Supporting sleep for children on the autistic spectrum



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Many children with autism experience poor sleep patterns, which can impact on their behaviour and educational achievement, as well as the sleep patterns of their parents and siblings.

Sleep diary

Keep a diary of your child's sleep patterns i.e. when do they sleep and for how long. Also pay attention to the following areas:

- When they fall asleep on their own what is the environment like?
- What activities did they do prior to falling asleep? (e.g. are they more likely to sleep after physical exercise, eating etc.)
- If they wake up throughout the night how many times and have you successfully soothed them back to sleep? If so, how did you do this?

A sleep diary can be shown to health professionals to help them understand the impact of the sleep deprivation, so that they can provide you with specific strategies. It can also be used to support applications for Disability Living Allowance.

The diary can also be used to chart any progress in your child's sleep patterns. Record progress, no matter how small as it will help you see the small steps your child has made.

Settling / relaxation techniques

- A warm bath before bedtime, followed by a massage in bed can signal to the body and brain that sleep is approaching. If your child does not like physical contact, then consider alternative relaxation techniques.
- 2. Is your child soothed by a particular smell? Try Lavender oil to see if this has an impact.
- 3. Ensure the rest of the house is also calm and quiet, to avoid any distractions and to embed the understanding of night / sleep time across the household.
- 4. Have an established 'chat' time where they can tell you about their day in bed, and ensure you give them enough time for this if they are developmentally ready.
- 5. Verbally remind your child that it is time to slow down and that it is time for their eyes to close, and for their body to rest. (Some children cannot understand the need for sleep, and do not recognize the signs their body sends to them that rest is needed; so, replace this with verbal cues and reminders.)

Transitions – moving from one activity / area to another

It can be difficult to wind down at the end of the day, and children with autism may struggle to flip from a busy active brain, to one that needs to be quieter in order to sleep. The child will also be processing all the sensory experiences around them, so consider the following activities:

 Reduce activities as bedtime draws near; do so at least an hour before you intend to go to the bedroom. These should be calming activities like reading a story and do so in a soothing



and quiet voice.

Have soothing activities that are only done in the bedroom; ensure the child enjoys them so
they are used as a tool to encourage the child into their room (e.g. listening to a particular
audio book, particular story etc.).

Environment

- Minimising distractions and or activities that are present in the child's bedroom; e.g. screens of any kind, music, lots of posters on the wall.
- Think about the colours of the bedroom paint; warm, soft hues and neutral colours will impact more positively and help calm. Avoid bight and garish colours like the primary colours (red, yellow and blue). If these do happen to be your child's favourite colour, ensure that you pick a hue that is softer and more muted.
- Use plain curtains with a soft hue and avoid busy patterns that will draw the eye and stimulate the brain.
- Ensure all bedsheets, cushions and duvets are in a texture that the child responds positively to. Any scratchy or itchy materials will be uncomfortable and cause a distraction.
- For children who have no awareness of danger, or require constant supervision throughout the night you may want to consider a 'safe space' this is a secure and comfortable sleeping area designed specifically for children with complex special needs (See website list for more details.)

Diet

- Ensure your child does not have any caffeinated drinks (cola, coffee-based drinks etc.) at least 6 hours before bedtime. (It takes 6 hours for caffeine to exit the body once consumed)
- Do not feed the child any drinks, snacks or food that have high sugar or additive content at least 2-4 hours before bedtime. (Sugar is processed in an adult's body after 2 hours)
- If this is currently part of the child's routine, start removing them slowly and gradually from their diet. Do not remove all at once as this will be a major change to the routine, which your child may find difficult.

Routine

Once you have found a routine that works, stick to it rigidly and follow it every night, as any change from the routine could increase your child's anxiety. Routines can make children feel safe and secure, as they know what comes next and there are no surprises for them. Keep them as simple and as basic as possible. These can be supported by:



- Visual timetables that remind the child of the steps of the bedtime routine. For children under 5 you should be using photographs of the actual item/room etc. or the actual objects of reference (e.g. toothbrush for brushing teeth, blanket or pillow to indicate bed.) Verbal instructions should be given at the same time.
- Extend the visual timetable to include the activities prior to the bedtime routine e.g. dinner, television time. Ensure you are consistent and have dinner at the same time each night.
- Consider introducing a 'calm down session' downstairs, so that your child is calm and ready
 for the bedtime routine. Introduce a small tent where the child can go into to start to calm
 down, which has limited resources but includes ones that soothe (e.g. teddies, materials
 with soft sensory experiences).
- Count down the different steps of the bedtime routine so your child knows how long they have for each stage.
- Remind your child throughout that it is time for sleep; their brains may not recognize the
 signs of tiredness or understand the need for sleep so remind them. Some adults with
 autism have reported that they find sleep a scary place, full of darkness. Reassure them
 verbally that sleep helps the body heal and grow, and that morning always follows night

Co-sleeping

It can be tempting to have your child sleep in your bed so that you can soothe them back to sleep when they wake throughout the night. However, the long-term impact on your own sleep, and the relationships between the adults in the family can be affected by co-sleeping.

- If your child is encouraged to sleep through physical contact and cuddling, start by sleeping in their bed. You can then start to gradually move away; sitting on the bed, sleeping besides the bed on a chair, sleeping on a mattress on the floor, moving the mattress to the door, then the corridor etc. How slowly you do this will be dependent on your child. Constantly reassure them that you are there and be cautious about returning to your own bed if your child is used to you being there when they wake, as this may cause anxiety.
- You will need to teach your child to understand that whilst you will not physically be in their room, you are available for them.
- If your child responds to weighted blankets (the constriction can be comforting for some children) consider introducing one.



Useful resources

- Snuggle Sac (opens in new window)
- The Childrens Sleep Charity (opens in new window)
- Living Autism (opens in new window)
- Together Trust (opens in new window)
- Safe space bedrooms (opens in new window)
- Weighted blankets (opens in new window):
- <u>Tuck Sleep (opens in new window)</u> aims to improve sleep hygiene and health, wellness through the creation and dissemination of comprehensive and unbiased free resources:

