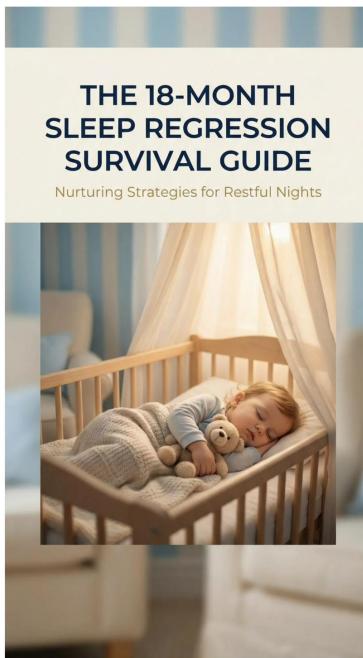


THE 18-MONTH SLEEP REGRESSION SURVIVAL GUIDE

A Step-by-Step Plan to Reclaim Your Nights

Using the DREAM Method



Marli Benjamin
Mother of Two | Sleep Regression Survivor

The 18-Month Sleep Regression Survival Guide

Copyright © 2025 The Sleep Regression Solution

All rights reserved. No part of this publication may be reproduced, distributed, or transmitted in any form without prior written permission.

Disclaimer: This book is for informational purposes only and is not intended

as medical advice. Always consult with your pediatrician regarding any concerns about your child's sleep or health.

www.thesleepregressionsolution.com

Pinterest: @sleepregressionsolution

First Edition

*For every exhausted parent who has ever
Googled*

'why won't my toddler sleep' at 3 AM.

You are not alone. You are not failing.

You are doing the hardest job in the world.

Table of Contents

PART 1: UNDERSTANDING THE 18-MONTH SLEEP REGRESSION

- Chapter 1: What is the 18-Month Sleep Regression?
- Chapter 2: The Science of Toddler Sleep
- Chapter 3: Decoding Your Toddler's Sleep Cues

PART 2: THE DREAM METHOD

- Chapter 4: D is for Decode
- Chapter 5: R is for Reset
- Chapter 6: E is for Emotionally Connect
- Chapter 7: A is for Adapt
- Chapter 8: M is for Master

PART 3: PRACTICAL TOOLS & RESOURCES

- Chapter 9: Week-by-Week Action Plan
- Chapter 10: Troubleshooting Guide
- Chapter 11: Printable Templates & Worksheets
- Chapter 12: Frequently Asked Questions
- Chapter 13: References & Further Reading

Introduction

You Are Not Alone

It's 3 AM. The house is dark, the world is quiet, but inside your home, a battle is raging. Your sweet, giggling toddler has transformed into a tiny, sleep-fighting warrior. You're exhausted. You're frustrated. You're wondering what on earth you did wrong.

Let me tell you a secret: **you've done nothing wrong**. You are in the trenches of the 18-month sleep regression, a developmental storm that can rock even the most stable of sleep routines. And you are not alone.

I'm Marli Benjamin, a mum of two who has been right where you are—twice. The first time, I was completely unprepared. The second time, I had hard-won knowledge and a lot more grace. I've felt the bone-deep exhaustion, the desperation for just a few consecutive hours of sleep, and the guilt that comes with feeling like you're failing.

After my own sleepless nights, I spent years reading the research, testing what actually works, and connecting with other exhausted parents going through the same thing. This guide is everything I wish someone had handed me at 3 AM.

I'm not a doctor or a sleep scientist. I'm a mum who figured it out the hard way and wants to make it easier for you.

Together, we will navigate this challenging phase using the **DREAM Method**, a framework I developed to help parents like you decode their toddler's sleep, reset their routines, and reclaim their nights. By the end of this guide, you will have a clear plan to not just survive the 18-month sleep regression, but to emerge from it with a confident, independent sleeper.

Let's get started. Your sleep is waiting.



You're not alone in this journey

PART ONE

Understanding the 18-Month Sleep Regression

What is the 18-Month Sleep Regression?

If your once-great sleeper has suddenly started fighting naps, waking up multiple times a night, or treating bedtime like a negotiation, you're likely experiencing the 18-month sleep regression. This is one of the most common and challenging regressions, but understanding *why* it's happening is the first step to overcoming it.

Signs Your Toddler is in the Thick of It

- **Nap Refusals:** Suddenly, your toddler is fighting their nap, or refusing it altogether. They may stand in their crib crying, or play happily for an hour without sleeping.
- **Bedtime Battles:** The bedtime routine has become a marathon of stalling, tantrums, and curtain calls. What used to take 20 minutes now takes an hour.
- **Night Wakings:** Your toddler is waking frequently throughout the night, often crying for you. They may seem genuinely distressed or simply want to play.
- **Increased Separation Anxiety:** Your little one clings to you at bedtime and panics when you leave the room. They may cry harder than ever before.
- **Early Morning Wakings:** The 5 AM wake-up call has become your new, unwelcome normal. Your toddler seems ready to start the day before the sun is up.

If you're nodding along to two or more of these, you're in the right place.

Why It Happens: The Perfect Storm of Development

The 18-month mark is a period of explosive developmental growth. Your toddler's brain and body are working overtime, and this can wreak havoc on their sleep. Here's what's going on:

- **Teething:** The 18-month molars are notorious for causing discomfort and disrupting sleep. These large teeth can take weeks to fully emerge, causing on-and-off pain.
- **Separation Anxiety:** Your toddler now understands that you exist even when they can't see you (object permanence). This cognitive leap can make separation at bedtime feel scary.
- **Developing Independence:** Your toddler wants to assert their newfound independence. They can walk, they're learning to communicate, and bedtime is a prime opportunity to test boundaries.
- **Language Explosion:** Your toddler's vocabulary is growing daily, and their brain is buzzing with new words and concepts, making it hard to switch off at night.
- **Physical Milestones:** Learning to climb, run, and jump means your toddler wants to practice these skills constantly—including at 2 AM.



Independence meets bedtime

How Long Does It Really Last?

With a consistent approach, the 18-month sleep regression typically lasts for **2 to 6 weeks**. However, without a clear plan, the habits formed during this regression can become long-term sleep problems.

The goal of this guide is to give you that plan, so you can get back on track as quickly as possible. Most families who follow the DREAM Method see significant improvement within the first week, with full resolution by week three or four.

Remember: This regression is temporary. Your toddler *will* sleep again. And so will you.

Quick Fact

Research shows that 75% of toddlers experience some form of sleep disruption between 15-21 months. You are truly not alone in this challenge.

Chapter 2

The Science of Toddler Sleep

To effectively solve your toddler's sleep problems, it's helpful to understand the basics of how they sleep. This isn't about becoming a sleep scientist; it's about gaining the knowledge you need to make informed decisions.

Understanding the 'why' behind your toddler's behavior will help you stay calm and consistent when you're implementing changes.

Sleep Cycles Explained

Unlike adults, who have sleep cycles lasting 90-120 minutes, toddlers have shorter sleep cycles lasting around **60 minutes**. At the end of each cycle, they enter a very light stage of sleep and can easily wake up.

If your toddler doesn't know how to fall back asleep on their own, they will cry out for you. This is why **independent sleep skills** are so crucial. When your toddler can self-soothe at the end of a sleep cycle, they'll connect cycles seamlessly and sleep through the night.

The good news? Independent sleep skills can be learned at any age, including at 18 months. It's never too late to teach your toddler to sleep.

Understanding Wake Windows

Wake windows are the periods of time your toddler can comfortably stay awake between naps and bedtime. Getting these right is one of the most important factors in solving sleep problems.

At 18 months, your toddler's wake window is typically between **5 and 6 hours**. However, this can vary based on:

- Individual temperament (some toddlers need more sleep than others)
- Activity level during wake time
- Quality of previous sleep
- Whether they're in a growth spurt or developmental leap

Stretching this window too long can lead to an overtired toddler who fights sleep, while too short a window can mean they aren't tired enough to sleep well. We'll help you find the sweet spot in Chapter 4.

Typical Wake Windows by Age

Age	Wake Window	Number of Naps
12-14 months	3-4 hours	2 naps
15-18 months	4-5.5 hours	1-2 naps
18-24 months	5-6 hours	1 nap

The Role of Separation Anxiety

Separation anxiety is a **normal and healthy** part of your toddler's development. It actually shows that your child has formed a secure attachment to you—which is wonderful!

However, it can make bedtime incredibly stressful for both of you. The key is to acknowledge their feelings while maintaining clear and consistent boundaries.

Signs of separation anxiety at bedtime include:

- Crying or screaming when you leave the room
- Calling out for you repeatedly
- Getting out of bed to follow you (if no longer in a crib)
- Requesting 'one more hug' or 'one more kiss' endlessly
- Appearing genuinely frightened rather than just frustrated

We'll cover specific strategies for managing separation anxiety in Chapter 6.

Chapter 3

Decoding Your Toddler's Sleep Cues

Learning to recognize your toddler's sleepy cues is essential for timing naps and bedtime correctly. Put them down too early, and they won't be tired enough to sleep. Wait too long, and you'll have an overtired toddler on your hands.

Overtiredness is one of the biggest culprits behind sleep problems. When a child stays awake too long, their body produces cortisol (the stress hormone) to help them stay alert. This cortisol then interferes with their ability to fall and stay asleep.

Early Sleep Cues (The Sweet Spot)

These are the signs that your toddler is getting ready for sleep. When you see these, start the wind-down routine:

- Yawning
- Rubbing their eyes
- Becoming quieter or less active
- Looking away from stimulation
- Becoming slightly less coordinated
- Seeking comfort (wanting to cuddle, finding their lovey)

Late Sleep Cues (Overtired Zone)

If you see these signs, your toddler has likely crossed into overtired territory. Sleep will be harder, but not impossible:

- Pulling on their ears (can also indicate teething or ear infection)
- Becoming fussy, whiny, or irritable
- Losing interest in toys and activities
- Clumsiness or falling more than usual
- Hyperactivity or 'second wind' behavior
- Tantrums over small things

Pro Tip

If your toddler consistently shows late sleep cues, try moving naptime or bedtime 15-30 minutes earlier. It can make a dramatic difference in how easily they fall asleep.



The goal: peaceful, restorative sleep

CASE STUDY: The Overtired Cycle

The Scenario: Emma's 18-month-old, Liam, started fighting bedtime every night. He would scream for an hour before finally falling asleep around 9 PM.

The Challenge: Emma assumed Liam wasn't tired enough, so she pushed bedtime later. This made things worse.

The Solution: With guidance, Emma moved bedtime from 9 PM back to 7 PM. She started the routine when Liam showed early sleep cues (around 6:15 PM).

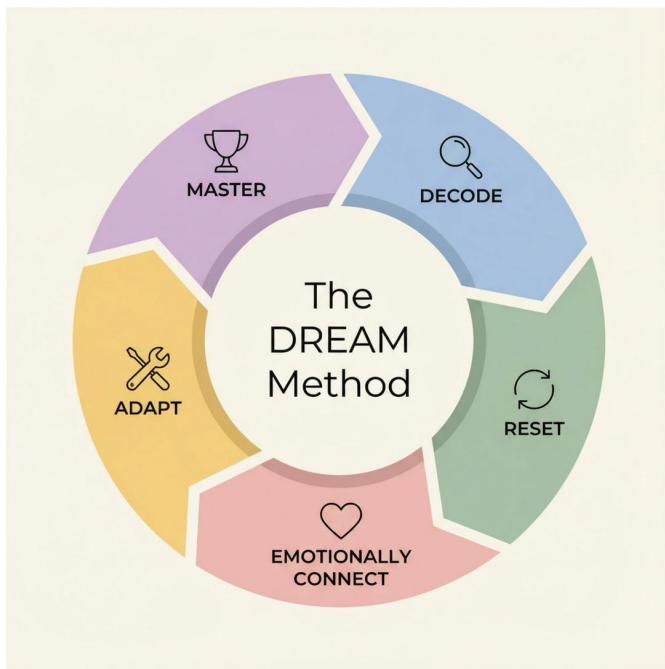
The Outcome: Within three nights, Liam was falling asleep within 15 minutes. He also started sleeping later in the morning—proof that earlier bedtime doesn't mean earlier wake-up.

Key Lesson: *An overtired toddler fights sleep harder. Earlier bedtime often solves what seems like a 'not tired' problem.*

PART TWO

The DREAM Method

Your Step-by-Step Plan for Better Sleep



The DREAM Method Framework

D - Decode your toddler's unique sleep challenges

R - Reset your routines and environment

E - Emotionally Connect to reduce bedtime anxiety

A - Adapt to developmental changes

M - Master independent sleep and maintain progress

Chapter 4

D is for Decode

Before you can fix a problem, you need to understand it. The 'Decode' phase is all about becoming a sleep detective. You'll pinpoint the exact reasons behind your toddler's sleep struggles, which will allow you to create a targeted, effective plan.

Every toddler is different. What works for your neighbor's child might not work for yours. That's why we start by figuring out exactly what's going on with *your* toddler.

Your Sleep Regression Audit

For the next two days, track your toddler's sleep patterns. This data will reveal important patterns and help you identify the primary challenge. Use the Sleep Regression Audit worksheet in Chapter 11, or simply note:

- What time did they wake up in the morning?
- What time did they go down for nap(s)?
- How long did they nap?
- What time did bedtime routine start?
- What time did they fall asleep?
- How many times did they wake at night?
- What was your response to each waking?
- What was their mood upon waking?

Identifying Your Toddler's Primary Sleep Challenge

Once you have your audit, review the data. What patterns do you see? Most 18-month sleep issues fall into one of three categories:

Type 1: The Boundary Tester

This toddler is fighting sleep because they can. They are exploring their independence, and bedtime is the ultimate negotiation.

Signs: Stalling tactics (more water, another story, one more hug), generally happy during the day, may nap fine but fight bedtime, tests limits in other areas too.

Primary Strategy: Clear, consistent limits with minimal engagement after bedtime.

Type 2: The Anxious Clinger

This toddler is struggling with separation anxiety. They become genuinely distressed when you leave the room.

Signs: Crying seems fearful rather than angry, calms quickly when you return, clings to you during the day too, may have started daycare recently or experienced a change.

Primary Strategy: Gradual retreat with lots of reassurance, building security.

Type 3: The Overtired Mess

This toddler is stuck in an overtired cycle. They're running on fumes and their body doesn't know how to rest.

Signs: Hyperactive or wired at bedtime, frequent night wakings, short naps, early morning wake-ups, cranky during the day.

Primary Strategy: Schedule adjustment to eliminate sleep debt, earlier bedtime.

Setting Your 7-Day Goal

Based on your toddler type, set a realistic goal for the first week:

Boundary Tester: 'By day 7, bedtime will take less than 30 minutes with no curtain calls.'

Anxious Clinger: 'By day 7, I will be able to leave the room while my toddler is still awake.'

Overtired Mess: 'By day 7, my toddler will be napping at least 1.5 hours and going to bed by 7:30 PM.'

Important Note

Your toddler may be a combination of types—that's completely normal. Focus on the primary challenge first, then address secondary issues once you've made progress.

Chapter 5

R is for Reset

Now that you've decoded your toddler's challenges, it's time to reset the foundations of healthy sleep: the environment, the routine, and your responses. Think of this as hitting the refresh button on your toddler's sleep habits.

Don't worry—you don't need to change everything at once. Small, consistent changes add up to big results.

Creating the Perfect Sleep Environment

Your toddler's room should be a sleep sanctuary. Here's your checklist:

- **Darkness:** Invest in blackout curtains. The room should be dark enough that you can't see your hand in front of your face. This is especially important for early morning wakings.
- **Temperature:** Keep the room between 68-72°F (20-22°C). Toddlers sleep best when slightly cool.
- **White Noise:** A consistent sound machine helps drown out household noise and creates a sleep cue. Use it for all sleep periods.
- **Safety:** Ensure the crib mattress is at the lowest setting. Remove any climbing hazards. If transitioning to a bed, childproof the room thoroughly.
- **Minimal Stimulation:** Remove toys from the crib/bed area. The sleep space should be boring.



A dark, calm sleep environment

The Perfect Bedtime Routine

A consistent bedtime routine is one of the most powerful tools for better sleep. Research shows that children with a regular bedtime routine fall asleep faster, wake less often, and get more total sleep.

Your routine should be:

- **Consistent:** Same activities, same order, every night
- **Calming:** Activities that help your toddler wind down
- **Connected:** Quality one-on-one time with a parent
- **Contained:** 20-30 minutes total (not longer)

Sample Bedtime Routine

Time	Activity
6:30 PM	Bath time (10 minutes)
6:40 PM	Pajamas and diaper (5 minutes)
6:45 PM	Two books in the nursery (10 minutes)

6:55 PM	Cuddle, song, and goodnight phrase (5 minutes)
7:00 PM	Into the crib, lights out



A calming bedtime routine

Handling Nap Refusals

Nap refusals are incredibly common at 18 months. Your toddler may be transitioning from two naps to one, or they may simply prefer playing to sleeping.

Here's how to handle nap time:

- **Offer the nap consistently.** Even if they don't sleep, offer quiet time in the crib at the same time each day.

- **Keep it short.** Cap nap attempts at 1 hour. If they haven't slept in that time, get them up.
- **Adjust bedtime.** On days with no nap, move bedtime earlier (by 30-60 minutes) to prevent overtiredness.
- **Watch for readiness signs.** Most toddlers aren't ready for one nap until 14-18 months. Don't drop the nap too early.
- **Be patient.** The transition to one nap can take 2-4 weeks. Some days they'll need two naps, others just one.

Consistent Responses for Night Wakings

How you respond to night wakings is crucial. Inconsistent responses teach your toddler that persistence pays off. Consistent responses teach them that you are reliable, the rules are clear, and sleep is expected.

Choose a response style and stick with it for at least two weeks:

Option 1: Brief Check-Ins

Go to your toddler, briefly reassure them ('It's sleepy time, I love you'), and leave. Keep visits under 30 seconds. No picking up. Repeat as needed with increasing intervals.

Option 2: Chair Method

Sit in a chair next to the crib until your toddler falls asleep. Every 2-3 nights, move the chair further away until you're out of the room. Minimal interaction while in the room.

Option 3: Verbal Reassurance

Call out reassurance from outside the room ('Mommy's here, it's sleepy time') without going in. This works well for Boundary Testers who just want to confirm you're there.

CASE STUDY: The Night Waking Marathon

The Scenario: Jake, 18 months, was waking 4-6 times per night. His parents had tried everything—rocking, feeding, co-sleeping—and nothing worked consistently.

The Challenge: Every night was different. Sometimes they rocked him back to sleep, sometimes they brought him to their bed, sometimes they let him cry until they couldn't take it anymore.

The Solution: Jake's parents committed to one approach: brief check-ins with 5-minute intervals. They kept a log to stay accountable. The first two nights were hard—Jake cried for over an hour.

The Outcome: By night 4, Jake was waking only twice. By night 10, he was sleeping through. The consistency, not the specific method, was the key.

Key Lesson: *Pick one approach and stick with it. Switching methods resets progress to zero.*

Chapter 6

E is for Emotionally Connect

Sleep isn't just about schedules and routines—it's deeply emotional. Your toddler needs to feel safe and connected to you in order to relax into sleep. This chapter is especially important for the 'Anxious Clinger' type, but all toddlers benefit from strong emotional connection.

The good news? Building connection doesn't require hours of extra time. It's about quality, not quantity.



Connection reduces bedtime anxiety

Connection Rituals to Reduce Bedtime Anxiety

Build these rituals into your day to fill your toddler's 'connection cup' before bedtime:

Special Time: 15 minutes of one-on-one, child-led play. No phones, no siblings, no agenda. Let your toddler choose the activity and give them your full attention. Do this daily, ideally before the bedtime routine.

Reconnection After Separation: When you pick up your toddler from daycare or come home from work, take 5 minutes for a big reunion. Get down on their level, make eye contact, and express how happy you are to see them.

The 'Remember When' Game: During the bedtime routine, talk about happy moments from the day. 'Remember when we went to the park? Remember when you made that funny face?' This reinforces positive memories and connection.

Transition Object (Lovey): A special stuffed animal or blanket can serve as a 'stand-in' for you when you're not in the room. Introduce it during connection times so it absorbs positive associations.

Words That Work: Scripts for Bedtime Battles

What you say—and how you say it—matters. Here are scripts for common scenarios:

When they ask for 'one more' (book, hug, etc.):

'I know you want one more hug. We've had our hugs for tonight, and I'll give you a big one in the morning. I love you. Goodnight.'

When they say they're scared:

*'I hear you that you feel scared. Your room is safe.
Mommy and Daddy are right here in the house. Your
[lovey] is here to keep you company. I love you.
Goodnight.'*

When they say they're not tired:

*'You don't have to feel tired. Your body still needs rest. It's
okay to lie quietly and let your body relax. I love you.
Goodnight.'*

When they keep calling for you:

*[From outside the room] 'I hear you. I'm right here. It's
sleepy time. I love you. I'll see you in the morning.'*

The Magic of a Lovey

A comfort object—commonly called a 'lovey'—can be incredibly helpful during the 18-month regression. Research shows that children with a comfort object have an easier time with separation and often sleep better.

To introduce a lovey:

- Choose something safe (no small parts, nothing that could cover their face)
- Include it in positive moments—cuddle with it during stories, bring it along on outings
- Let it absorb your scent by sleeping with it yourself for a few nights first
- Have a backup (buy two identical ones!) in case of loss

- Don't force it—if your toddler isn't interested, that's okay



A lovey provides comfort and security

Chapter 7

A is for Adapt

Your toddler is constantly changing, and your sleep strategies need to change too. This chapter covers how to adapt to common challenges that arise at 18 months, from teething to travel to the nap transition.

Flexibility is key—but flexibility within a consistent framework. The core principles (consistent routine, appropriate schedule, clear boundaries) stay the same, even as the details shift.

Adjusting Wake Windows

At 18 months, your toddler's wake windows are in flux. Here's how to find the right balance:

If still on two naps:

- Morning wake window: 4-4.5 hours
- Afternoon wake window: 4-4.5 hours
- Evening wake window: 4-4.5 hours

If transitioning to one nap:

- Morning wake window: 5-5.5 hours
- Afternoon wake window: 5-5.5 hours
- Expect an adjustment period of 2-4 weeks

Signs your toddler is ready for one nap:

- Consistently fighting the morning nap

- Taking a long time to fall asleep for the morning nap
- Morning nap pushes afternoon nap too late
- Bedtime becomes a battle

Handling Teething

The 18-month molars are notorious sleep disruptors. These large teeth can cause significant discomfort and take weeks to emerge fully.

How to help:

- Offer pain relief (ask your pediatrician about appropriate medication and dosing)
- Provide teething toys during the day
- Offer cold foods like frozen fruit in a mesh feeder
- Be patient and offer extra comfort, but try not to create new sleep associations
- Know that this will pass—usually within a few days for each tooth

Managing Sickness

When your toddler is sick, survival mode is appropriate. Do what you need to do to get through it—extra cuddles, co-sleeping, more frequent night wakings. Their comfort comes first.

The key is getting back on track once they're feeling better:

- Return to your normal routine as soon as they're recovered
- Don't wait 'just one more night' to reset—the longer you wait, the harder it is
- Expect a few rough nights as you transition back
- Be consistent with your responses, just as before

Surviving Travel

Travel doesn't have to derail your progress, but it does require planning.

- **Before you go:** Establish a solid routine at home. The better their sleep habits before travel, the easier recovery will be.
- **Pack sleep essentials:** Bring their lovey, white noise machine, and blackout curtains or garbage bags to darken windows.
- **Maintain the routine:** Do the same bedtime routine in the new location. Familiarity helps.
- **Expect some disruption:** New environments are stimulating. Give them grace while maintaining boundaries.
- **Upon return:** Get back to normal immediately. Don't let travel habits become home habits.

Chapter 8

M is for Master

You've made it to the final stage of the DREAM Method. By now, you should be seeing significant progress in your toddler's sleep. This chapter is about cementing those gains, troubleshooting any remaining issues, and setting yourself up for long-term success.

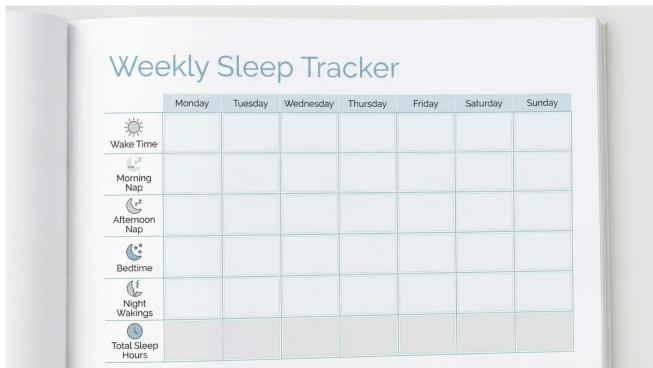
Remember: mastery isn't perfection. It's about having the tools to handle whatever comes next.

Tracking Your Progress

Continuing to track your toddler's sleep helps you identify patterns and celebrate wins. Use the Daily Sleep Log in Chapter 11, or simply note:

- Time they fell asleep
- Number of night wakings
- Time they woke for the day
- Nap length
- Overall mood

After a week, look for trends. Are night wakings decreasing? Is bedtime getting easier? Even small improvements are worth celebrating.



Track progress to see improvements

Troubleshooting Common Setbacks

The Early Morning Waking:

If your toddler is waking for the day before 6:00 AM, treat it like a night wakening. Keep the room dark, your interactions brief, and don't start the day until your desired wake-up time. Ensure their room is completely dark (use blackout curtains) and that they aren't going to bed overtired.

The Nap Transition Struggle:

If your toddler is struggling with the transition to one nap, be patient. It can take a few weeks for their body to adjust. On days when they take a very short nap, an earlier bedtime is your best friend.

The Regression Relapse:

It's not uncommon for a sleep regression to seem to reappear after a few good nights. Don't panic. Stay consistent with your routine and your responses, and they will get back on track within

a day or two.

The Standing in the Crib Problem:

If your toddler stands up and can't lie back down, practice during the day. Show them how to sit down slowly, then lie down. At night, lay them down once, then use your chosen response method. Don't become the 'laying down' person all night.

Celebrating Success

You did it. You survived the 18-month sleep regression. Take a moment to acknowledge the hard work you've put in and the incredible gift of sleep you've given to your child and your family.

To maintain these healthy sleep habits:

- Continue prioritizing a consistent bedtime routine
- Keep an age-appropriate schedule
- Maintain the strong emotional connection with your toddler
- Stay consistent with your responses to any sleep disruptions
- Remember: you have the tools to handle future challenges

Sleep will continue to evolve as your child grows, but now you have the tools and the confidence to handle any future challenges that come your way.



Celebrate your progress!

Real Family Success Stories

Learning from Other Parents' Journeys

Every family's sleep journey is unique, but there's so much we can learn from each other. Here are more real stories from families who have successfully navigated the 18-month regression.

CASE STUDY: The Daycare Transition

The Scenario: Maya, 18 months, had always been a great sleeper until she started daycare. Within two weeks, she was waking 3-4 times per night and refusing to nap at home on weekends.

The Challenge: Maya was exhausted from the new stimulation and emotional demands of daycare, but too wired to sleep. Her parents assumed she wasn't tired, so they pushed bedtime later.

The Solution: Maya's parents moved bedtime earlier by 45 minutes (from 8 PM to 7:15 PM). They added extra connection time during the evening routine, including 15 minutes of Special Time immediately after pickup. They also created a consistent weekend routine that mirrored her weekday schedule.

The Outcome: Within 10 days, Maya was sleeping through the night again. Her naps normalized once her nighttime sleep improved. The earlier bedtime, counterintuitively, resulted in her sleeping later in the morning.

Key Lesson: *Major transitions require extra sleep, not less. Fight the urge to push bedtime later during stressful periods.*

CASE STUDY: The Climbing Escape Artist

The Scenario: Oliver, 19 months, figured out how to climb out of his crib. His parents were terrified for his safety and unsure whether to transition to a toddler bed.

The Challenge: Every time Oliver was put in his crib, he would climb out within minutes. His parents were constantly running back to his room, and bedtime was taking over two hours.

The Solution: First, Oliver's parents lowered the crib mattress to the floor (many cribs allow this). When he continued climbing, they transitioned to a floor bed in a completely childproofed room. They used a baby gate at the door and implemented a 'Silent Return' approach: if Oliver left the bed, they silently walked him back without any interaction.

The Outcome: The first three nights involved over 30 returns. By night five, Oliver was only getting up twice. By week two, he was staying in bed. The key was complete consistency and zero engagement.

Key Lesson: *If you must transition to a toddler bed early, the rules stay the same: clear boundaries, consistent responses, and patience.*

CASE STUDY: The Middle-of-the-Night Party

The Scenario: Twins Ella and James, 18 months, started waking each other up at 2 AM for what their parents called 'midnight parties.' They would babble, laugh, and play for 1-2 hours.

The Challenge: The twins shared a room and seemed to be waking each other up on purpose. The parents tried everything: white noise, separate bedtimes, ignoring it. Nothing worked.

The Solution: The parents temporarily separated the twins, putting one in a pack-and-play in another room. They discovered James was the initiator and worked on his sleep independently for two weeks. They also ensured both twins were getting enough daytime sleep to prevent overtiredness.

The Outcome: Once James was sleeping through, they reunited the twins in their shared room. With James no longer initiating wake-ups, Ella stayed asleep too. Now, 90% of nights are party-free.

Key Lesson: *With room-sharing siblings, you may need to temporarily separate them to identify and fix the root cause.*

CASE STUDY: The 'Only Mom Will Do' Scenario

The Scenario: Liam, 17 months, would only fall asleep if his mother, Rachel, was the one putting him to bed. If Dad tried, Liam screamed inconsolably. Rachel was exhausted and felt trapped.

The Challenge: Rachel had always been the primary bedtime parent, and Liam had developed a strong sleep association with her specifically. This left Rachel with no breaks and created stress in the marriage.

The Solution: They implemented a gradual transition. First, Dad joined the bedtime routine for several nights, just being present while Mom did everything. Then Dad started doing one step (like putting on pajamas) while Mom did the rest. Slowly, Dad took over more steps. They also established a schedule where Dad did bedtime every Tuesday and Thursday, no exceptions.

The Outcome: After three weeks, Liam accepted either parent at bedtime. The first few Dad nights involved some crying, but with consistency, Liam adjusted. Rachel got much-needed breaks, and Dad felt more connected to Liam.

Key Lesson: *Children can learn to accept either parent—but it requires consistent practice and a commitment to following through despite protests.*

CASE STUDY: The Schedule Disaster

The Scenario: Sophie, 18 months, had no consistent sleep schedule. Her parents let her sleep when she seemed tired, which meant nap times ranged from 11 AM to 3 PM, and bedtime varied between 7 PM and 10 PM.

The Challenge: Sophie was chronically overtired from inconsistent sleep. She fought every nap and bedtime, and her mood was unpredictable. Her parents were frustrated because they felt they were following her cues.

The Solution: Sophie's parents implemented a consistent schedule: wake by 7 AM (with morning light exposure), nap at 12:30 PM (regardless of sleepy cues), and bedtime at 7:00 PM. They woke Sophie from nap if it went past 3 PM. For the first week, Sophie resisted the schedule.

The Outcome: By week two, Sophie's body had adjusted. She was napping 2 hours daily and going to bed without a fight. Her parents were amazed at the personality change—Sophie was suddenly a happy, easy-going toddler.

Key Lesson: *While sleepy cues are important, toddlers also need the predictability of a consistent schedule. Sometimes you need to lead, not follow.*

PART THREE

Practical Tools & Resources

Chapter 9

Week-by-Week Action Plan

This chapter provides a structured plan to implement the DREAM Method over four weeks. Follow this timeline for best results.

Week 1: Decode & Prepare

Day 1-2: Complete the Sleep Regression Audit. Track all sleep for 48 hours.

Day 3: Identify your toddler's primary type (Boundary Tester, Anxious Clinger, or Overtired Mess). Set your 7-day goal.

Day 4-5: Optimize the sleep environment. Get blackout curtains, set up white noise, adjust room temperature.

Day 6-7: Establish the new bedtime routine. Write it down and post it where you can see it.

Week 2: Reset & Connect

Day 8-10: Implement the new bedtime routine consistently. Expect some resistance—this is normal.

Day 11-12: Begin using your chosen night waking response method. Stay consistent.

Day 13-14: Add in connection rituals. Start Special Time if you haven't already. Introduce or emphasize the lovey.

Week 3: Adapt & Refine

Day 15-17: Assess progress. Review your sleep log. What's working? What needs adjustment?

Day 18-19: Fine-tune wake windows and nap schedule based on what you're seeing.

Day 20-21: Address any specific challenges (teething, transition to one nap, etc.) with targeted strategies.

Week 4: Master & Maintain

Day 22-24: Celebrate progress! Note improvements in your log. Stay consistent.

Day 25-27: Troubleshoot any remaining issues. Refer to Chapter 10 for specific solutions.

Day 28: You made it! Evaluate your overall progress and plan for long-term maintenance.

Remember

Progress isn't always linear. You may have two great nights followed by a rough one. This is normal. Stay the course and trust the process.

Chapter 10

Troubleshooting Guide

This quick-reference guide helps you solve common problems. Find your challenge below and follow the targeted advice.

My toddler screams when I put them in the crib

This is often a sign of either overtiredness or undetiredness. Check your wake windows. Also ensure you're not rushing the bedtime routine—slow down the last 10 minutes to help them transition. Consider adding an extra calming step like a massage or quiet cuddle.

My toddler keeps standing up and won't lie down

Practice sitting and lying down during the day when they're calm. At night, lay them down once gently, then use verbal reassurance from outside the crib. Don't engage in a lie-down/stand-up cycle.

My toddler naps great but fights bedtime

Bedtime may be too early (not tired enough) or too late (overtired). Try shifting bedtime by 15 minutes in either direction. Also ensure the nap isn't too long or too late in the day.

My toddler sleeps fine at daycare but not at home

Daycare environments are often very consistent and have multiple cues for sleep. Try to replicate what works: same approximate times, a clear wind-down routine, and a sleep-conducive

environment.

My toddler was doing great, then regressed again

Short-term regressions are normal during illness, travel, teething, or developmental leaps. Return to your consistent approach immediately. Don't wait for the 'right time' to get back on track.

My partner and I aren't on the same page

Have a conversation away from bedtime. Agree on the core principles (bedtime, routine, response method). Accept that you may have different styles—consistency matters more than perfection. Consider taking turns being the 'bedtime parent.'

I've been consistent for two weeks and nothing is working

Two weeks is usually enough to see progress, but not always. Review your approach: Are you truly consistent every single time? Is there a medical issue (ear infection, reflux, sleep apnea) that needs evaluation? Consider consulting a pediatric sleep specialist.

Chapter 11

Printable Templates & Worksheets

These templates are designed to be photocopied or printed. Use them to track your progress and stay organized.

Sleep Regression Audit

Instructions: Track your toddler's sleep for 48 hours to identify patterns.

Day 1 - Date: _____

Morning wake time: _____

Nap 1: Start _____ End _____ Duration _____

Nap 2 (if applicable): Start _____ End _____ Duration _____

Bedtime routine started: _____

Time in crib/bed: _____

Time fell asleep: _____

Night waking 1: Time _____ Response _____ Duration _____

Night waking 2: Time _____ Response _____ Duration _____

Night waking 3: Time _____ Response _____ Duration _____

Notes/observations:

Day 2 - Date: _____

Morning wake time: _____

Nap 1: Start _____ End _____ Duration _____

Nap 2 (if applicable): Start _____ End _____ Duration _____

Bedtime routine started: _____

Time in crib/bed: _____

Time fell asleep: _____

Night waking 1: Time _____ Response _____ Duration _____

Night waking 2: Time _____ Response _____ Duration _____

Night waking 3: Time _____ Response _____ Duration _____

Notes/observations:

Our Bedtime Routine

Instructions: Fill in your personalized bedtime routine. Post where visible!

Routine start time: _____

Step 1: _____ (___ minutes)

Step 2: _____ (___ minutes)

Step 3: _____ (___ minutes)

Step 4: _____ (___ minutes)

Step 5: _____ (___ minutes)

Lights out time: _____

Our goodnight phrase: _____

Daily Sleep Log

Instructions: Track sleep daily to monitor progress.

Date	Nap Time	Nap Length	BedtimeNight	Waking	Morning Wake	Notes

Week-by-Week Progress Tracker

Instructions: Rate each category 1-5 (1=poor, 5=excellent) at the end of each week.

Category	Week 1	Week 2	Week 3	Week 4
Bedtime ease (1-5)				
Time to fall asleep (1-5)				
Night wakings (1-5)				
Nap quality (1-5)				
Morning wake time (1-5)				
My energy level (1-5)				
Overall satisfaction (1-5)				

Toddler Sleep Type Assessment

Instructions: Check all behaviors that apply to identify your toddler's primary type.

THE BOUNDARY TESTER

- Stalls at bedtime ('one more book,' 'more water,' etc.)
- Seems happy and playful when fighting sleep
- Tests limits in other areas during the day
- Naps okay but fights bedtime specifically
- Calms down quickly when limits are firmly enforced
- Gets a 'second wind' when bedtime is delayed

TOTAL CHECKS: _____

THE ANXIOUS CLINGER

- Cries appear fearful rather than angry
- Calms quickly when you return to the room
- Shows clinginess during the day too
- Recently started daycare or experienced a change
- Says things like 'scared' or 'stay with me'
- Follows you around the house constantly

TOTAL CHECKS: _____

THE OVERTIRED MESS

- Gets hyperactive or 'wired' at bedtime
- Wakes frequently throughout the night
- Takes short naps (under 1 hour)
- Wakes before 6 AM regularly
- Is cranky and irritable during the day
- Falls asleep at random times (in the car, stroller)

TOTAL CHECKS: _____

My toddler's primary type: _____

My toddler's secondary type (if applicable):

Connection Ritual Planner

Instructions: Plan daily connection rituals to fill your toddler's 'emotional cup.'

SPECIAL TIME (15 minutes, child-led)

Best time of day for Special Time: _____

Activities my toddler loves: _____

My commitment: I will do Special Time _____ days per week.

RECONNECTION AFTER SEPARATION

Times I'm separated from my toddler: _____

My reconnection ritual when I return: _____

BEDTIME CONNECTION

Our 'remember when' topics tonight: _____

My toddler's lovey name: _____

Our special goodnight phrase: _____

Sleep Environment Checklist

Instructions: Evaluate your toddler's sleep environment. Check off items that are optimized.

DARKNESS

- Blackout curtains installed
- All lights from electronics covered
- Nightlight is dim red/orange (not blue/white)
- Room is dark enough you can't see your hand

TEMPERATURE

- Room is 68-72°F (20-22°C)
- Toddler is dressed appropriately for temperature
- Ceiling fan or air circulation available
- No direct drafts on the sleep area

SOUND

- White noise machine in use
- Volume is consistent (not too loud, not too quiet)
- White noise runs all night (not on a timer)
- Household noise minimized during sleep times

SAFETY & SETUP

- Crib mattress at lowest setting
- No climbable objects near crib
- Room is childproofed
- Sleep space is boring (no toys in crib)
- Lovey is safe (no loose parts, choking hazards)

Items I need to address:

1. _____
2. _____
3. _____

Night Waking Response Plan

Instructions: Choose your approach and write it down so you can follow it consistently at 2 AM.

MY CHOSEN APPROACH:

- Brief Check-Ins (quick reassurance, then leave)
- Chair Method (sit in room, gradually move out)
- Verbal Reassurance (call out from outside room)
- Other: _____

MY EXACT SCRIPT (what I will say):

MY RULES FOR MYSELF:

- I will NOT pick up my toddler (unless safety concern)
- I will NOT turn on lights
- I will NOT engage in conversation beyond my script
- I will NOT check my phone while doing check-ins
- I will follow this plan for at least _____ nights

WHEN I FEEL LIKE GIVING UP:

I will remember: _____

My support person I can text at 2 AM: _____

Frequently Asked Questions

Q: Is this the same as 'cry it out'?

A: No. The DREAM Method is a holistic approach that prioritizes connection and addresses the root causes of sleep issues. While some children may cry during the adjustment period (as they do with any change), the goal is to minimize distress through preparation, connection, and consistent support. You can choose your level of involvement during the process.

Q: My pediatrician says sleep training is harmful. What do I say?

A: Research consistently shows that responsive sleep training methods do not cause psychological harm. However, if you're uncomfortable with any approach, don't use it. The DREAM Method offers multiple options, and you should choose what feels right for your family.

Q: What if my toddler shares a room with a sibling?

A: Room-sharing adds complexity but doesn't make sleep improvement impossible. Consider temporarily separating them during the adjustment period (2-3 weeks), or start with the child who sleeps better and work on one child at a time.

Q: Should I wake my toddler from naps?

A: Generally, let them sleep. However, if a nap is going so long that it will interfere with bedtime (e.g., they're still sleeping at 5 PM), gently wake them. Cap naps at 3 hours total.

Q: When should I call the pediatrician?

A: Contact your pediatrician if you notice: loud snoring or gasping during sleep, consistent sleep problems despite consistent effort for 4+ weeks, signs of illness, extreme daytime sleepiness, or any other concerns about your child's health.

Q: My partner travels a lot. How do I stay consistent?

A: Consistency with the at-home parent is what matters most. When your partner returns, brief them on the current approach and ask them to follow the same plan. It's okay if there are small differences—children can adapt to 'Mom's way' and 'Dad's way' as long as each parent is individually consistent.

Q: Will this work if we co-sleep?

A: The DREAM Method can be adapted for co-sleeping families who want to improve sleep quality without fully transitioning to independent sleep. Focus on the Decode, Reset (routine), and Adapt phases while maintaining your sleep arrangement.

Q: How do I handle grandparents/caregivers who don't follow the plan?

A: Have a direct conversation about the importance of consistency. Provide written instructions and explain the 'why'

behind each step. If they still can't follow the plan, try to limit their bedtime involvement during the crucial adjustment period.

More Frequently Asked Questions

Q: How do I know if my toddler has a sleep disorder vs. just behavioral sleep issues?

A: Behavioral sleep issues typically respond to consistent changes in routine and parenting approach within 2-4 weeks. If your child snores loudly, gasps during sleep, sleeps in unusual positions (head hyperextended), has excessive daytime sleepiness despite adequate nighttime sleep opportunities, or shows no improvement with consistent intervention, consult your pediatrician to rule out sleep apnea or other medical conditions.

Q: Is it okay to use a pacifier at 18 months?

A: Pacifiers at this age are a personal choice. If the pacifier is disrupting sleep (your toddler wakes repeatedly for you to replace it), it may be time to wean. If it's working for your family and not interfering with speech development or dental health, there's no rush to eliminate it. Consult your dentist or pediatrician if you have concerns.

Q: My toddler only naps in the car or stroller. How do I transition to crib naps?

A: Motion sleep is less restorative than stationary sleep. To transition: Start by putting them in the crib drowsy (after a car ride if needed) and letting them finish the nap there. Gradually reduce the car/stroller time before transferring. Eventually, start naps in the crib from the beginning. This may take 2-3 weeks of gradual transition.

Q: Should I night wean before or after sleep training?

A: Either approach can work. If your toddler is feeding multiple times per night, it may help to gradually reduce night feeds first (over 1-2 weeks) before addressing other sleep issues. Alternatively, many families find that once their toddler learns to fall asleep independently, they naturally drop night feeds on their own.

Q: My toddler seems terrified at bedtime. Is this normal?

A: Some fear at bedtime is developmentally normal at this age due to increased imagination and separation anxiety. However, extreme terror that doesn't improve with reassurance, or that appears suddenly, warrants attention. Ensure there's nothing in the environment causing fear (shadows, noises). If fears seem excessive or are accompanied by other concerning behaviors, consult your pediatrician.

Q: How do I handle daylight saving time?

A: For the 'fall back' time change: Gradually shift your toddler's schedule later by 10-15 minutes every few days in the week before the change. For 'spring forward': Shift earlier by 10-15 minutes daily. Alternatively, just make the change and expect 3-7 days of adjustment.

Q: My toddler sleeps great at home but terribly at grandparents' house. Why?

A: Different environments mean different rules, cues, and comfort levels. To improve sleep away from home: Bring familiar items (lovey, white noise machine, sleep sack), maintain the same routine, and communicate your approach to caregivers. Accept that some disruption is normal—focus on getting back on track when you return home.

Q: Is melatonin safe for toddlers?

A: Melatonin should only be used under the guidance of your pediatrician. It is not FDA-regulated as a drug, so quality varies. For most toddlers, behavioral approaches are more effective and sustainable than supplements. If your pediatrician recommends melatonin, use the lowest effective dose for the shortest time necessary.

Chapter 13

References & Further Reading

Cited Sources

- [1] Mindell, J. A., Li, A. M., Sadeh, A., Kwon, R., & Goh, D. Y. (2015). Bedtime routines for young children: a dose-dependent association with sleep outcomes. *Sleep*, 38(5), 717-722.
- [2] Adair, R. H., & Bauchner, H. (1993). Sleep problems in childhood. *Current problems in pediatrics*, 23(4), 147-170.
- [3] Passman, R. H. (1987). Attachments to inanimate objects: Are children who have security blankets insecure? *Journal of Consulting and Clinical Psychology*, 55(6), 825.
- [4] Sadeh, A., Tikotzky, L., & Scher, A. (2010). Parenting and infant sleep. *Sleep Medicine Reviews*, 14(2), 89-96.
- [5] Mindell, J. A., & Williamson, A. A. (2018). Benefits of a bedtime routine in young children: Sleep, development, and beyond. *Sleep Medicine Reviews*, 40, 93-108.

Recommended Books

- Healthy Sleep Habits, Happy Child by Marc Weissbluth, M.D.
- Precious Little Sleep by Alexis Dubief

- The Happy Sleeper by Heather Turgeon & Julie Wright
- Solve Your Child's Sleep Problems by Richard Ferber, M.D.
- The No-Cry Sleep Solution for Toddlers by Elizabeth Pantley

Helpful Websites

- Taking Cara Babies (takingcarababies.com)
- The Baby Sleep Site (babysleepsite.com)
- Precious Little Sleep (preciouslittlesleep.com)
- American Academy of Pediatrics - Healthy Sleep (aap.org)

A Final Word

If you've made it to this page, you've invested time you probably don't have into solving this problem. That investment will pay off.

Remember: **You are not failing.** You are facing one of the most challenging phases of early parenthood. The fact that you're seeking solutions is evidence of your love and commitment to your child.

There will be hard nights ahead. There will be moments when you want to give up. When those moments come, return to this truth: You are capable of this. Your toddler is capable of learning to sleep. And on the other side of this challenge, you will both be stronger.

Sleep is coming. I believe in you.

Sweet dreams,

Marli Benjamin

www.thesleepregressionsolution.com

About the Author

Marli Benjamin is a mother of two who survived the 18-month sleep regression twice—the first time completely unprepared, the second time with hard-won knowledge and a lot more grace.

After her own sleepless nights, she spent years reading the research, testing what actually works, and connecting with other exhausted parents going through the same thing. This guide is everything she wishes someone had handed her at 3 AM.

She's not a doctor or a sleep scientist. She's a mum who figured it out the hard way and wants to make it easier for you.

For more resources and support:

www.thesleepregressionsolution.com

Pinterest: @sleepregressionsolution

Notes

Notes

Notes

Sleep Log - Week 1

Monday Date: _____

Wake: _____ Nap: _____ - _____ Bed: _____ Wakings: _____
Notes: _____

Tuesday Date: _____

Wake: _____ Nap: _____ - _____ Bed: _____ Wakings: _____
Notes: _____

Wednesday Date: _____

Wake: _____ Nap: _____ - _____ Bed: _____ Wakings: _____
Notes: _____

Thursday Date: _____

Wake: _____ Nap: _____ - _____ Bed: _____ Wakings: _____
Notes: _____

Friday Date: _____

Wake: _____ Nap: _____ - _____ Bed: _____ Wakings: _____
Notes: _____

Saturday Date: _____

Wake: _____ Nap: _____ - _____ Bed: _____ Wakings: _____
Notes: _____

Sunday Date: _____

Wake: _____ Nap: _____ - _____ Bed: _____ Wakings: _____
Notes: _____

Week 1 Wins:

Week 1 Challenges:

Sleep Log - Week 2

Monday Date: _____

Wake: _____ Nap: _____ - _____ Bed: _____ Wakings: _____
Notes: _____

Tuesday Date: _____

Wake: _____ Nap: _____ - _____ Bed: _____ Wakings: _____
Notes: _____

Wednesday Date: _____

Wake: _____ Nap: _____ - _____ Bed: _____ Wakings: _____
Notes: _____

Thursday Date: _____

Wake: _____ Nap: _____ - _____ Bed: _____ Wakings: _____
Notes: _____

Friday Date: _____

Wake: _____ Nap: _____ - _____ Bed: _____ Wakings: _____
Notes: _____

Saturday Date: _____

Wake: _____ Nap: _____ - _____ Bed: _____ Wakings: _____
Notes: _____

Sunday Date: _____

Wake: _____ Nap: _____ - _____ Bed: _____ Wakings: _____
Notes: _____

Week 2 Wins:

Week 2 Challenges:

Sleep Log - Week 3

Monday Date: _____

Wake: _____ Nap: _____ - _____ Bed: _____ Wakings: _____
Notes: _____

Tuesday Date: _____

Wake: _____ Nap: _____ - _____ Bed: _____ Wakings: _____
Notes: _____

Wednesday Date: _____

Wake: _____ Nap: _____ - _____ Bed: _____ Wakings: _____
Notes: _____

Thursday Date: _____

Wake: _____ Nap: _____ - _____ Bed: _____ Wakings: _____
Notes: _____

Friday Date: _____

Wake: _____ Nap: _____ - _____ Bed: _____ Wakings: _____
Notes: _____

Saturday Date: _____

Wake: _____ Nap: _____ - _____ Bed: _____ Wakings: _____
Notes: _____

Sunday Date: _____

Wake: _____ Nap: _____ - _____ Bed: _____ Wakings: _____
Notes: _____

Week 3 Wins:

Week 3 Challenges:

Sleep Log - Week 4

Monday Date: _____

Wake: _____ Nap: _____ - _____ Bed: _____ Wakings: _____
Notes: _____

Tuesday Date: _____

Wake: _____ Nap: _____ - _____ Bed: _____ Wakings: _____
Notes: _____

Wednesday Date: _____

Wake: _____ Nap: _____ - _____ Bed: _____ Wakings: _____
Notes: _____

Thursday Date: _____

Wake: _____ Nap: _____ - _____ Bed: _____ Wakings: _____
Notes: _____

Friday Date: _____

Wake: _____ Nap: _____ - _____ Bed: _____ Wakings: _____
Notes: _____

Saturday Date: _____

Wake: _____ Nap: _____ - _____ Bed: _____ Wakings: _____
Notes: _____

Sunday Date: _____

Wake: _____ Nap: _____ - _____ Bed: _____ Wakings: _____
Notes: _____

Week 4 Wins:

Week 4 Challenges:

OVERALL PROGRESS REFLECTION:
