

SLEEP ISSUES

This fact sheet has been written by parent carers for parent carers



When you have a child with a disability or special needs, life can be very challenging. It is very common for children with some disabilities to also experience sleep issues – if you are sleep-deprived, daily life can feel twice as hard.

Lack of sleep makes people feel irritable, makes it harder to think straight and in children it can also be a factor in behavioural issues. Tackling your child's sleep issues will help all the family as life is much easier to cope with if you feel well rested.

Common sleep problems

Common sleep problems in children include difficulty settling, nightmares, bed-wetting, frequent night waking and early waking. In children with disabilities, these problems often last beyond the baby and toddler years and don't disappear without help of some sort.

Good sleep habits

It's important for all children to learn good sleep habits and get into a bedtime routine as soon as possible. Professionals call this 'good sleep hygiene'. You can get your child into a good routine by doing the following:

- have a regular bedtime.
- doing a simple bedtime routine such as: bath, story, brush teeth, bed.
- keeping the bedroom simple – for children with sleep issues it is best to put toys and other stimulating items away. Blackout curtains are also helpful.
- avoiding foods and drink containing caffeine, such as chocolate and cola.
- avoiding exciting activities just before bedtime.
- switching off electronic devices, such as TVs, computers, tablets, phones or MP3 players at least one hour before bedtime because the light from the screen can stop the body producing the sleep hormone melatonin, which tells the body it is time to sleep.
- having a warm bath as part of the bedtime routine as it makes the body temperature drop afterwards, which can make children feel sleepy.

Make sure though that you work out what is best for your child and your family. If your child has ADHD, they may need longer to 'wind down' and settle, which means they may go to sleep later.

At first, you may find it useful to keep a sleep diary to track your child's sleep patterns. Over the course of a few weeks, write down as much detail as you can about bedtimes, periods of sleep and wakefulness, as well as daytime factors such as computer use, food and drinks your child has consumed, what exercise they have done and what their bedtime routine has been. Often this can help you to work out what may be causing the sleep problems. even if you can't, it is a useful record to show any health professionals you work with.

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Sleep techniques

There are many different strategies that can be used to tackle sleep issues. Whatever approach you choose, consistency is key to ensuring they work, so before you embark on any new sleep techniques it is important to think about whether the methods you are considering feel manageable to all members of the family. Here are a few of the techniques to consider using:

- **day/night clocks** – can be used to help early wakers by showing if it is time to get up.
- **gradual withdrawal** – may be used for children who need a carer or particular object to get to sleep.
- **rewards** – can be used to encourage positive behaviour.
- **'robotic' parenting** – consider for dealing with reinforced waking. Gently return your child to bed, without talking or interacting with them. If they do not get attention, this may be enough to break the cycle of night-waking.
- **schedule waking** – useful for dealing with nightmares, night terrors or bed-wetting.

The most important thing to remember when using new sleep techniques is that you must have realistic expectations – things will improve in small steps over time.

Ask about

- **Amaze** – the **Special Educational Needs and Disability Information, Advice and Support Service (SENDIASS)** offers impartial, confidential advice on anything to do with special educational needs and disabilities for 0 to 25 year olds. Parents, carers, children and young people under 25 with SEND living in Brighton & Hove or East Sussex can use the service. Email sendiass@amazesussex.org.uk, call **01273 772289** or visit our website at <https://amazesussex.org.uk>
- **Seaside View Child Development Centre** – this is where many children are diagnosed and where health professionals such as paediatricians and therapists work together to support and treat your child. Assessments will usually be via a health or education professional but you can contact Seaside View directly on: **01273 265780**.
- **Melatonin** – for ongoing problems, a child may be prescribed medication such as the hormone melatonin to help them sleep. To find out more, speak directly to your paediatrician.

Further information and useful links

- **Cerebra** – runs a sleep service with one-to-one support, workshops and resources. Go to www.cerebra.org.uk, call their sleep administrator on: **01267 244120** or email: sleep@cerebra.org.uk.
- **Local Offer** – the local authority's online listing of all the services and support that are available to families with children with SEND in the area. Visit new.brighton-hove.gov.uk/special-educational-needs-and-disabilities
- **Scope** – www.scope.org.uk/support/families/sleep. call: **0808 800 3333** or email: response@scope.org.uk for information on their sleep services.
- **Sleep Better! A guide to improving sleep for children with special needs** by V. Mark Durand, Brookes Publishing (ISBN: 978-1598572940)
- **Young Minds** – has lots of useful information about sleep problems. See: www.youngminds.org.uk or call their parent helpline on: **0808 802 5544**.

