



SLEEP

PROLEGOMENON:

Ah Sleep!: One of life's great pleasures and one of life's great challenges.

Sleep problems with children are one of the most common complaints of parents. No parent can survive childhood without at some point suffering from issues related to sleep. Parents and young children almost without exception sleep too little.

And even when parents are getting as much sleep as they want, invariably it is at a cost of allowing their children to get less sleep than they need. Indeed, even if the parents ultimately get the sleep that they need, it comes at the price that they are getting less life than they should. Because they are struggling with getting their children to bed as opposed to talking or spending time with their spouse or enhancing their own life (by reading, etc.).....

Yes, in general we are either not sleeping enough or we are spending way too much time on getting everybody to sleep enough.

Enough already!!

Sleep should be natural. Sleep should be welcome. Sleeping should not be a hassle. And if it is, then that is a problem that needs to be solved. We either need to sleep more or spend less time getting kids to sleep.

First of all let us say that we routinely deal with sleep problems that generally have long histories. They are not easily solved and usually our parents have tried all the standard recipes and they have not worked. We have therefore evolved a set of techniques that we will share with you that have been developed to deal with extremely difficult cases. Because these techniques work well in these cases, we are utterly confident that they will work in less difficult ones. But that is not to say that these techniques are the only ones that can work. Every child is different and every family is different. You may have developed your own approach that works well for you. If so, go with it! Our only caution is that you should make sure that your approach results in more sleep for you and for your child and that over time your child is doing more and you are doing less. If you meet these four criteria, then you are doing the right things and you do not need to read this book.

WHY WE CARE ABOUT SLEEP:

Sleep deprivation is probably the single greatest health problem in the world. Yet it is a hidden problem. Everyone knows about Cancer and Aids and Heart Disease which are scourges on humankind. But we often ignore the insidious almost "mosquito-like" annoyance of sleep deprivation. But sleep deprivation is a very serious health problem. Both parents and children are not sleeping enough today and there are grave long-term consequences of this. Every night you or your child are deprived of sleep that your body would normally need, you incur a "sleep debt." The collective sleep debt of the world dwarfs the National Debt. This sleep debt will ultimately be paid. It is paid everyday in lost productivity, motor vehicle accidents, fights with bosses, spouses, children and in a million other ways. The pervasive effect of sleep loss is incalculable.

Let us give you one telling example. Twice a year in the United States, we start or stop what is called

“Daylight Savings Time.” With respect to sleep, the effect of this governmental change is that in the Fall we “gain” an hour of sleep on Sunday and in Spring we “lose” an hour of sleep. If you look at the incidence of highway accidents on the Monday following the change in Daylight Saving, there is a 7% increase in accidents on the Monday following the Sunday when we lose an hour of sleep, and there is a corresponding 7% decrease in the accident rate on the Monday following the Sunday when we gain an hour of sleep. Simply altering sleep by one hour has a dramatic effect on such fundamental variables as highway fatalities. Indeed, it is estimated by experts that sleep deprivation by even one hour can have the same physiologic effect as being under the influence of alcohol. Imagine a situation where both parent and child are getting far less sleep than they need. Everyone - including society - suffers.

THE ANATOMY OF SLEEP PROBLEMS:

There are two basic sleep problems which can be summarized simply as: getting to sleep and staying asleep.

GETTING TO SLEEP:

All children will ultimately put themselves to sleep. No matter how much they might fight it, they will ultimately fall asleep. The problem is that they might not be ready to wake up when they have to. In this respect, many getting to sleep problems can be thought of as “time-zone” problems. You as the parent might live in New York and be on EST, but your child wants to live in Los Angeles and when you want to go to bed, your child wants to party and you don’t want to be invited. Breakfast is going to be trouble.

STAYING ASLEEP:

Time zones however go in both directions, and there are children who fall asleep when they hear the evening news, but then wake up with the bakers of the world at 4 am. We don’t care how cute children can be (and they can be way cute) no child is cute at 4 in the morning.

These are the simplest sleep problems to solve: “Time-zone problems.” Your child is “living” in a different time-zone than you are. The task is to move your child into your time-zone. And by the way, guess what? You determine the time-zone of your children, they don’t!

GETTING TO SLEEP:

Before you can start working on getting your child to sleep, you need to determine how much sleep she needs. There are two simple rules: Rule #1: If you have to wake your child up, then she is not getting enough sleep and; Rule #2: if your child falls asleep in less than 5-10 minutes, then she is not getting enough sleep. That being said, there are rough guideline by age. But guidelines are very crude estimates. All children are different and have very different neuro-chemistries. We therefore prefer the behavioral guidelines of waking naturally and falling asleep naturally in a reasonable time-frame as they control for individual differences.

GUIDELINES:

0-1 Month: 16-17 hours (Approximately 90 minutes sleep-wake cycle; 50% REM sleep: little distinction between night and day)

1-4 Months: Start of 4 hour sleep/wake cycle

4-12 Months 13-16 hours

1-3 years 13-14 hours

3-6 years 12-13 hours sleep

6-12 years 10-11 hours

12-18 years 10 -11 hours (yes! 10 to 11 hours!)

adult: Approx 8 hours sleep (24 hr circadian rhythm)

This chart is a very crude guideline since all children have their own biological clocks and metabolisms. They can't read this chart! The best way to determine your child's sleep needs is to see how much they sleep when they are not awakened (like during a week-long vacation.). If they finally get to sleep (after a long struggle) at 10 pm and then sleep till 9am for several days, then you can reasonably assume that all other things being equal, they need about 11 hours of sleep. If they need to get up at 7am for school than they need to be asleep by 8pm. This means that you have to start getting them to bed by 7:30pm at the latest. If you do not do this, the children will start to accumulate a sleep debt that will increase all week long. They will not get the sleep they need and everyone's life will be more stressful and less enjoyable. We cannot stress enough how important it is to have good "sleep hygiene." When everyone is sleeping enough, many behavior problems disappear.

Indeed, often many ADHD symptoms disappear or are at least greatly reduced when sleep problems are solved. SO what appears to many parents and professionals as a neurological disorder, is really a behavioral disorder tied to lack of sleep.

So now let us assume that you have established that your child needs to fall asleep by 8:30 pm. The absolute worst time to start working on this problem is at 8:20 pm. Getting a child to sleep is a process, it is not a single event. Think of it as preparing a family meal (and we don't mean delivered pizza!). In preparing a family meal, you have to select ingredients, prepare them in advance, mix them together, set the table and serve. Getting a young child to bed is in a sense, not too different from this.

Here is one recipe that you can use to serve up a quiet good-night:

Step 1: Determine what time your child should be ASLEEP (not put to bed)!

Step 2: Start the sleep process at least 30-45 minutes prior to "sleep time."

Step 3: Establish a routine that you will follow every night.

Step 4: Stack the deck in your favor. No chocolate or any caffeinated drinks or food. Drastically reduce liquids at least an hour before starting the going to bed routine.

Step 5: Calm your child down a least a half-hour before sleep. No Pillow fights!!!

Step 6: Routinize the bathing, teeth and toileting.

Step 7: Have some private nurturant time with your child.

Step 8: Tuck your child in, read her a story, sit with her briefly, kiss her goodnight and then leave BEFORE she falls asleep. Do NOT sit or lie with her until she falls asleep. This way you are teaching her that she

needs YOU to fall asleep. We need to teach her that she needs herself to fall asleep.

Step 9: Leave a night-light or very weak light in her room that does not compete with sleep. The eyes are very sensitive to light even when they are closed. There are studies that show that even the glow from clock radios disrupts the onset of sleep.

Step 10: Tell her that you will keep the door to her room slightly ajar SO LONG AS SHE STAYS IN HER BED. If she comes out of her room, you will escort her back to bed and then CLOSE THE DOOR. Repeat this process all night long until she is quiet for at least a minute, then open the door slightly (like when you started). If that sets her off again, immediately close the door again and repeat. You may have to get a small lock (hook and eye) or door knob sleeve.

Step 11: Go on with your own life.

STAYING ASLEEP:

Getting kids to fall asleep can be a challenge for many families but even when it is not, there is another sleep-related problem that all parents sooner or later will face. We like to call it the “SNEAK ATTACK.” This is when you suddenly find your child sleeping peacefully in your bed or at least trying to.

If you ask any young child where he or she would rather sleep, they will invariably choose the parental bed. Kids are like cats, they will always prefer the warmth and comfort of the parental bed. Our suggestion: don't ask. Rather tell them that they can't.

How to deal with your child who infiltrates the parental bed:

Two Cases:

- 1) You know they are coming
- 2) You are asleep when they arrive

Before we address how we would deal with these cases let us preface this by saying that there are some circumstances which REQUIRE the parents to respond to their children's distress. These cases are those that are out of the ordinary: prompted by illness, nightmares, severe storms, unusual events that disrupt sleep (doorbells, alarms, telephone calls, etc.). In such cases, the job of the parent is to offer relief from stress and succor. Nurturance in these cases take precedence over behavior management.

Now let's consider the case where you know your child is trying to get in bed:

If your child intrudes into your bedroom, then you need to follow the protocol we presented earlier. As a robot, accompany your child back to his/her room. Say nothing other than, “you have to sleep in your bed, not our bed.” Tuck your child in (no kisses!) And then leave. If your child protests, ignore the protests so long as they do not go to the point of leaving the room. If he/she leaves the room, refer to Step 9 above.

If you are usually asleep, then you need to lock YOUR door, so that your child will wake you by trying to get in. When they wake you, refer to the protocol above.

THE CHILD WHO NEEDS LESS SLEEP:

What about me? My child only needs 6 or less hours of sleep!!

Children who need less sleep than their parents are the toughest cases of all. Here it is not a time-zone problem, it is a sleep-need problem. You need more sleep than your child.

But before you conclude that you have a sleep-need discrepancy, you need to make sure that your child is not compensating for less sleep by more “hidden sleep” i.e., naps. You need to absolutely determine what the sleep need of your child is once you have put all the behavioral controls in place.

Let us assume that you have done everything right, and you still have problems. In that case you need to make a decision about when you want to sleep and when you want to parent. Parents in these cases are often forced to choose between evening time alone or morning time alone. If your child is going to sleep, 6 hours, then you need to choose which 6 hours they are going to sleep. Next you have to teach them what to do when you want to sleep. But that is not sleep-training, that is free-time or independent play training which we will address in another paper.

-Sheldon Wagner