Sleep Intervention Questionnaire (SIQ)

Disruption Tolerance

1. Does your child misbehave at bedtime or when waking up at night in a way that is too serious or upsetting to ignore?
   - Yes  
   - No  

2. Would it be difficult or impossible for you to listen to your child being upset for long periods of time (more than a few minutes)?
   - Yes  
   - No  

3. Do you find it too difficult to put your child back in bed once he or she gets up?
   - Yes  
   - No  

Schedule Tolerance

4. Are you, or another member of your family, willing to stay up later at night to put a sleep plan into action?
   - Yes  
   - No  

5. Are you, or another member of your family, willing to get up earlier in the morning to put a sleep plan into action?
   - Yes  
   - No  

Attitudinal Barriers

6. Do you feel emotionally unable to deal directly with your child’s sleep problem?
   - Yes  
   - No  

7. Do you feel guilty making your child go to bed (or go back to bed) when he or she does not want to?
   - Yes  
   - No  

8. Do you think it would be emotionally damaging to your child if you tried to change the way he or she slept?
   - Yes  
   - No