

## **Sleep Routines and Young Children with ASD**

Families are often used to their young babies not going to sleep or maintaining sleep throughout the night and although it is hard for everyone, there is an acceptance that this is part of the 'baby years' and will pass.

However, if this pattern continues past the age of two years, parents' patience and own coping skills are greatly stretched through lack of their own sleep as well.

For a young child with autism, forming a good sleep pattern naturally or maintaining sleep throughout the night, is often a difficulty and causes families great distress and feelings of helplessness. The children seem to have a different set of sleep needs and it often seems to be difficult for them to recognise when they are tired and need to go to bed.

Here are some of the sleep issues which children with ASD may have:

- Accepting a bed-time routine and going off to bed at an acceptable time
- Staying upstairs
- Recognising when they are tired in the evening but happy to sleep in the day-time
- Poor sleep maintenance due to the metabolic differences in their body
- Relaxing when in their bed
- Falling asleep in bed
- Going back to sleep if they have woken in the night and going back to sleep in their own bed
- Being on their own in the bedroom and wanting someone (quite often the same person) with them all the time
- Feeling rested after a period of sleep
- No awareness of dangerous, noisy, disruptive and unhygienic behaviour at night-time

Sleeping problems for young children with asd can be traced back to the general difficulties associated with the disorder:

### **Social Interaction**

- Not appreciating the distress of others when keeping them up all night
- Not reading others body language of tiredness and upset
- Little understanding of pleasing you or warming to verbal praise
- No notice that everyone else in the house has gone to bed

## **Communication**

- Possibly not understanding instructions for bed or not listening to requests to get ready for it
- Not being able to tell others about levels of tiredness
- Not being able to say, 'I'm tired....Please can I go to bed

## **Flexibility of Thinking**

- Continuing with the inflexible behaviour that they have learnt and unwilling to change their ideas of when and where to go to bed
- Preoccupied with playing in a very self-absorbed way which might reduce ability to 'wind down' as night time approaches
- Resisting changing from play to bed-time etc
- Refusing to undress or get dressed
- Unwilling to let anyone else put them to bed other than a favoured few
- May have strict and repetitive bed-time rituals

## **Sensory Issues**

- Hyper or hypo reactions to the dark or to feeling hot or cold
- Not tolerating bed-clothes over their bodies
- Over-reactions to lying down or being 'swaddled'
- Needing to get up and run around

## **Ways to Help**

- Keep a sleep diary to work out a pattern in your child's sleep and waking hours
- Making a note of food your child eats during the day to inform us about possible contributors to their levels of hyper-activity
- Trying to provide a cosy, warm and welcoming bed and bedroom for your child
- Totally darkening the room with blackout curtains
- 'Marking' the boundaries of sleep by providing a consistent evening and bed-time routine to help your child 'wind-down' (keeping the house quiet at this time often helps)
- Having the determination and confidence to repeatedly take your child back up to the bedroom, with very little eye contact and few key words
- Everybody using the same approach with the same phrases to help your child go back to bed or try to sleep – alternate with your partner, if possible
- Slowly adjust your child's bed-time towards an appropriate and realistic time when they might fall asleep. If your child is not asleep after 15minutes, move it later again and try another time. But remember, small steps over time may help

- Keeping your child warm and snuggled throughout the night
- Helping them to understand what is going to happen at bed-time by providing a pictorial 'sleep' timetable
- Making sure that your child feels tired by the time bed-time comes around by having periods of physical activity during the day
- Working towards independence with your child falling asleep on their own instead of wanting mum or dad to be with them all the time (gradual process)
- Combining plans with medication (on advice of your doctor or paediatrician)
- Your child's bedroom should be a relaxed place for sleeping and not for playing in at night-time, so it may be necessary to remove or put away toys.
- Your child's bed should only be a signal for sleep (so is it used for anything else such as watching TV or eating or play fighting?)
- Try to select a bed-time when your child is able to fall asleep with as little difficulty as possible
- Deciding whether it would be beneficial to leave your child to cry (on a gradual basis).