crib, standing quietly, not crying — this is not a problem requiring intervention.

Tip: A baby standing quietly in the crib is not in distress. Observe for safety. Do not rush in.

5 When to Call It Done

The standing-in-crib problem resolves completely once baby has mastered the reverse sequence. Most families report the problem disappearing within 7–14 days of consistent daytime practice. If it persists beyond 3 weeks of daily practice, consult your pediatrician to rule out any motor development concerns.

Tip: Track progress: count how many times per day baby successfully self-lowers during play.

REAL TALK

Parents who go in and lay baby back down every single time are training baby to stand in order to get a visit. The 2–3 minute wait before entering — combined with daily daytime practice — is the only approach that actually ends this pattern. The nightly lay-down visits can continue for months without the daytime practice component.

With 20+ daily practice reps, most babies master the sit-down sequence in 5–10 days.

Scenario 4 · "Baby loses the pacifier and screams until I

The Pacifier Game — The 2am find-and-replace cycle. Three ways out.

WHY THIS HAPPENS — The Science

A pacifier that falls out during light sleep becomes a missing sleep prop — identical in mechanism to a feeding or rocking association. Baby partially arouses between sleep cycles, reaches for the pacifier, cannot find or replace it, and fully wakes. The solution depends on age: under 7 months, use the scatter method; over 7 months with fine motor skills, teach self-insertion; over 12 months with persistent issues, consider weaning entirely.

THE EXACT FIX — Step by Step

1 The Scatter Method — 4 to 8 months

Place 4–6 pacifiers loose in the crib around the sleeping area. When baby wakes and reaches, there is a high probability they will find one without fully waking or crying. This works because babies at this age begin to bat and grasp randomly during partial arousals. The more pacifiers present, the more likely they connect. Use pacifiers with handles or wings (like MAM brand) that are easier for small hands to locate and self-insert.

Tip: Use identical pacifiers. Different textures or weights make this less effective.

2 Teach Self-Insertion During the Day — 7 to 10 months

During awake time, practice: hand baby a pacifier and guide their hand to their mouth. Say "paci in" calmly. Do this 10–15 times per day. Most babies with developed fine motor skills can learn to self-insert within 2–3 weeks of daily practice. Once they can do it awake during the day, the nighttime scatter method becomes significantly more effective.

Tip: Use a glow-in-the-dark pacifier or one with a stuffed animal attachment for nighttime.

3 The Gradual Paci-Weaning Path — 12+ months

If the pacifier game has been going on for months and self-insertion is not working, weaning from the pacifier during sleep may be the cleanest solution. Week 1: remove the pacifier after baby is fully asleep and do not replace at night. Week 2: remove before going into the crib. Week 3: pacifier only used during the routine, not placed in crib at all.

Tip: Introduce a lovey simultaneously to give baby an alternative comfort object.

4 Cold Turkey — 12+ months

For toddlers over 12 months, cold turkey pacifier removal is often faster than gradual weaning. Remove all pacifiers in one go. Expect 3–5 difficult nights. By night 6, most toddlers have accepted the change completely. Pairing with a new comfort object or special "big kid" item makes the transition feel like a reward rather than a loss.

Tip: Do not reintroduce after going cold turkey. One reintroduction resets all progress.

5 The 2–5am No-Replace Rule

Regardless of method, stop replacing the pacifier between 2–5am. This window is the hardest to hold firm on — you are exhausted and the fix is ten seconds away. But replacing it after 2am teaches baby that crying between 2–5am results in pacifier delivery. Hold the boundary for 5–7 nights using settling techniques instead.

Tip: Have a settling technique ready: firm hand on chest, loud shush, no eye contact.

REAL TALK

The pacifier is not the villain — it is a wonderful tool for newborns and young babies. The moment it becomes a sleep problem is the moment you are replacing it more than twice per night. The methods above are not about taking something away — they are about giving baby the ability to use it independently, which is actually more empowering.

The scatter method works immediately for many families. Self-insertion practice takes 2–3 weeks.



III

Sleep Training Methods

Two gentle approaches, explained in full. No guessing. No gaps.

Sleep training is not a philosophy debate. It is a practical skill transfer. The methods on the following pages have decades of research behind them. Neither requires leaving your baby alone and unresponded-to. Both work. Choose the one that fits your temperament, your baby's age, and your capacity right now.

Method A • The Chair Method (Camp Out)

Gentle, gradual, and proven. Your presence fades over 7 nights.

What It Is

The Chair Method — also known as the Camp Out or Fading Method — is a gentle sleep training approach where you begin by sitting next to your baby's crib as they fall asleep, then gradually move your chair further away over 7–10 nights until you are outside the room entirely. Unlike more abrupt methods, you are present during the entire process. Your baby is never alone and never unresponded-to. Your presence provides reassurance while they learn independent sleep skills. This method takes longer — typically 10–14 nights — but many parents find it significantly easier emotionally.

Best For

GREAT FIT IF...	CONSIDER ALTERNATIVE IF...
<ul style="list-style-type: none">• Babies 5–18 months with strong separation anxiety	<ul style="list-style-type: none">• Babies who become MORE upset when parent is visible but not holding them
<ul style="list-style-type: none">• Parents who cannot bear to leave the room	<ul style="list-style-type: none">• Families needing fast results (method A is slower than method B)
<ul style="list-style-type: none">• Families who found other methods too difficult emotionally	<ul style="list-style-type: none">• Parents who cannot commit to sitting still and calm for 30–60 minutes
<ul style="list-style-type: none">• Babies with no prior independent sleep skills	<ul style="list-style-type: none">• Situations requiring simultaneous night-weaning (address feeds first)
<ul style="list-style-type: none">• Parents who want to be present throughout the process	

Before You Begin — Preparation Checklist

■ Choose your start date carefully

Pick a Thursday or Friday. Do not start during travel, illness, teething breakthroughs, or major family changes. You will be tired for the first 3 nights. Choose a boring, stable week.

■ Commit both caregivers

Both parents must execute the method identically. One parent who reverts to rocking undoes everything. Have the conversation before night one. Write down the plan together.

■ Prepare the room

Blackout curtains fully tested. White noise at 60–65 dB. Temperature 68–72°F. Red light only if you need to see. Chair placed directly next to the crib.

■ Write your script

Decide what you will say — and what you will not. Recommended: a quiet, calm "shhhh" or "it's okay, I'm here." No extended talking, no singing, no stimulating conversation. Boring, calm presence is the entire goal.

Method A • The 7-Night Plan

Follow this precisely. Improvisation is where this method breaks down.

NIGHTS 1–2

Chair touching the crib rail

Sit directly beside the crib. You may touch baby through the rails with one hand. Pat or rub their back gently if crying — but keep touch intermittent, not constant. Do not pick up unless there is true escalation (vomiting, fever, genuine distress). Quiet shushing is fine. Talking, singing, and rocking are not. Expect 30–60 minutes of protest on night 1. Night 2 is often harder than night 1 — this is normal. Do not quit.

Hardest nights. 45–90 minutes of protest is normal. Your presence is the anchor.

NIGHTS 3–4

Chair in the middle of the room

Move the chair to the center of the room — roughly halfway between the crib and the door. You are still visible but no longer within reach. Do not return to the crib unless truly necessary. Sit calmly, minimal eye contact, use your voice intermittently if baby is crying. Most babies show significant improvement on night 3 or 4. Settling time should drop from 45–60 minutes to 15–25 minutes.

Expect visible improvement. If night 4 is still 60+ minutes, review for accidentally re-introduced props.

NIGHTS 5–6

Chair near the doorway

Move the chair to just inside the doorway. You are visible but barely. Use your voice minimally — only if baby is escalating. By night 5, most babies have accepted the new reality and are falling asleep within 10–20 minutes. Some will fuss, spot you near the door, and settle. This is the system working.

Most families report night 5 as their first "easy" night. Settling under 15 minutes is common.

NIGHT 7+

Outside the room

You are no longer in the room. If baby cries, wait 5 minutes before a brief check-in. A check-in means opening the door, saying quietly "it's okay, time to sleep," and leaving again — do not enter fully, do not approach the crib. Most babies at this stage settle within 5–10 minutes with zero check-ins. Night 7 is often the breakthrough night.

Night 7 is the breakthrough. Some babies need nights 8–10 to fully consolidate — stay the course.

MISTAKES THAT DERAILED THIS METHOD

Moving the chair back after a hard night (resets ALL progress immediately). Talking, singing, or excessive eye contact (stimulation defeats the purpose). Picking up at bedtime after placing drowsy-but-awake (defeats independent settling). Abandoning on night 3 or 4 when it feels harder (nights 3–4 are always the peak — quitting here is the single most common error families make).

Method B · Pick-Up / Put-Down

Responsive, hands-on, and based on clear rules. Best for 4–8 months.

What It Is

Pick-Up/Put-Down (PUPD) is a fully responsive sleep training method. The core principle: place baby in the crib awake, leave the room. If baby cries beyond a threshold, return and pick them up — but only until they stop crying, not until they are asleep. Then immediately put them back down. Repeat until baby falls asleep in the crib. The key distinction from cry-it-out approaches: you respond to every cry above threshold. The key distinction from rocking-to-sleep: baby must ultimately fall asleep in the crib. This method typically produces results in 3–5 nights for babies 4–6 months.

The Exact Rules — Read Before You Begin

RULE 1: The Threshold Rule

You do not go in at the first whimper. A crying threshold must be agreed upon before night one. Recommended: sustained, escalating crying for 2–3 minutes. Fussing, grunting, and intermittent crying does not trigger entry. This threshold prevents over-response to normal sleep-cycle noise.

RULE 2: Pick Up for Crying, Not for Fussing

When you enter, pick up ONLY if crying meets the threshold. If baby has self-settled to fussing by the time you arrive, do not pick up. Stand near the crib, use your voice, then leave if they remain below threshold. This rule is frequently broken because parents pick up preventively.

RULE 3: Put Down Before They Are Fully Asleep

This is the rule most parents get wrong. Put baby down the moment the crying STOPS — not when they are drowsy, not when relaxed, and absolutely not when asleep. The instant crying ceases, lower them into the crib. If they immediately cry again, stay for 60 seconds using your voice. If they escalate past threshold again, pick up. Repeat.

RULE 4: No Feeding as a Pickup Response at Night

PUPD is a settling technique, not a hunger response. Feed on a schedule. PUPD is applied only for wake-ups outside the scheduled feed window. Mixing feeds and PUPD in the same wake-up confuses the signal and slows progress.

RULE 5: The 7-Month Cutoff

PUPD can backfire with babies older than 7 months. At this age, each pick-up can become stimulating rather than settling — baby starts crying TO be picked up. If your 7+ month baby escalates more after pick-up than before, switch to the Chair Method immediately.

What to Expect Night by Night

Night 1

20–60 pick-ups is normal. Do not be alarmed. Your arms will be tired. The volume of pick-ups on night 1 does not predict outcome. Stay consistent with the rules.

Night 2

Often harder than night 1. Baby is testing whether the rules are permanent. They are. Total pick-ups may be similar but emotional intensity can be higher.

Night 3

The turning point for most families. Pick-ups drop significantly — often to 5–10 total. Settling time shortens noticeably. This is the evidence it is working.

Nights 4–5

1–5 pick-ups or none. Baby is learning to fall asleep without being held. Bedtime becomes calm. Night wakings begin to resolve without intervention.

Consistency is not cruelty. Inconsistency is the real unkindness — it creates confusion without resolution.



IV

Printable Worksheets

Print. Fill in. Post on your fridge.

Five worksheets designed to make your sleep journey organized, trackable, and easy to hand off to any caregiver. Print each page and fill it in with a pen.

7-Day Sleep Log

Track wake times, naps, mood, bedtime and night wakings. Patterns appear within 3 days.

Baby's Name: _____ Age: _____ Week of: _____

DAY	WAKE UP	NAP 1	NAP 2	NAP 3	MOOD 1-5	BEDTIME	FELL A SLEEP	NIGHT WAKES	NOTES
MON									
TUE									
WED									
THU									
FRI									
SAT									
SUN									

MOOD SCALE

1 = Very fussy / overtired | 2 = Fussy | 3 = Average | 4 = Good | 5 = Excellent day. After 3 days of logging, patterns become visible. Wake windows reveal themselves. Trust the data.

Our Bedtime Routine

Fill in your family's ritual. Post it where you can see it. Do it in the same order every night.

Baby's Name: _____

Baby's Age: _____

Routine Start Time: _____

Target Lights Out: _____

Step 1 BATH or WARM WIPE-DOWN

Warm water signals a core temperature drop — nature's sleep trigger. 10 minutes max.

Duration: _____ Products used: _____

Step 2 MASSAGE & LOTION

Touch releases oxytocin and turns off cortisol. 3–5 minutes. Lavender or unscented.

Lotion used: _____ Duration: _____

Step 3 FRESH DIAPER & SLEEP OUTFIT

Same sleeper style each night = the sleep uniform. Sleep sack over loose blankets.

Sleep sack TOG: _____ White noise: _____

Step 4 FEED (BREAST / BOTTLE / CUP)

Dim room. Drowsy but awake at the end of the feed — the feed ends, sleep begins in the crib.

Feed volume / side: _____ Notes: _____

Step 5 BOOKS, SONG & GOODBYE

One or two short books. One consistent song. A loving but brief and predictable farewell.

Books: _____ Song: _____

TOTAL ROUTINE TIME

Target: 25–35 minutes from bath to crib. Under 20 minutes may feel rushed. Over 40 minutes keeps baby too alert.

Consistency beats perfection every time.

Sleep Environment Audit

Check each item, note what needs fixing, and set a date. Your room is your silent sleep tool.

DARKNESS

<input type="checkbox"/>	Blackout curtains / blinds installed Can you see your hand in the room at 2pm?	Pass / Fail _____
<input type="checkbox"/>	No gaps in curtain coverage Check sides, top, and bottom edges carefully	Fixed? Y/N _____
<input type="checkbox"/>	Monitor / device lights covered Black tape over all indicator lights	Done? Y/N _____
<input type="checkbox"/>	Red light only if nightlight needed Blue/white light suppresses melatonin	Light color: _____

SOUND

<input type="checkbox"/>	White noise machine in place Dedicated machine preferred over phone app	Brand/model: _____
<input type="checkbox"/>	Volume at 60–65 dB throughout night Measure with free phone app. Shower-level sound.	Measured dB: _____
<input type="checkbox"/>	Machine set to continuous — no timer Auto-off settings cause arousal at the off point	Timer off? Y/N _____
<input type="checkbox"/>	Machine near door, not next to crib Blocks outside noise. Not directly at baby's ears.	Placement: _____

TEMPERATURE

<input type="checkbox"/>	Room temperature 68–72°F (20–22°C) Use a room thermometer — do not guess	Current temp: _____
<input type="checkbox"/>	Sleep sack TOG appropriate for room 0.5 TOG for 75°F+, 1.0 for 70–75°F, 2.5 for under 70°F	TOG used: _____
<input type="checkbox"/>	No loose blankets in crib (under 12m) AAP safe sleep. Sleep sack only.	Confirmed Y/N _____

SAFE SLEEP

<input type="checkbox"/>	Firm flat mattress with fitted sheet only No pillow, bumper, or positioner	Confirmed Y/N _____
<input type="checkbox"/>	Crib mattress at correct height Lower when baby can pull to stand	Current height: _____
<input type="checkbox"/>	No strings or cords within 2 feet of crib Check blinds, monitor wires	Checked Y/N _____

Fix one issue at a time. Give each change 3 days before evaluating its effect.

Babysitter Sleep Cheat Sheet

Fill in and hand over. Everything your caregiver needs to keep the sleep routine intact.

Baby's Name: _____ Age: _____ Date: _____ Emergency Contact: _____

TODAY'S SCHEDULE

Last wake time When did baby wake up this morning?

Next nap time Expected nap time:

Nap length How long usually:

Wake window Time awake before nap:

Next feed time Feed at:

Feed type / amount Breast / bottle / solids:

Bedtime Tonight's bedtime:

Routine start Begin routine at:

BEDTIME ROUTINE STEPS

Step 1: _____

Step 2: _____

Step 3: _____

Step 4: _____

Step 5: _____

THE GOLDEN RULES

- Put baby down DROWSY but still awake
- White noise ON for the entire nap / night
- Room must be dark (blackout curtains)
- Do NOT rock or feed to sleep
- If baby cries, wait 3–5 min before entering
- No picking up unless truly distressed
- No screens within 1 hour of sleep
- If in doubt: CALL, do not improvise

IMPORTANT NOTES FOR TONIGHT

Sleep Training Progress Tracker

Track every night of your training period. Progress is real even when it does not feel like it.

Method used: _____ Start date: _____ Baby's age: _____ Goal bedtime: _____ Goal wake: _____

HOW TO USE THIS TRACKER

Fill in one row per night. Be honest. Track the data, not your feelings. Progress is rarely linear — night 2 is often harder than night 1, night 3 is usually the turn. The emotion score and the sleep score are not the same thing. A difficult night can still be progress.

NIGHT	DATE	BEDTIME	MINS TO SLEEP	NIGHT WAKES	FIRST WAKE	FINAL WAKE	TOTAL SLEEP	HOW IT FELT (1-5)	NOTES
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									

HOW IT FELT SCALE

1 = Dread | 2 = Difficult | 3 = Okay | 4 = Hopeful | 5 = This is working. The emotion score and the sleep score are not the same thing. Night 2 might score 1 for emotion and still be the most important night of the process.



Sweet dreams are coming.

You have everything you need. Trust the process.

Sleep is a skill, not a gift. And like any skill, it takes consistency, patience, and a little faith that it's working even when it doesn't feel like it. Every night you hold the routine, every morning you watch those wake windows — you are building something. A well-rested baby. A confident mother. A calmer home.

You've got this, mama.