	MON	TUES	WEDS	THURS	FRIDAY	SATURDAY	SUNDAY
Time of waking in morning							
Number of naps during day, and length of naps							
Scale of activity during day (low 0-10 high)							
Time of beginning bedtime routine							
Bedtime							
Equipment / techniques used to aid sleep (singing, mobiles, story etc.)							
Time child fell asleep							
Number / times awoke during the night							
How did you respond?							
Length of time /s taken to fall back asleep							
Total hours slept							

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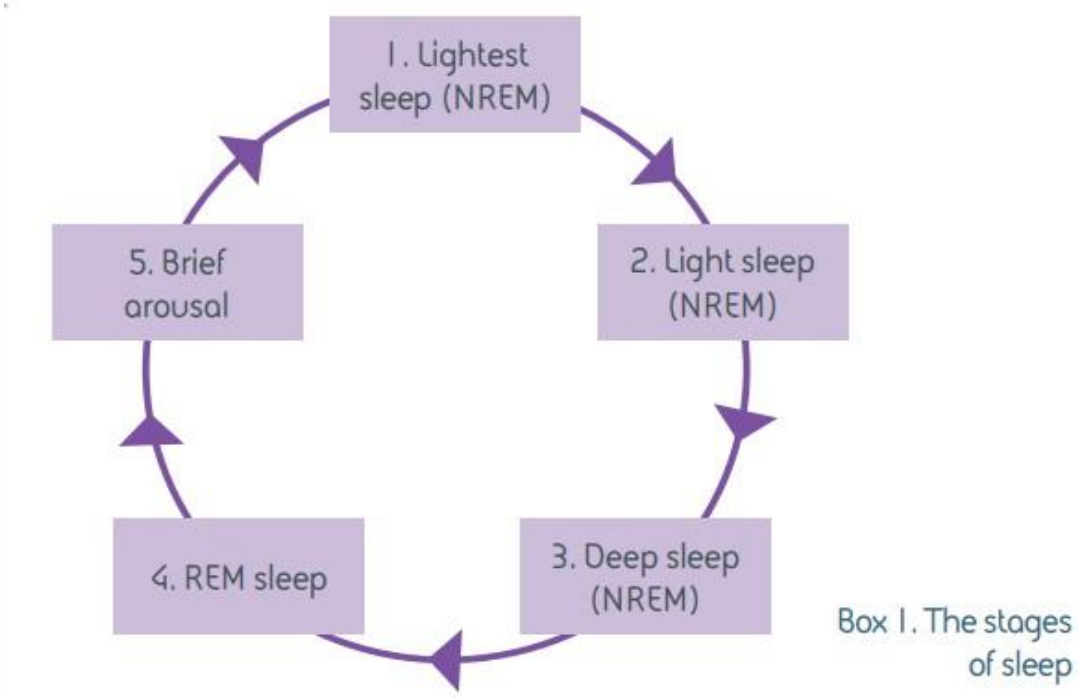
Supporting Children's Sleep

Sleep is essential for a human's survival. In children sleep is particularly important for growth as sleep is associated with the release of certain growth hormones. Poor sleep can affect a child's mental health, cognitive functions, memory, concentration and development. Studies have shown that sleep problems occur in 40-80% of autistic children. Sleep issues can include settling and waking problems, not understanding social cues, hypersomnia, insomnia, sleep apnea, and sensory issues. There are five different stages to sleep, which cycle throughout the night several times.



Box 1. The stages of sleep

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Sleep tips:

- Keep a sleep diary. This will help to identify triggers / factors over a period of time that could be contributing to your child's poor sleep.

- Think about the bedroom environment. Toys should be removed from your child's bedroom altogether where possible, or put away out of sight in cupboards, boxes etc. Your child needs to associate their bedroom with sleep and not with play time. Ensure your child's bedroom is tidy and free of clutter and mess. This is called stimulus control and helps to signal sleep.

- Lighting should be minimal (sleep-mobiles can help and are ok), blue light and LEDs from electrics are removed / off. Red-based lights/nightlights are good to use as they do not affect hormone levels.

- It may be that you need to look at seasonal issues like later sunset / earlier sunrise. Blackout blinds could help with this. Sometimes blinds / curtains can leave columns of light shining through at either side; this could be painful for your child visually. Consider eliminating this.

- Is your child hyper-sensitive to something you may have not picked up on? For example, if your child has hyper-sensitive hearing and there is a washing machine on next door to them, your child may be able to hear the electricity current in the walls. Consider moving the bed away from the wall or providing ear plugs.

- Assess fabrics on pyjamas and bedding. Consider sensory differences when buying these things and be aware of possible issues such as seams, zips, tags labels and buttons. Some children may like weighted blankets or sleep socks, the deep pressure touch provided by these types of things can help to soothe your child.

- Consider the height of the bed. Proprioception difficulties can make it challenging for autistic children to understand concepts such as height and depth. For example, a bunk bed may make some autistic children feel anxious about where they are in space. Some children may prefer to sleep on a mattress on the floor.

- Make sure the temperature of the room is comfortable to sleep in. Put a thermometer in your child's room to monitor the room temperature to ensure it is not too hot or cold. 16°-18°C is an ideal sleeping temperature however due to interoception difficulties temperature preferences are individual to each person.

- Review screen-time. You should, where possible, remove all electronic devices from your child at least one hour before bed and avoid putting any screens such as a TV in your child's bedroom. Screen time can negatively impact on melatonin production in children. If an electronic device such as an iPad is an essential part of a bedtime routine, check to see if the device has a 'night-shift' mode to block out blue light emissions from devices. There are also apps which can perform this function and special blue-light filtered glasses.

- Establish a routine. A 30–60-minute routine before bed is a helpful way of transitioning from playtime to bedtime. Ensure the routine is directed by yourself but considers your child's interests. For example, it could involve things your child finds comforting or soothing. An example of a bedtime routine could be brushing teeth, pyjamas on, bedtime story. Always end the routine with a recognisable phrase or action that indicates it is bedtime, like a goodnight song. Be aware of activities within the bedtime routine inadvertently heightening your child's energy levels for example bathtime may be too stimulating for a child who loves water play. You could use a visual schedule to support the bedtime routine. The timings and the bedroom routine should be kept the same each night, however, consider varying the order in which you carry out the bedtime routine as autistic children can become very rigid in their routine, and this could cause a problem further down the line.

- Sleep associations. If your child associates something with bedtime for example a comforter or a nightlight, do not remove this after they have fallen asleep. Similarly, if your child listens to music to get them to sleep put this on a loop so if they were to wake up during the night, they would hear this and associate it with sleep. It is recommended that you do not become a sleep association for your child e.g., do not get them to sleep by rocking or cuddling them, as you need to promote independence with their sleep associations. Also, if your child was to wake during the night you wouldn't be there. If your child will only settle with you at bedtime, you may need to look at gradual withdrawing. This means gradually increasing the distance between you and your child each night. An example may be: sitting on a chair by the bed and staying their until your child falls asleep. Once your child is used to this stage, move the chair further away and continue until the chair is at the door and you are out of sight. Consider using a toy/comforter which smells like you to support with this also. Your child also needs to associate their bed with bedtime and sleeping, so try to ensure your child does not play in their bed.

- Exercise. Exercise usually raises internal body temperature which prevents your child from feeling drowsy. You should consider limiting exercise one hour before bed. If exercise is done 4-6 hours before bed it can help with sleep as this gives enough time for the body temperature to regulate so your child will feel drowsy. Try calming activities, depending on your child's sensory needs these could be deep pressure activities or singing.

- Naptimes. If your child usually naps during the day and has trouble falling asleep at bedtime and/or wakes frequently at night, it may be that they are not tired enough to sleep. If your child is having a regular nap each day, don't eliminate this straight away. Start by reducing the naptime by five minutes each day they nap and carry on with this until they nap is cut out altogether. If your child needs to have a nap keep them consistent each day, so stick to morning naps or afternoons naps, don't change this up on a daily basis. If your child is in nursery/school, make them aware of what you are doing for naptime to ensure they are following the same process as you.

- Moving bedtime forwards. If your child is staying awake consistently after 1am you could consider using a range of techniques to move your child's sleep pattern to a desired time. Look at consistently delaying your child's bedtime and waking time each day whilst maintaining a regular routine during waking. This method is best used alongside a structured bedtime routine and calm-down time. Look at moving the bedtime and waking times forward by three hours each time. This means it is likely that your child will need a sleep during the day so it may be best to attempt this method during the school holidays. Bright lights in the evening will help delay the body clock.

- Moving bedtime backwards. If your child is having difficulty settling and falling asleep but is usually asleep by 1am you could look at moving their bedtime backwards. First you would need to decide on a suitable bedtime and waking time based on your child's sleep needs. These are completely individual to your child, and you should look at completing a sleep diary to help identify these needs or discuss this with a sleep practitioner. If you need to make changes to your child's times do this 15 minutes at a time each day or slower if needed. Bright lights in the morning can help bring the body clock forward.

- Caffeine. It is best to ensure your child does not have any caffeine for six hours before bed. Check ingredients in any drinks or snacks you give your child before bedtime

- Use relaxation techniques to help your child wind down before bedtime. These may include massages, meditation or listening to music.