

The background is a light blue gradient with several realistic water droplets of various sizes scattered across it. The droplets have highlights and shadows, giving them a three-dimensional appearance. The text is centered in the middle of the image.

CHILD SLEEP WORKSHOP

Why it is important for us to know about sleep...

The literature and research on child sleep links a lack of sleep or reduced sleep to so many outcomes...

Attention regulation

Cognitive development

Emotional problems

Poor recall

Decreased motivation

Anxiety

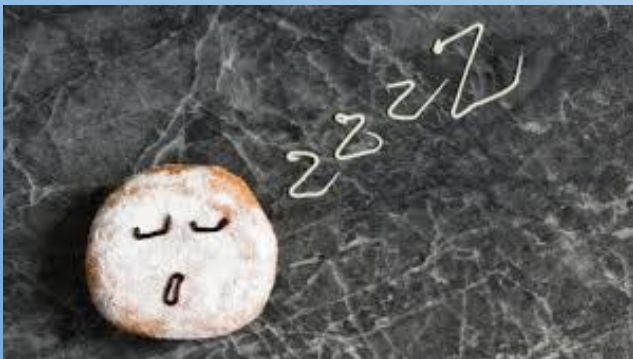
Lower academic attainment

Links to obesity

Behavioural difficulties

Depressive symptoms

Impacts on memory and retention





HYPNOGRAM

Natural night wakings occur regularly throughout the night. Sleep Onset Association Disorder occurs when certain conditions are put in place at bedtime to aid the falling asleep process, and therefore need to be repeated in the night when these wakings occur.



Memory consolidation occurs. Sleep spindles and K-complexes occur.

Night Terrors, Confusional Arousals, Sleep Walking, Sleep Talking etc occur as we transition from NREM3 & 4 into lighter sleep NREM2.

The majority of NREM 3 & 4 sleep occurs in the first few hours of the night. Also known as Slow Wave Sleep or Deep Sleep. Growth hormone is released, tissue repairs takes place and memories are transferred from the hypothalamus and the frontal cortex.

REM is where emotional dreaming occurs. Memory consolidation occurs. Sleep Disordered Breathing is most likely to occur. Infants spend up to 50% of sleep in REM. This is where synaptogenesis occurs.

4 year olds?



7 year olds?

HOW MUCH SLEEP SHOULD CHILDREN BE GETTING?

National Sleep Foundation:

70% of parents think their child gets enough sleep, however it is less than 25%!

Age	NHS sleep duration recommendation
2 years	Daytime: 1 hr 30 minutes Nighttime: 11 hrs 30 minutes
3 years	Daytime 0-45 mins Nighttime: 11 hrs 30 minutes
4 years	11 hrs 30 minutes
5 years	11 hrs
6 years	10 hrs 45 minutes
7 years	10 hrs 30 minutes
8 years	10 hrs 15 minutes
9 years	10 hrs
10 years	9 hrs 45 minutes
11 years	9 hrs 30 minutes
12 years	9 hrs 15 minutes
13 years	9 hrs 15 minutes
14 years	9 hrs
15 years	9 hrs
16 years	9 hrs

BLUE LIGHT

Directly suppresses
melatonin secretion

Impacts cognitive
functioning

Impacts alertness the
next day



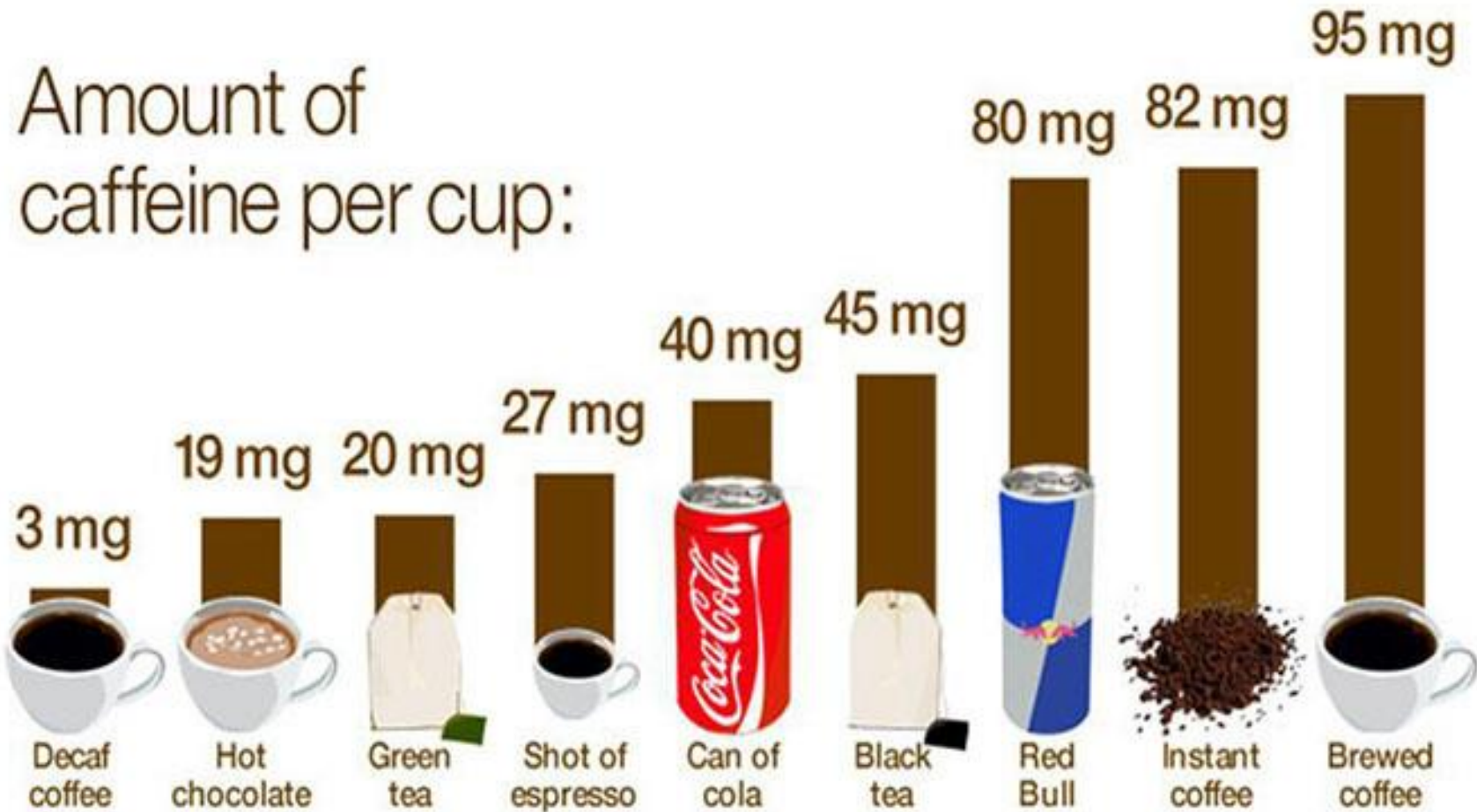
Impacts circadian rhythm

Blue LED lights are twice
as powerful on melatonin
suppression compared to
yellow lights

A study comparing
reading a book and a
book on an Ipad, led to
50% decrease of
melatonin secretion

Reduces time in REM sleep

HOW MUCH CAFFEINE?





INSOMNIA



18.3
degrees



To successfully initiate sleep your body needs to decrease in temperature by 1 degrees Celsius. Explains why it is easier to sleep in a room that is too cold over too hot

Decrease in temperature is detected by cells in the hypothalamus which delivers messages to the suprachiasmatic nucleus which releases melatonin. BATHS!

BEDTIME ROUTINES

WHY ARE THEY IMPORTANT?

ROUTINE IS **PREDICTABLE**

- TELLS THE BODY TO BE READY TO SLEEP.
- HELPS CHILDREN FEEL SECURE.
- HELPS CHILDREN KNOW WHAT TO EXPECT AND WHAT WE EXPECT FROM THEM.
- REDUCES THE NEED TO NEGOTIATE OR BATTLE ABOUT BEDTIME.
- A BEDTIME ROUTINE ALSO HELPS CHILDREN LEARN TO FOLLOW RULES AND ROUTINES AND UNDERSTAND THAT PARENTS HAVE AUTHORITY.





A GOOD BEDTIME ROUTINE IS

- CALM AND QUIET
- SIMPLE AND STRAIGHTFORWARD
- EASY TO REPRODUCE WHEREVER YOU ARE
(HOLIDAYS, GRANDPARENTS ETC)



EXAMPLE OF A GOOD ROUTINE

DINNER
QUIET PLAY

BATH
STORY
BED



A GOOD BEDTIME ROUTINE WILL BE 20-30 MINUTES LONG.





SLEEP HYGIENE **BASICS**



TRY NOT TO

- WATCH TV (OR OTHER SCREENS) FOR 1 HOUR BEFORE BED
- DO STIMULATING ACTIVITIES BEFORE BED
- EXERCISE BEFORE BED
- GO TO BED HUNGRY
- HAVE A LARGE MEAL BEFORE BED
- CONSUME CAFFEINE AFTER 2PM



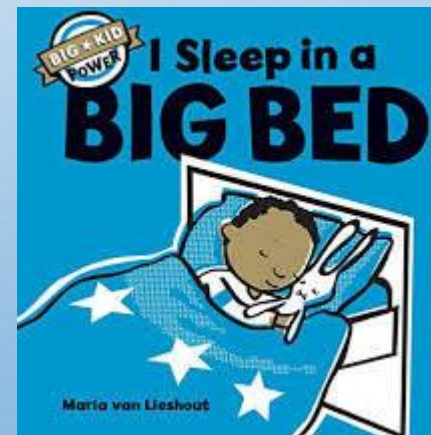
DO

- KEEP BEDTIME AND GET UP TIME THE SAME EVERY DAY (INCLUDING WEEKENDS)
- GET REGULAR EXERCISE (NOT TOO CLOSE TO BEDTIME)
- GET REGULAR EXPOSURE TO DAYLIGHT (ESPECIALLY FIRST THING IN THE MORNING)
- KEEP BEDROOM TEMPERATURE COOL
- KEEP THE BEDROOM DARK
- KEEP THE ROOM AS QUIET AS POSSIBLE
- USE THE BEDROOM OR BED FOR SLEEP ONLY



TOOLS TO SUPPORT BEHAVIOURAL INTERVENTIONS

- VISUAL TIMETABLE
- BEDTIME PASS
- REWARD CHARTS
- NIGHT LIGHT + TIMER
- SOCIAL STORIES
- BIBLIOTHERAPY - using books as therapy



IF YOUR CHILD CAN'T SETTLE BY THEMSELVES:

- WE ALL WAKE SEVERAL TIMES IN THE NIGHT.
- WE ALL HAVE SLEEP ASSOCIATIONS.
- CHILDREN MAY DEVELOP UNHELPFUL OR UNSUSTAINABLE SLEEP ASSOCIATIONS E.G. PARENT ROCKING TO SLEEP.
- IF A CHILD NEEDS HELP SETTLING TO SLEEP AT THE BEGINNING OF THE NIGHT, THEY WILL ALSO NEED HELP SETTLING TO SLEEP WHEN THEY WAKE UP BETWEEN SLEEP CYCLES.



THERE ARE SEVERAL WAYS TO HELP CHILDREN LEARN TO SETTLE THEMSELVES TO SLEEP. THE MAIN APPROACHES ARE:

- EXTINCTION / 'CRY IT OUT'
- QUICK RETURN / 'CONTROLLED CRYING'
- GRADUAL RETREAT
- SLEEP RESTRICTION AND STIMULUS CONTROL
- MANAGEMENT OF ANXIETIES RELATING TO SLEEP



THE BEST APPROACH IS THE ONE THAT YOU ARE HAPPY TO DO AND THAT SUITS YOUR PARENTING STYLE.

EARLY RISERS – IF YOUR CHILD WAKES UP TOO EARLY:

- ANYTHING PRE 6AM IS NIGHT TIME!!
- COMMON ISSUE IN YOUNGER CHILDREN AND LINK WITH AUTISM.
- MORE DIFFICULT TO RESOLVE AS CHILDREN'S BATTERIES ARE PARTIALLY RECHARGED

Things to try:

- CHECK EATING HABITS – ARE THEY HAVING LARGE MEAL AT 3-4PM AND WAKING HUNGRY? TRY A SMALL SUPPER BEFORE BED.
- IF CHILD OPENING BOWELS IN MORNING, TRY HIGH FIBRE DIET IN MORNING, LOW FIBRE IN EVENING.
- CHECK TEMPERATURE – AT 4AM BODY IS THE LOWEST TEMPERATURE – ARE THEY COLD?
- CONSIDER LIGHTING LEVELS IN SUMMER BLACK OUT BLIND?
- CHECK CHILD IS NOT NAPPING ON WAY HOME FROM SCHOOL



If you can't teach them to sleep longer, teach them to be self-contained:

USE:

- VISUAL CUES FOR DAY/NIGHT E.G. GRO CLOCK CHANGES COLOUR SO THEY DON'T KEEP ASKING!
- REWARD SYSTEM



More tips:

- TRY SETTING THE VISUAL CLOCK FOR THEIR WAKE UP TIME, E.G. 5AM. EVERY FEW DAYS, MOVE THIS TIME FORWARD 15 MINUTE INCREMENTS SO THEY SLEEP LONGER.
- START THE DAY DOWNSTAIRS – NOT IN PARENTS BED (!)
- AVOID REWARDING WITH TV / IPAD

FURTHER INFORMATION AND SUPPORT:



- THE SLEEP CHARITY- A NATIONAL CHARITY SUPPORTING CHILD SLEEP ISSUES

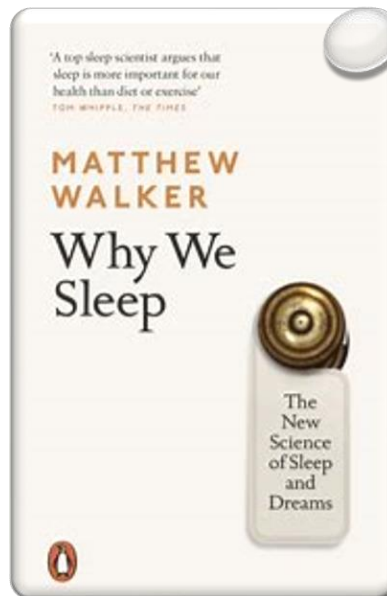
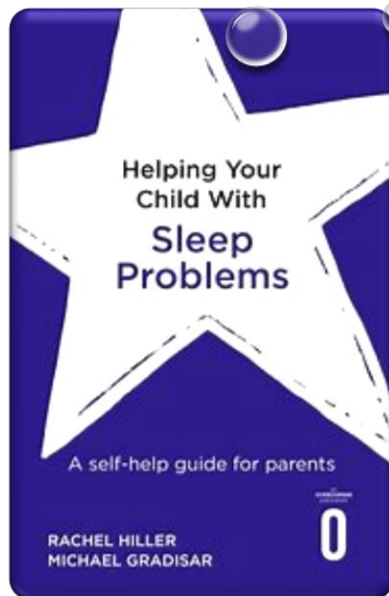
PRACTICAL ADVICE AND SUPPORT TO HELP WITH SLEEP

NELFT NHS FOUNDATION TRUST - <https://www.nelft.nhs.uk/download.cfm?ver=8821>



- NATIONAL SLEEP HELPLINE – (7-9PM OFFERING PRACTICAL STRATEGIES) 03303 530541
- SLEEP PODCAST BY MURDOCH CHILDREN'S RESEARCH INSTITUTE

<https://www.plymouthhospitals.nhs.uk> - Sleep and anxiety feeling safe and secure at bedtime



BOOKS TO RECOMMEND