

## Good sleep practices: Sleep Hygiene

*Galland & Mitchell, 2010*

Preparation for sleep should begin at the same time each evening, with consistent routines.

### 1. Prepare for bed:

- Young children – about 30 minutes before 'sleep time'
- Older children – about 30–60 minutes

Evidence suggests significant improvement:

- Children's sleep latency (getting off to sleep)
- Frequency/duration waking
- Parental rating of sleep
- Maternal mood

### 2. Warm bath:

- It worked for your baby
- Many adults report better sleep after having bath before bed
- So why not school children?

### 3. Reading

- Can help solve problems of night-time fears
- Help child with improving reading
- Good bonding parent/child
- Relaxing

Evidence suggests significant improvement:

- Bedtime stories with discussions or drawings that deal positively with the dark have been used clinically and successfully to treat night-time fears
- Bedtime reading is recommended as part of the routine for children of all ages to promote good sleep

### 4. Physical environment for sleep

- Child's bedroom should be a quiet, darkened, warm place
  - Noise and light increases the risk of sleep disorders
  - A room too hot or too cold will disrupt sleep
  - No hotter than 75°F or 24°C

### 5. Lighting

- Lights out – encourage sleep onset
- Lights on – associate with getting up
  - Reinforces sleep and wake times
- Many children will not sleep with the light off
  - Use low luminance lights

### 6. Consistent wake time

- In addition to consistent bedtime
- Avoids adverse practice of allowing children to 'catch up' lost sleep
- May lead to advanced sleep phase syndrome

### 7. Daytime food

- Avoid caffeine drinks (coffee, coke...) 4 hours before bedtime
- Caffeine also in some foods – so watch that
- Food too near to bedtime should be avoided
- But if needed, use 'snooze foods'
- Contain sleep-promoting chemicals:
- Dairy products, soy products, meat, poultry, beans, rice
- Food high in carbohydrate and calcium also useful:
- e.g. peanut butter sandwich, or an oatmeal biscuit with a glass of milk

### 8. Daytime exercise

- Adult research studies suggest that physical exercise is good for sleep
- But not within 3 hours of bed time
- Perhaps good for children – but no evidence

## Good sleep practices: Sleep Programmes

*Galland & Mitchell, 2010*

Behavioural methods to combat sleep problems in children

### Reinforcement and extinction:

- Reinforcing and rewarding good bedtime behaviour
    - Cuddles, praise etc
  - Some therapists encourage star charts
    - But these can cause 'competition' between children. – not so good
  - Ignoring 'bad behaviour' promotes 'extinction'
    - Behaviours tend not to be repeated if not reinforced
    - These interventions not recommended for infants less than 6 months
1. Unmodified extinction
    - Eliminates parental attention that reinforces behaviour
      - Child left to cry self to sleep
      - But can be very stressful, especially if intense prolonged crying
  2. Graduated extinction
    - 'Controlled crying'
    - Rather more acceptable than unmodified extinction
    - Parents progressively increase time period from start of crying to response
    - Brief intervention – say 15 seconds with minimal interaction
  3. Extinction with parental presence
    - Parent remains in room during extinction procedure
    - Can incorporate 'fading out'
    - Parent gradually removes themselves from bedroom
    - Presence more reassuring to child
    - But this method can take longer
  4. Bedtime pass programme
    - Recommended for children over 3 years of age with bedtime resistance
    - Child gets into bed
    - Given card that is exchangeable for one 'free' trip out of their room
    - Or one visit by parent to satisfy an acceptable request
    - Surrender pass after use and employ 'extinction'
    - Evidence suggests success
  5. Scheduled waking
    - Keep a diary of child's waking times over a week
    - Parents can anticipate spontaneous wake times
    - Parent given a schedule to wake child 15–60 minutes before anticipated time
    - Frequency of spontaneous waking should decrease
    - Duration between scheduled wakings gradually lengthened
    - Then eliminated altogether
    - Increases duration of consolidated sleep