

Introduction

New mothers may experience significant sleep disruption due to the erratic sleep patterns characteristic of the newborn and infant period.

Even mild sleep deprivation or fragmentation is associated with impaired mood and cognitive functioning.

Families voice frustration with infant sleep, often holding unrealistic or lack of understanding of expected sleep patterns for daytime and nighttime.

Helping parents understand newborn and infant sleep with an emphasis on safety, environmental, behavioral and coping measures will maximize healthy sleep opportunities for both baby and mother.

Program Goals

Improve infant and maternal sleep using a personalized education approach.

Provide reassurance and anticipatory guidance for normal newborn and infant sleep patterns.

With parents, identify appropriate environmental and behavioral approaches to improve infant sleep over time.

Enhance maternal / parental sleep opportunities through improved understanding of healthy sleep hygiene.



Isis Parenting Sleep Support

Nancy Holtzman, RN BSN IBCLC CPN

Atlanta | Boston | Dallas

IsisParenting.com

Intervention: Phone Based Sleep Support

Parents self-selected to participate in the Sleep Support Program and initiated the consultation by request.



The phone-based consultation included one hour with the mother/parents and consultant, divided into initial (45 min) and follow up (15 min) calls.

Other family members or caregivers involved in baby’s care were invited to participate.

Information about the sleep environment, expected newborn/infant sleep and feeding patterns, sleep safety and maternal sleep hygiene were reviewed.

Appropriate suggestions were designed into a Sleep Plan in accordance with parent situation and reasonable goals. A 15 minute follow up call occurred within 1-2 weeks.



Age Distribution at Initiation (out of 498 consults)

Parent request for sleep support was highest at 4 to 8 months with majority at 6 months.



Implementation

Intake and Screening

Once consult request was initiated, families completed a detailed intake form outlining baby’s current sleep habits, patterns, routines, environmental factors, and any medical, clinical or feeding issues.

The intake form served as an initial screening tool: infants with snoring, sleep apnea, severe reflux or eczema or other clinical factors which affect sleep were referred to the pediatrician for treatment or clearance.

Sleep Assessment and Parent Concerns

Education was provided around realistic expectations for day and night sleep by age and stage.

Common education themes included: sleep associations, sleep location, environment, night feeding, nap initiation, length and timing, routines.

Behavioral and Environmental Adjustments

Safety review based on AAP Safe Sleep Recommendations, combined with compatible environmental adjustments.

Developmentally appropriate interventions (“Sleep Plan”) developed with parents based on realistic goals.

Follow Up and Sleep Plan Adjustment

Answering questions, shifting interventions, anticipatory guidance for coming weeks or developmental stages.

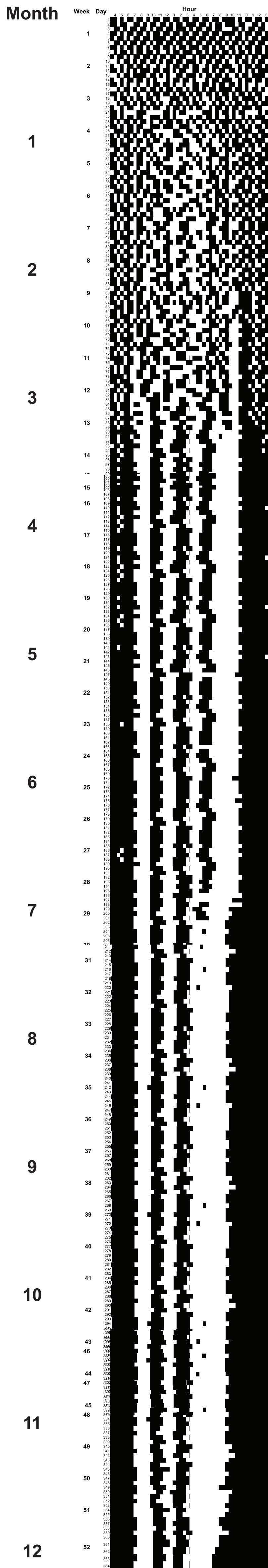
Example of common parent concerns:
Swaddle transitions,
rolling, sitting and
other motor
development sleep
disruptions.



First Year of Infant Sleep Consolidation

Maternal/parental sleep concerns during the first year:

- Only sleeps when held
- Days and nights confused
- Can’t sleep when the baby sleeps
- Light sleep state = “gas”
- Sleep location - bed-sharing/co-sleeping
- Too much/not enough daytime sleep
- Lack of sleep consolidation at night
- Unrealistic expectations of sleep patterns
- Bedtime routines & “dream fees”
- Managing “pop up naps”
- Sleep location transitions
- Establishing regular naps and nap routines
- Childcare and care giver guidance
- Pacifier concerns
- Establishing sleep associations
- Introducing a lovey or transitional item
- Swaddle transitions
- “Teething” and sleep
- Rolling at night, sleeping on tummy
- Trading down sleep associations
- Nap transitions (from 3 naps to 2 naps)
- Sitting & standing in crib
- Gently reducing night feedings
- Nightmares and “terrors” - crying while asleep
- Early morning wake-up
- Teething
- New onset night waking
- Colds, congestions, ear infections, illness
- Travel, vacations and sleep
- Nap transitions (from 2 naps to 1 nap)



Isis Parenting Sleep Support Team offers a free weekly webinar and chat on Infant & Toddler Sleep topics. Participants may attend live, or view the library of recordings at any time.



Evaluation & Results

Phone based, highly personalized sleep support was positively received.

88% of participants rated consultation improved or much improved their understanding of:

- Newborn and infant sleep patterns and realistic expectations
- Environmental adjustments to improve sleep
- Developmentally appropriate and effective behavioral approaches to targeted sleep concerns

82% believed this resulted in improved sleep for baby and for mother.

Approximately 30% of participants requested additional follow up calls to continue program or for future new concerns.

Approximately 60% of current Sleep Support Program consult requests are prior clients with new infants, or friend or relative referrals.

Future Study

Maternal perception of improved infant sleep and impact on: postpartum mood disorder, breastfeeding duration, maternal sleep consolidation, safe infant sleep environments, workplace performance. Types of behavioral and environmental modifications and their impact on sleep length. Reduction of SIDS/SUID risk factors.

Acknowledgements

Isis Parenting Sleep Team Co Leaders

Meghan Casano, RN BSN MA
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