any families find bedtime and naptime to be a challenge for them and their children. It is estimated that 43% of all children and as many as 86% of children with developmental delays experience some type of sleep difficulty. Sleep problems can make infants and young children moody, short tempered and unable to engage well in interactions with others. Sleep problems can also impact learning. When a young child is sleeping, her body is busy developing new brain cells needed for her physical, mental and emotional development. Parents also need to feel rested in order to be nurturing and responsive to their growing and active young children. Here are a few proven tips for making bedtimes and naptimes easier for parents and children.

**Tip: Establish Good Sleep Habits**

- **Develop a regular time for going to bed and taking naps, and a regular time to wake up.** Young children require about 10-12 hours of sleep a day (see the box on the last page that provides information on how much sleep a child needs). Sleep can be any combination of naps and night time sleep.

- **Make sure your child has outside time and physical activity daily,** but not within the hour before naptime or bedtime.

- **Give your child your undivided and unrushed attention** as you prepare her for bedtime or a nap. This will help to calm her and let her know how important this time is for you and her.

- **Develop a bedtime and naptime routine.** Help your child be ready for sleep. Babies and young children thrive on predictability and learn from repetition. They like and need to know what is happening next. It is important to establish
a routine that both you and your child understand and find calming and relaxing. Bedtime routines usually involve undressing, bathing, dressing in pajamas, brushing teeth, toileting for older toddlers and preschoolers, story and/or prayers (for children developmentally older than six months). The order and content will be different for each family depending on the developmental age of your child, the traditions of your family, and the needs of your child’s specific disability.

- Do and say the same things before naps and bedtime. This helps your child transition from active play to sleep.

- Establish a predictable place for sleeping. If you want your child to sleep in his own bed, put him down in his own bed. If you would like your child to nap in her room, guide her to sleep in her room. If you begin the bedtime routine in another location (e.g., the rocking chair) and then move the child when sleeping, your child is likely to wake up during a light sleep cycle and become confused about her surroundings.

★ Help your child understand the steps in the napping and bedtime routines.

- First..., then... statements help your child understand and predict what will happen next. You might say, “Sara, it’s time to take a nap. First, let’s find teddy. Then we can pick a book to read. Then we can climb into bed and cuddle.”

- Your child might benefit from a picture schedule or a picture book (photos, clipart, objects) of the steps in her napping or bedtime. This can help her understand the steps and expectations of the routine. It can also help other adults and babysitters put her to bed in a similar manner. Supporting others who put your child to sleep in a way that you have found works will be very reassuring and calming for your child and for them.

★ Tell your child what might happen when she wakes up. The day might have been so much fun that your child does not want to take a break for a nap or go to bed for the night. Follow your calming routine, reassuring your child that the fun will continue when she wakes up. You might want to talk with her about what will happen when she wakes. You might want to show her a picture of what is going to happen after she sleeps. For example, you might say, “First, sleep. Then wake up and we go to the park.” You might use pictures of sleep and park to help your child understand.

★ Carry a favorite transition object to bed (e.g., a teddy bear, a blankie, a book). A transition object becomes another signal to the child that it is time to go to sleep. Some children prefer an object that is soothing to touch or cuddle while resting.

★ Provide your child with calming, rest-inducing activities, sounds or objects in the routine. Avoid activities that might excite your child in the hour before bedtime or nap. It is not a time for rough-housing, tickle games, or active play. It is not a time for DVDs or computer games. In fact, you might have an easier time with the naptime/bedtime transition if your child is not engaged in a favorite activity when it is time to start the naptime or bedtime routine. It is important that your routine helps your child prepare for resting and sleeping. Some possible soothing items and activities include sucking a pacifier, hugging a blankie or soft animal, looking through or reading a favorite book, soft music on the CD player, being rocked, a back rub, or singing a lullaby to your child. Reducing the noise and light in the room and nearby rooms is rest-inducing for many young children.

★ Put your baby or child down for sleep while she is still awake. Say “good night” and leave the room. By putting your baby/child down before she’s asleep, she learns to go to sleep on her own, an important skill for the rest of her life. If she falls asleep routinely in your arms or a rocking device, she might get disoriented or scared when waking up in her crib or bed, rather than cozy and comfortable in your arms. She will not have learned how to put herself back to sleep without your help. When placing your child
in her bed, you can provide her with soothing sleep aids such as her security blanket, a stuffed animal, a pacifier, or quiet music.

Tell your child that you will be back to check on her shortly and then be sure to return in a few minutes. She might cry for a few minutes. If so, you can help her settle down again and then leave the room. You can return to her room on regular intervals to offer comfort, but you should not take your child out of bed.

★ Avoid certain foods and drinks six hours before sleep (e.g., sodas, chocolate, fatty foods). A little tummy that is digesting sugary, caffeinated or fatty foods can keep a child alert and awake.

★ Try breast feeding or offering a warm bottle just before bed. Milk can induce a deep sleep. However, if your child is being potty trained, avoid milk three hours before sleep because it may cause them to have an accident during the night. Remember that a child should never be put to bed with a bottle as that causes serious tooth decay. You want to also remember to help your child brush his teeth after any snack or drink that is given prior to sleeping.

★ Provide choices whenever possible. Providing choices for your child has proven to be a powerful strategy in preventing challenging behaviors. Choices you offer at bedtime could be whether the night light stays on or off, what toy the child takes to bed, the story you will read, or if the door is open or shut. This gives your child a feeling of control and helps your child cooperate with your requests. When offering choices, make them concrete and limited (only 2 or 3 choices). For example, you could let your child choose which pajamas to wear (given 2 choices), when to go potty (e.g., before or after brushing teeth), who will give her a bath (e.g., mommy or grandma), or what book to read (given 3 choices), etc.

★ Reduce noise and distractions in and near her room. You want to help your child fall asleep by reducing the distractions or things that make her stay awake. For example, if your child would rather stay up and watch television, turn it off until she is asleep. If it is still light outside, consider shades or curtains that darken the room. If adults or other children are talking or playing, consider asking them to move away from the child’s room. When an infant or a young child sleeps in a room with the television on or loud conversation happening, she comes to rely on these to fall asleep but doesn’t truly get the restful sleep she needs. If it is not possible to keep the environment quiet, consider playing soothing music near the child to block out other sounds (a ticking clock, fish tank, or fan might also work).

★ Reduce light in the room. While you want to darken the room, your child might find it reassuring to have a small light on in the room or her bedroom door open slightly and a light on in the hall.

★ Make sure your child is comfortable. Check the temperature; what is comfortable for you might be chilly or too warm for your child. Your child might need the security of pajamas that are snug fitting or an extra blanket. She might feel cold even when you think the room is just right. She might need the fan on or off.
Consider keeping a sleep diary for a week.

Some children are erratic in their sleep patterns. You might feel at a loss for predicting how much and when she sleeps. A sleep diary is a written log of when your child falls asleep, when your child wakes up, and a calculation of the total amount of sleep for each day. You might also want to write comments about any events that happen that day that could be related to your child’s sleep cycles. The sleep diary might help you see relationships between napping and sleeping at night or the consistency of bed- and nap times. If your child has challenging behavior related to going to bed; you can also write down information that describes the behavior challenges and how you responded. This behavior log could provide you with information about when behavior challenges are likely to occur and what you or others might be doing to rein-force (i.e., pay off) the behaviors. This will help you get a clearer picture of what works and doesn’t work in helping your child fall asleep and sleep well.

Look for the signs of sleepiness.

There are always signs that your child is getting tired. Think about how your child shows you that she is getting tired. Share these observations with others who help put her to sleep. When your child is sleepy, you should assist him in taking a nap or at bedtime. Signs of sleepiness in infants and toddlers might include yawning, difficulty focusing, turning her face away from objects or people, rubbing her eyes or nose or pulling her ears, falling down or having difficulty pulling to a stand, and losing interest in play. A sleepy baby might arch her back and lean backwards when you hold her. A preschooler might also show the same signs or might have trouble playing with others, complain of a tummy ache, refuse to follow directions or eat, or become aggressive with others (e.g., pushing, hitting, biting, etc.).

For a young child, there really are monsters in the room. Your child might tell you he is scared or he might not yet be able to tell you this. See your child’s room as a two year old or a four year old does.

Talk with your child about his fears.

In the darkness of his room, shadows of toys or furniture might seem frightening. If your child expresses fear, let your child know that you understand his fears (e.g, "you are feeling scared.") and then provide reassurance or comfort (e.g., "That is your toy box making a scary shadow, let me move it so it won’t look like a ghost."). Then provide her with a soft toy to hug and other calming activities and/or items suggested earlier. Relock the window, pull down the shade or pull the curtains shut. Check in the closet and under the bed. If your child is afraid of the dark, put a dimmer switch on the light. Start with the light on and gradually dim the light over several weeks. Let your child know that you are nearby and that you will make sure she is safe. Your child might need to know where you will be when she is sleeping, even if you need to use a photo/picture. If you need to remain in the room for your child’s safety, keep the light off or dimmed, remain quiet, and avoid interaction.

Tip: Some children become more active when they are tired in an effort to stay awake. Your child might just get “grumpy.”
If your child cries or gets out of bed, be supportive and let her know you understand her fears. You might say, “I miss you, too. I’ll be in the living room. You’ll be fine. We’ll have fun in the morning.” Calmly return her to bed, make sure that she still has her calming items, reassure her, kiss her good-night, and leave the room.

**Tip:** Celebrate the little successes along the way!

You might say, “You are getting to be such a big girl, sleeping in your bed with your teddy.” Your child’s restful sleep makes for a restful you. Then you are both ready for shared days of family fun and learning.

In closing, please remember that the team of professionals that support you and your child will have additional specific ideas about how to help your child. Don’t forget to ask them! Your child’s speech therapist, physical therapist, teacher, or other professional should be able to help you think about the best way to support your child within daily routines and community activities. If your child is having persistent challenging behavior within this activity, you should ask the professionals who work with you to help develop a behavior support plan that will provide more specific strategies to prevent challenging behavior and help your child develop new social and communication skills.

### Is my child getting enough sleep?

<table>
<thead>
<tr>
<th>Age</th>
<th>Nighttime</th>
<th>Daytime</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 – 3 Months</td>
<td>8½ hrs - 10 hours</td>
<td>3 naps (total of 5 – 7 more hours)</td>
</tr>
<tr>
<td>6 – 9 months</td>
<td>11 hours</td>
<td>2 naps (total of 3 – 3.5 hours)</td>
</tr>
<tr>
<td>12 – 18 months</td>
<td>11¼ hours</td>
<td>1 or 2 naps (total of 2 – 2.5 hours)</td>
</tr>
<tr>
<td>2 years</td>
<td>11 hours</td>
<td>1 nap (90 minutes – 2 hours)</td>
</tr>
<tr>
<td>3 years</td>
<td>10½ hours</td>
<td>1 nap (90 minutes – 2 hours)</td>
</tr>
</tbody>
</table>

* Your child will probably transition out of naps between 2-5 years of age.
Make sure your child gets plenty of exercise during the day.

Develop regular times for bed and naps and stick with them.

Develop a bedtime and naptime routine.
- Do and say the same things before naps and bedtime.
- Establish a predictable place for sleeping.
- Help your child understand the steps in the routines (e.g., use “first, then” statements, picture schedule).
- Tell your child what might happen when she wakes up.
- Let your child carry a favorite transition object to bed.
- Provide your child with calming and rest inducing activities, sounds, or objects in the routine.
- Put your baby or child down for sleep while she is still awake. Say, “Good night.” and leave the room.

Give your child your undivided and unrushed attention.

Avoid certain foods and drinks six hours before sleep (i.e., sodas, chocolate, fatty foods).

Try breast feeding or offering a warm bottle just before bed.

Provide choices whenever possible.

Reduce noise, light, and distractions in and near your child’s room.

Keep a sleep diary so you will know what’s working (or not).

Celebrate the little successes along the way.