

# Sleep Solutions

## ***Bridget***

I'm Bridget Bowling. I started Little Snoozers in 2015, and it was because my child wasn't sleeping. He was waking up numerous times throughout the night and I'd soothe him, bring him back down. I'd wake up the next day and not remember how many times [inaudible 00:00:06]. So I sleep-trained him at six months, and he's been a fantastic sleeper since. I've had three other children since, and if they don't sleep, I go crazy, so [inaudible 00:00:26].

## ***Lauren***

I'm Lauren, and I learned about sleep consulting from Bridget. I wish that I had it when my kids were little. I just want to say sleep issues are so common. That's why we have a job -- because so many people out there, there are just sleep questions, and there's a lot of information out there in the world, there's a lot of noise. It's hard to know what fact and what's based in science and what's based in emotions.

Today we're going to bring you what is evidence-based, where the science is, and we're going to help you walk through, as best as we can, your individual situations. Hopefully, I cover most of the things in the talk, but there's plenty of time for questions at the end. Okay, here we go. We're going to start.

## **Slide 2**

There are four components of healthy sleep, and we're going to break them down here in the next few slides. Proper sleep environment is so important. I think a lot of people know what it is. A lot of people get this right, but we're going to talk about it.

Coordinating sleep drive with your natural biological rhythms. This is a huge one, and I feel like [inaudible 00:01:31] about you. This is one that I think most of the time I help parents with this part, and I will explain exactly what that means going forward.

Eliminating sleep associations and understanding how to self-soothe. I think we all know what that means. You don't need Mom to rock you to sleep. You don't need a pacifier to sleep. You don't need someone in bed with you. You don't need an association. We need to empower our children to know that they have what it takes and they're confident enough to know that when it's time to sleep and their body is tired, they have what it takes to go ahead and close their eyes and let their body rest.

A consistent and effective bedtime routine is critical. It's really, really important for a lot of reasons, and again, we'll get into those in just a few minutes.

## **Slide 3**

Proper sleep environment. You want it to be cave-like -- extremely, extremely dark, even at nap time. You want that bedroom to be dark. Blackout curtains, trash bags is written up there. If you don't have blackout

curtains, that's okay not to buy anything. Put some black trash bags up in your windows. Put some cardboard boxes up there. It can be ugly. It just needs to be dark. The reason for that is the part of the brain that releases that natural melatonin, that sleepy hormone that we all know so much about, it sits right behind your optic nerve. Simply put, when your eyes see dark, the brain tells the body it's time to start sleep mode and it will release the sleepy hormone. If your eyes are seeing bright or blue light, like a screen or lights that are too bright, the brain thinks it's still time to be awake, so dark, dark, dark.

A good cool room, 68-72 degrees. Just make sure you're dressing your kids appropriately for bedtime. If it's a little one, like an infant, it's like one more layer. If they're in their jammies, one more layer. Just one sleep sack. They don't need to be super bundled. A hot baby isn't going to sleep well. Cool baby is going to sleep well. Same with kids. Kids at least can regulate their own blankets at night. But for babies, you really have to do that for them.

A white noise machine can help, especially with infants, especially with little ones. With infants, it helps to stimulate the womb sound, and then they get used to it. It also just drowns out the sounds from the rest of the house so they're not as stimulated.

## **Slide 4**

Okay, here we go. I feel like this is the biggie. Coordinating sleep drive with your natural biological rhythms. All right. I'm going to back things up to the newborn phase. When a baby is born, all they have the capability, all they have is a sleep drive. Like they're awake for a certain amount of time and their body gets tired and they go to sleep. Awake for a little bit of time and then they go back to sleep. That's sleep drive, and that just goes on 24 hours a day.

What they don't have is their circadian rhythms developed yet. Circadian rhythms develop around four months old. The circadian rhythms, I know we've heard that term, I'm sure a lot before, but just so we all know, it's just your internal clock. Everybody has an internal clock that is about 24 hours long. If we all lived in a cave and never saw daylight, your body would be like on a regulatory system that lasts about 24 hours. Doesn't exist for a newborn until they're about four months old. Between four and six months, this is where it matures and this is where sleep-training can happen.

Remember the newborn phase. If you have a newborn or you're going to have a newborn, the first four months: disorganized, unpredictable. They're going through one developmental leap after another. Their body is still different from one day to the next. They're literally metabolizing food differently from one day to the next, so sleep just gets disrupted. At that phase, at that age, there are a few things you can do to try to get sleep. The best thing to do is just go with it and know that in a few months, things are going to change. The best thing you can do in those four months is to get sleep while your little one sleeps.

The worst thing you can do is to keep that baby awake during the day to make sure that they're tired to sleep at night. That's going to have the opposite effect. That is because when you allow your sleep drive to get too big... I always explain it like a balloon. You all can probably picture this. When you wake up in the morning, you're nice and rested because we all get a really good night's sleep. We wake up really,

really rested, the balloon is deflated. The longer you're awake, that balloon begins to inflate. Then when you go to sleep at night again, it goes back down. Or for little ones that still need a nap, that balloon gets bigger if they're awake. Then they get a nap and it goes back down.

Now what happens if you allow that sleep drive to go beyond the stretch of the balloon? It will burst, and the body will release stimulating hormones like adrenaline and cortisol. It's doing that to try to combat the fatigue. If you think about little ones that get a second wind in the evening, you're like, "Oh, they're just not even tired. They're just like extra energy." That means they're overly tired. That is fatigued child.

What we're doing past the four-month mark with all your little ones and with ourselves too, but you're coordinating that sleep drive with the natural times of the day that your body wants to sleep. You coordinate. When they look sleepy, when they start rubbing their eyes and start pulling their ears, you can tell these slight little cues when they look like they might be starting to get tired. You're also watching the clock.

This is for someone, this chart is for somebody who is still taking three naps a day. That would be someone who's not quite one year old yet. But the times are very similar for older kids too, and I'll get into that. A good waketime is between 6:00 and 7:00 AM. A good waketime is just as important as a good bedtime. You want to start your day off right so that you are in sync with the rest of your day, so the rest of your day can fall in the right patterns.

First nap for a little one that's still taking these three naps or who's taking two naps between 8:30 and 9:00 AM is anyone starts that first nap, you're watching for those sleepy cues. Sometimes a sleepy cue isn't rubbing eyes, it isn't tugging their ears. Sometimes it's just peaceful. Sometimes a baby who's just been playing and playing and then just gets calm, that might be a sleepy cue, so paying attention to those.

Second naps should start between 12:00 and 1:00. That can be a little bit flexible depending on the success of the first nap. The first nap is a wash. Then you're going to look more at the twelve o'clock time.

Bridge nap, between 3:30 and 4:00 PM. This is just a tiny little nap that's going to get them from second nap to bedtime without getting overly tired. That gets dropped pretty early. That gets dropped around nine months, and that's the easiest nap to drop.

Then bedtime, between 6:00 and 6:30 PM. 7:00 PM is appropriate, too. Sometime between 6:00 and 7:00 PM. But starting that bedtime routine at 6:00 and 6:30, this is what I tell people all the time and everyone is just like, "Oh my gosh, that is so early." Yes, it feels early. But those internal biological rhythms, that's when the body is ready to accept sleep.

So if you're out of sync with those circadian rhythms, it's like the difference between giving your child a really good healthy meal day after day or giving your child a candy bar day after day. You give them a candy bar when they're hungry -- it's going to satisfy for a minute, but over time you're going to see some

negative effects and that's what's happening. You really coordinating with these times. It's going to give your child the most restorative sleep. It's not just about the length of sleep, it's about when sleep happens. It's going to give them the best quality sleep.

## Slide 5

A consistent and effective bedtime routine, 20-30 minutes at night, 10-15 minutes at naps. That bedtime routine serves multiple purposes. It is one that helps the body to calm down. It helps your child to know what's coming. There's a routine, there's a pattern. From the earliest age, from the time children are born, they had a pattern-seeking brain from the moment that they're born. They're seeing patterns. These are patterns that are happening every night. It's a confidence boost for them. They know what's coming. They know what's expected. It also cues the brain. When the brain starts doing these bedtime routines and it knows that sleep time is coming, the brain will start to release that melatonin.

Dim lights, not bright lights, as dim as you can get it in their room. If you're still feeding, last feed, if applicable, you want to maybe break the cycle of feeding. You don't want feeding to be the last thing you do. Feed then maybe read a book, or feed and sing a song. You don't have to have a large amount of time between your feeding and bed, but just something between feeding and bedtime, so you break that association.

Book, song, whatever works for your kiddo. I know books are a great thing to do at bedtime, but I know sometimes for some of these older kids, you can incorporate a lot of other things. I know one of my daughters has a lot of... She deals with anxiety. Books are not her thing, so we do [inaudible 00:10:57] every night together. That's her calming routine.

You can find different things that are calming for your family. It doesn't have to be what you typically see in a bedtime routine, but just something that's going to help the body to start to rest.

## Slide 6

Sleep associations and self-soothing. You don't want your child to have a job to do when they wake up between sleep cycles. We all wake up between sleep cycles at night. It's just this internal natural thing because at one time in human evolution, you had to wake up to make sure there wasn't danger, the house wasn't burning down or there weren't... Anyway. It comes from a primal state. We all wake up in the middle of the night. As adults, we probably just readjust our pillow, put our blanket back on and go back to sleep. We may notice we're awake, we may not.

Children that have a sleep association are waking up and they feel like they have a job to do. They wake up and they're like, "I need Mom. Where is Mom?" And they look for Mom. "I need to eat," or, "I need this task [inaudible 00:11:59]..." You don't want your child to have a job to do when they wake up.

Soothing is a skill and it has to be practiced. When you are ready to start any type of sleep-training or if you're ready to work on your child's sleep, know that it's a process and it's a skill. We're not going to learn

this overnight. I always equate it to learning how to ride a bike. You're going to set them up for success. You're going to hold onto the back of that bike, make sure everything is good, the environment is good. But eventually, you have to let go. You know, they're not going to know how to ride a bike the second you let go. They're going to wobble. They're going to fall. They're going to get back on.

Same with learning how to self-soothe. It's going to take time. For some kiddos, they catch on quick. For other kiddos, it just takes a little bit longer, but they can all do it. Our job is to set our child up for success, and we do that with the good bedtime routine. We do that with the sleep environment. We also do that with our own confidence, with our own ability to say, "I know you can do this. I'm just passing at a time. I'm going to be here with you. But I know the last little part. You can close your eyes and go to sleep."

## **Slide 7**

Dropping naps. We had some nap questions. Hey, guys. If naps aren't going well for you, don't worry. Naps are hard. Dropping the bridge nap between six and nine months old, that's the easiest one to do. Usually, kids just play through it. You just notice over the course of time they're not taking that nap. That one is a piece of cake to drop.

Moving from two naps to one can be really, really tricky, but it can be done. Usually, between 15 and 18 months old, you can try just dropping that nap altogether. Just skipping that morning nap and going right to the afternoon nap. That can be hard. So if you don't want to do that, you can just shorten that first nap, only allow them to sleep for an hour, and then wake them up. Then they'll be tired for the second nap. Yeah, capping the morning nap.

I'm going to back up a little bit and just talk about naps in general. If we're talking about a child taking one nap or two naps, a good nap is a nap that lasts at least one hour, usually two. They're only taking one nap. A successful nap might go beyond two hours. But if they're taking two naps, 1-2 hours. The reason for that is if it's an hour long, you know they've connected two cycles.

If your child wakes up from a nap and they're distraught and unhappy and [inaudible 00:14:32], you know that nap is not done. They haven't slept as long as they want to sleep. If they wake up and they're just talking to themselves or happy, you know that nap was a success. You can try to get them to go back to sleep for that nap that day or you're just taking a mental note as a parent [inaudible 00:14:45] they slept for this long. It didn't seem like enough today -- tomorrow we're going to try to elongate that nap for them.

## **Slide 8**

Okay, I'm ready for it. Dropping one nap to zero. Kids need a nap longer than... Sometimes there is typically a false dropping of a nap around two years old. Somewhere in that two, they're just at that age where they're testing, they're trying, "What am I doing?" They're developing. They're in their bed. They're just seeing what's what. Unless they stop napping for a solid two weeks, they're not ready to drop that nap. Just keep trying, keep putting them in their bed. Quiet time is always good. Quiet time can last forever. It's always a good idea to have some time to decompress. If they happen to sleep, they must need that sleep.

Many children still need a nap until they are school-age. I know we had a question about naps before and how to drop it. It's perhaps the timing of naps maybe and the timing of that and we can maybe try to dig into that a little bit later to see if maybe we can help you troubleshoot that.

Maintaining success. Mary talked about that. Mary talked about most of this. The crib, keep them in the crib as long as you possibly can. It's security for them. It really is. They're just not mature enough to handle the bed, typically until they're at least three years old.

The 80-20 rule. This is I'm sure all of you were looking at that schedule and we're like, "Oh, man, how are we ever going to do something in the family in the evening? How are we ever going to go to doctor's appointments and things like that?" 80-20 rule. When you have healthy sleep established, 80% of the time, stick with that schedule; 20% of the time, life happens. You have a family event, doctor's appointment, you miss a nap, bedtime is late, no big deal. Just make sure that bedtime gets a little bit earlier for the next couple of nights just to make sure that you are establishing that healthy sleep nap. That was a lot of information. Bridget's turn.

## **Slide 9**

### ***Bridget***

Luckily, in evening, autism, ADHD, anxiety, and sleep, it's all the same. There are no necessarily special moves, but it's really you need to concentrate on what we've already talked about.

## **Slide 10**

Bedtime routine. Routine is key if you want to be consistent. If you're able to just one person doing bedtime routine at a time, and if you can do it in their room to take away any distractions you want to keep to one person if possible because three's a crowd. The most calming, quieting bedtime routine to wind down the day will help bedtime to go more smoothly. Set an appropriate bedtime and be consistent with it. You don't want to put them to bed at 6:00 one night and 9:00 the next. Be consistent with that time.

Sleep environment is very important. I know we just talked about all of this stuff, the temperature, the darkness. Dark rooms are huge. I cannot tell you how much that will help your child's body release melatonin. It's even worse now after daylight savings where it's this bright out. I'm telling you, I do not travel without contractor garbage bags and painter's I don't care if it looks like a meth home. My children are sleeping and we're all happy, so it doesn't have to look great, but if your kid is sleeping, you have to make it darker.

## **Slide 11**

Another thing you're going to want to do is create positive sleep associations and celebrating successes. Children sometimes have a perception of sleep as a punishment. It is not. We all in this room love sleep. We wish we had more of it. Making sure they know sleep is fun. We love sleep. We love our room. It's a safe space. We play in here. We breathe in here. We also sleep in here, so play in their rooms. If you are

not, [inaudible 00:18:47] but you don't want to just keep their room for sleep. Be in there, fold laundry with them, roll around on the floor with them, read books, play games. Their room is a safe space and we want them to know that. That's a positive sleep association you can do.

Another thing you can do is put, depending on the age of your children, if they're old enough and will like stickers, or you can make a sleep chart. Let's say Colin's sleep chart. It doesn't have to be anything fancy. Five boxes, 1, 2, 3, 4, 5. If you sleep in your bed for five nights in a row, you can go to the park and celebrate, or jump on the bed, do something fun. But if you do a sleep chart, I would recommend putting it outside their door at eye level to them. We're so happy about it. When I've done them with my kids before, in the morning we would jump on the bed because we were so happy and had so much energy to be able to have fun because everybody slept good.

### ***Lauren***

[inaudible 00:19:43] back to help me sleep. I have so much energy now [crosstalk 00:19:46].

### ***Bridget***

Like fun things, they don't have to be physical rewards – could be intangible rewards. They can be doing something fun with your family.

Sleep is a marathon. It is not a sprint. Your child will not sleep through the night tonight. It is not that easy. But if you dedicate two weeks to it, you will get there, so don't get hung up if one night is bad. Be consistent and commit to the process. As I said, it's two weeks. We can do this for a night or two. Put in a solid two weeks, give it a college try, and see where you're at. You're not going to see any results after two or three days. You need to be consistent to get somewhere with it.

## **Slide 12**

ADHD and sleep. The most single most helpful strategy for parents of kids with ADHD is validating your child's thoughts and feelings by showing interest and empathizing with them. Do not discredit how they're feeling or how they're interpreting things. Empathize with them and show an interest. You're on the same team. That will help them with their sleep.

## **Slide 13**

Anxiety and sleep. Be a calm brick wall of empathy in order to help the child feel safe enough to sleep. They are counting on you to feel safe. Follow through on what you are saying you're going to do. They need to be able to trust you. If they trust you, then they will feel calm and be able to rely on you and comforted and be able to sleep. Work on self-regulation in order to co-regulate. Children are capable of managing life's ups and downs. We just need to teach them the coping skills.

### ***CFK Moderator***

One big question asked by many parents is, how do I help my child sleep through the night better?

## ***Lauren***

I feel like typically if someone's not sleeping through the night, it doesn't mean that they're not tired, it means they're overly tired. It means somewhere in there, there's a sleep debt and the body is producing adrenaline. Adrenaline isn't just released in the body once. It can happen just once. You miss one nap and then you get a good night's sleep and then the adrenaline goes away. If you're chronically overtired or what we call a sleep debt, that's constant adrenaline cortisol in the body, which that contributes to night wakings, that contributes to early wakings in the morning. Really focusing on sleep for that nice good two weeks, you might see that just disappear. That's what I would expect. That would be what it's like.

## ***Bridget***

Depending on your children's ages, you're looking at between 10 and 12 hours overnight consistently. As Lauren said, night wakings, early risings are signs of being overly tired. In that situation, we'd recommend putting your child to bed 30 minutes earlier the next night to get them caught up on that sleep debt so that they can get a consistent long stretch of sleep overnight and [inaudible 00:22:51].

You might notice that if it's a one-off where they're sleeping through the night and all of a sudden they're not, you can usually pinpoint it [inaudible 00:23:04]. Sleep was thrown off or because we were traveling and we just got back and it's been a little weird. Usually, you can pinpoint why all of a sudden they're having [inaudible 00:23:12] if they were sleeping the night previously or early rising, anything before six o'clock. Early rising, sleep begets sleep. Add that sleep on to begin at [inaudible 00:23:24].

## ***Lauren***

I think one point I missed in my presentation that I didn't cover was the reason we want bedtime so early in the [inaudible 00:23:31] is between 6:00 PM and midnight is that is when your child gets the most disordered sleep. That's when all that non-REM sleep is happening, between 6:00 PM and midnight. You try very hard not to disturb sleep in that amount of time. If you're someone who's doing night feedings with a kiddo, you're going to do your best to wait till after midnight so you're not disrupting sleep. That's why we want bedtime so early. If you're making up a sleep debt, makeup sleep debt between 6:00 PM and midnight, not naps, not early mornings, that [inaudible 00:24:03] is so important.

## ***CFK Moderator***

One mom with a young child with autism expresses frustration with some of the sensory input needs, deep pressure input needs, and general distaste for sleep that her child displays and asks, how do we tease apart some of these different components of sensory needs with a child's need for sleep?

## ***Bridget***

Here's what I would recommend. I would recommend everything you say. I would be consistent. I would let her know what's going on. I would move her bed back into her room and I would take your party into her room. You're not sleeping in there, but you're moving everything else in there. You're doing the pillow on the belly. You're doing the arm. You can sit next to her there.



***Lauren***

There are also weighted stuffed animals.

***Bridget***

I would get stuffed animals. [inaudible 00:24:50] maybe have long hair, [inaudible 00:24:52] recreating in her room. Give her the love of her room. Put her bed in there. You're doing what you need to do, but you're not going to be alone with her. You're going to sit with her every time she wakes up and do what she needs you doing. It's going to be hard. You're going to be exhausted, but you're already exhausted. But you're going to do it in her room because this will get her out of your room.

If room's safe, put a gate up if you need to contain her in there [inaudible 00:25:19]. Go to her when she needs you, but you will create habits and stuff in her room rather than in yours. Make sure you play with her [inaudible 00:25:30]. It just help her feel safe, secure. Give her the touch, everything she needs just in her room.

***Lauren***

Patience and persistence.

***Bridget***

Yeah.

***CFK Moderator***

A lot of parents in the room co-sleep with their children, especially parents of children with disabilities. One mom asked how to start breaking the cycle of co-sleeping and starting to lay their child down in a bed by themselves without it also having to be the parent's bedtime.

***Bridget***

What you could do is still do the bedtime routine and do everything with him in bed. Then you remove yourself and you go to bed when it's time for you to go to bed, just so you're teaching him. Try to do everything and work on getting him to sleep in the bed without you laying in there. That way you can teach him how to sleep and then you can come in when you're going to sleep. I know you'd be tired for a couple of days with it, but you're already tired.

***Lauren***

If you're working on independence, especially with energetic little ones, sometimes giving them something they can do in bed is helpful. Instead of all these things that you can't do right now, what can you do? You can stretch, you can wiggle your toes, you can wiggle your fingers. You can...

***Bridget***

Work on your breathing.

## ***Lauren***

Work on your breathing. Give them some tasks. Give them some things that they can do that they can work on. Sometimes just working on that [inaudible 00:26:52] sleep or at least will give you some time.

## ***CFK Moderator***

A mom of a ten-year-old asks, how do I help my child stay in his room when it is not time to wake up yet? Our speakers mention a tool that some families use called an okay-to-wake clock.

## ***Lauren***

It's a clock that has a little dim light and you set a time on it. You set an alarm so it'll be yellow all night. Then when it turns green, then he can get out of bed. You can set it for whatever time in the morning if you think it's appropriate to get out of bed. If he gets out when it's yellow, just walk him back and say the clock is yellow. Could also try not sitting in the chair but coming back for a really, really quick check – "I'm going to be back" even if it's 10 seconds.

## ***CFK Moderator***

One mom who is trying to sleep-train her child with developmental disabilities wonders how much crying is too much crying for a child.

## ***Lauren***

There's lots and lots of studies done on sleep-training and the effects on kids. Kids have a lot of stamina. You're not going to ruin your relationship with her if you let her cry. She's going to have a lot of stamina. I think that comes down to you as a mom what you're feeling, but also know that there's a lot of stress in your life if she's not sleeping and if you're not sleeping. That's like a constant stress that's going on, not only just to your mental stress but if she's not sleeping well, that's a lot of cortisol in her body too, all the time.

Sometimes it is worth it for that brief moment of stress, of allowing her to cry. If you think of it as giving her the time and space to learn a new skill, sometimes that can help you get through it. Then if she can get through that time and space and learn to self-soothe – right, this is a skill, if you're putting all these pieces of the puzzle together, the timing, the room environment, all of it's coming together, all those pieces of the puzzle training where she's learning the skills can be worth releasing that stress down the line.

A lot of sleep issues can be dealt with earlier in the day. Your kids are old enough to talk to them earlier in the day, like around dinner time and just say, "Okay, bedtime tonight. We're doing two stories. Then mommy is going to give you really good big hug and make it a really good one. Then mommy is going to leave and you're going to put yourself to sleep." If you want to do a check, you do check it. I'm going to come back in two minutes and I'm going to see you, so comfy warm in your bed. You're going to be so cozy. But set that expectation maybe not right at bedtime while you're doing bedtime routines earlier in the day, so there's time to process and think about.

