

Developing bedtime routines

Developing a specific bedtime routine can be beneficial in promoting good sleep. The routine should be predictable and relatively short (20 – 30 minutes).

Bedtime routines should be individualised based on how easy or hard a child finds an activity, whether it is stimulating or relaxing for them, and their preference for engaging in the activity.

To work out the best bedtime routine for your child you can:

1. List the activities that are included in their bedtime routine
2. Rank these in order of preference
3. Rate these as either easy (E) or hard (H)
4. Rate these as either stimulating (S) or relaxing (R)



For example:







Activities	Occurs	Is the activity easy (E) or hard (H)?	Is the activity stimulating (S) or relaxing (R)?	Rank in order of preference (1= highest)
Taking a bath	✓	E	R	7
Washing hair	✓	H	S	8
Changing into pyjamas	✓	E	R	5
Getting a drink	✓	E	R	4
Brushing teeth	✓	H	S	6
Using the toilet	✓	E	R	3
Singing quiet songs				
Reading				
Other:				
Playing with cars	✓	E	R	2
Watching the iPad	✓	E	S	1

Order	Activity	Easy (E) or hard (H)?	Stimulating (S) or relaxing (R)?
1	Brushing teeth	H	S
2	Playing with cars	E	R
3	Getting a drink	E	R
4	Taking a bath	E	R
5	Using the toilet	E	R
6	Changing into pyjamas	E	R

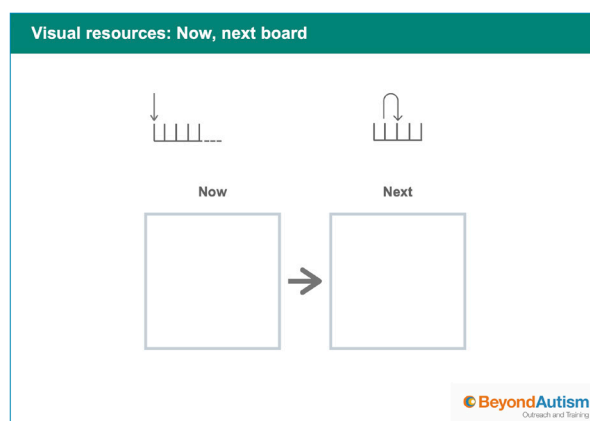
Supporting with hard but important tasks

Activities like brushing teeth or taking a bath may be harder but they are important in maintaining hygiene. In the previous example, brushing teeth is considered a hard activity.

You can schedule brushing teeth before playing with cars which is considered a more preferred activity. This can help to increase motivation to do the harder task, so the motivating activity must always follow the harder task. You can break this down away from the schedule using a now and next board as below:

1	 Brushing teeth
2	 Cars
3	 Drink
4	 Bathtime
5	 Toilet
6	 Pyjamas

You can then adapt the order of the activities to schedule hard and stimulating activities earlier in the evening, and easy and relaxing activities later in the evening. Some activities (e.g., watching the iPad) might want to be removed from the pre-bedtime routine and scheduled earlier in the day. Relaxing activities such as reading or listening to quiet music can also be incorporated. Using a visual schedule can help the child to follow the pre-bedtime routine. Predictability and consistency can be beneficial here.



Supporting with sensory difficulties associated with aspects of the bedtime routine

Toothbrushing

- Using small amounts of toothpaste initially
- Using adapted toothbrushes considering sensory needs e.g., less or more brittle
- Incorporating interests e.g., using toothbrushes with favoured characters or that play music
- Utilising timers

Taking a bath

- Consider sensory needs e.g., water temperature, bath versus shower, use of a shower cap or unscented soaps
- Pairing the environment with your child's preferred items e.g., toys in the tub or music playing in the bathroom
- Utilising timers e.g., if they want to bathe quickly or struggle to leave the bath

Other things which can help with a bedtime routine

Sleeping environment

It is important to set up an optimum level of arousal in your child's environment/bedroom. The bedroom should be dark, quiet and cool but it is important to consider that your child's sensitivity to sensory stimuli will differ.

Hypersensitive (increased sensitivity to sensory stimuli)

- May benefit from black out blinds
- May need to have complete silence
- May find duvet covers aversive e.g. weight and temperature

Hyposensitivity (decreased sensitivity to sensory stimuli)

- May benefit from a night light
- May need to have some noise e.g. white noise
- May benefit from heated, weighted blanket

Additionally, it is important to note that sleeping arrangements may affect the ability of parents to create adjustments e.g., a child may share their room with a sibling or a child may struggle to sleep without a parent in their bed.

Teaching the skill of sleeping alone without a parent present is important. Parents can work on fading – systematically and gradually lessening parental presence. Parents may take the following steps:

- 1 Mum sat on bed and places a hand on child when they are in bed. (Mum does not lay down)
- 2 Mum sat on bed
- 3 Mum sat on the bottom of the bed
- 4 Mum sat on a chair next to the bed
- 5 Chair moved gradually towards the doorway
- 6 Repeat process if child wakes, trying to avoid stimulation

Nutrition

Daytime exercise can support a child to fall asleep faster. However, exercising too close to bedtime may prevent your child from falling asleep.

Caffeine is not only found in coffee but can also be found in tea, chocolate and sodas. It is important to limit caffeine intake ahead of bedtime routines.

Food consumption can also affect sleep so ensure your child does not have food 2 hours prior to sleeping as a full stomach will affect digestion and keep them up!

Sleep diaries

A bedtime routine is successful if there is also a regular sleep and wake schedule that does not differ drastically from weekdays to weekends.

Parents can monitor and track patterns by keeping a sleep diary that looks at the following:

- Time and length of naps in the day
- Time that you started preparing for bed
- The difficulties encountered and your responses
- Time that your child was in bed and where
- The duration it took to settle
- What supported settling
- Time that your child fell asleep
- Number of times they awoke in the night and length of time
- Time that parents went to bed
- Time that they woke up

References

Mallow, B.A. (2014). Solving sleep problems in children with ASD.

Accessed from <https://www.actcommunity.ca/education/videos/solving-sleep-problems-in-children-with-asd/>