Sleep

What Is Considered Typical?
The amount of sleep each child needs varies, but a child who is happy and healthy is most likely getting enough sleep—even if the amount is different from what is considered normal (see box). For parents, the key is to be able to recognize how much sleep their child needs. A lack of sleep can interfere with a child’s behavior and their ability to learn and play. It can also increase their chance of becoming ill.

Routines and Napping
It’s a good idea to have a routine for sleep times. And it’s good to have different routines for nap time and bedtime. For example, a bath and two stories means bedtime, but quiet music and one story means nap time.

Napping improves a child’s focus, concentration, and ability to learn. When children are tired, they become irritable, yawn, rub their eyes, and/or have trouble concentrating. Try to offer the chance to sleep before the child becomes too tired. Children who are overtired often have a harder time settling down.

As children grow, their need for sleep, especially naps, changes. Some children need to sleep for an hour or two, but others don’t need a nap. Even if a child doesn’t nap, they may still need a rest time. Cuddling, reading, or playing quietly are good ways to provide a restful atmosphere.

Crying and Fussing
All children stir, fuss, or cry while sleeping. Sometimes it means the child is going through a typical sleep cycle, but it may mean the child needs attention. Some parents let their child cry, some rub their child’s back, and others rock their child back to sleep. Whatever method is used, it should be one that lets the child know they are safe, secure, and well cared for.

Most children develop good sleep patterns around 1 year, but this is also when they begin to test limits. Your child may let you know that they have their own ideas about when and where they should sleep. And by this age they are usually able to get out of bed. This is age-appropriate behavior, but it often leads to power struggles. To avoid struggles, keep to a routine but adapt it when necessary. Try having your child listen to a story on tape or CD, or tell them you will check on them in five minutes.

Are There Times to Be Concerned?
If you have concerns about your child’s sleep, discuss them with your child’s doctor who can check for problems like colds, allergies, and teething pain. If a physical problem isn’t the cause, your doctor may refer you to a mental health professional who can explore other causes.

Average Sleep Need

<table>
<thead>
<tr>
<th>Age</th>
<th>Hours a Day</th>
</tr>
</thead>
<tbody>
<tr>
<td>Birth – 3 months</td>
<td>14 – 18</td>
</tr>
<tr>
<td>3 – 6 months</td>
<td>14 – 16</td>
</tr>
<tr>
<td>6 months – 2 years</td>
<td>12 – 14</td>
</tr>
<tr>
<td>2 years – 5 years</td>
<td>10 – 12</td>
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</tbody>
</table>

Nightmares and Toddlers
Nightmares can be related to something a child has experienced. Clowns can be terrifying and TV shows often show images that are hard for children to understand. If a child is startled by a nightmare, talk about it and help them understand how it made them feel. For a child who isn’t yet talking, simply offer comfort and reassurance.

Sleep Problems?
Consider These:
- Should the routine be longer or shorter?
- Is the routine calming? (Avoid active play).
- Is the room too cold or too warm? Too noisy? Too quiet? Too light? Too dark?
- Has the child had any food or drink that could keep them awake?
- Could a medication be causing jittery or irritable side effects?
- Does your child need to talk about their day or discuss any worries?