

Sleep Tool Kit

This kit is designed to address questions related to sleep problems for individuals with Autism Spectrum Disorder. For further help and assistance, please contact Milestones Autism Resources at (216) 464-7600 ext. 200 or info@milestones.org and ask for the Helpdesk.

Milestones provides consultation services to all family members, professionals, and self-advocates. Services include connecting participants to resources and providing general information and assistance. We also offer a free [Autism Helpdesk](#). If you have any questions or concerns, please contact us at 216.464.7600 or info@milestones.org.

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1. What are common sleep challenges that people with Autism Spectrum Disorder experience?

Sleep issues are common for people with autism, and can include only getting 4 to 5 hours of sleep each night, having trouble falling asleep, waking up in the middle of the night, and waking up early. Understanding the autistic brain and how people with autism are wired plays a key role. During the development of a baby, pathways are being built in the brain and nervous system. In the last month of pregnancy, the brain starts pruning synapses, meaning any ineffective pathways are reduced as part of the natural biological process. However, for people with autism, that pruning process does not happen, so they have extra pathways their brains have to go down to get to sleep.

This is why it can help to find nighttime calming routines that help children and adults get ready for sleep like drawing or writing out what is concerning them. By performing these routines, they are working through those pathways, and then the more typical pre-bedtime habits might improve.

2. What can parents do at home to improve a child's sleep?

Diet changes: Minimize caffeine and sugar before your child goes to sleep.

Environment changes: Block out any light that might be entering your child's bedroom at night. If your child is afraid of the dark you could try using a small night light. Control the temperature and make sure it is not too hot or too cold. Avoid making too much noise near your child's room when it is his or her bedtime.

Children who share bedrooms may have different sleeping schedules and needs which can cause additional challenges. Think about how the space could be modified to support those different patterns like level of light, etc. ear plugs, bed tents, etc.

Behavior changes: Do not allow your child to watch television or use tablets, phones, or computers immediately before bedtime, or purchase blue light filtering glasses for your child to wear. Store devices outside of the bedroom at night if possible. Fill your child's day with more physical activity, but avoid before bed. For younger children, try to keep naps to your pediatrician's recommended number of hours. For older children and adults, avoid having naps earlier in the day. Have a consistent nighttime routine that could include giving your child a bath (or if they are older, taking a warm shower), reading, listening to music, or other calming activities.

Sensory issues: Consider how sensory challenges your child or adult has may be impacting their ability to fall and stay asleep. What sounds, textures, light/darkness, or smell could be making it more difficult or could help? For example, try a weighted blanket, soothing music, or a sound machine and avoid anything with wool/scratchy feel from their perspective.

Medications and other supplements/supports: Melatonin might help your child fall asleep easier according to guidelines [www.aan.com/Guidelines/Home/GuidelineDetail/988] from the American Academy of Neurology, but you should consult with a doctor before using it. Also discuss any other potentially helpful medications with your doctor to determine what might be appropriate.

Suggestions for Parents: Keep a log of your child's sleep habits and patterns to see what type of consistent routine may be most effective. Create a visual schedule for your child's bedtime routine. Seek support from a medical or mental health professional – you don't have to go it alone. Visit our Visual Supports Tool kit for visual support ideas.

3. What is the recommended amount of sleep that my child should be getting?

According to the American Academy of Pediatrics, children should receive the following amounts of sleep. These guidelines [<https://www.healthychildren.org/English/healthy-living/sleep/Pages/Healthy-Sleep->

Habits-How-Many-Hours-Does-Your-Child-Need.aspx] are endorsed by the American Academy of Pediatrics and American Academy of Sleep Medicine:

- **Infants (4 to 12 months):** 12-16 hours (including naps)
- **Toddlers (1 to 2 years):** 11-14 hours (including naps)
- **Preschoolers (3 to 5 years):** 10-13 hours (including naps)
- **Gradeschoolers (6 to 12 years):** 9-12 hours
- **Teens (13 to 18 years):** 8-10 hours

The Centers for Disease Control and Prevention also offers guidance for all ages, including adults. [https://www.cdc.gov/sleep/about_sleep/how_much_sleep.html]

These numbers can seem daunting to many individuals and families with autism but they give a guideline you can reference. It's also important to be mindful that even incremental increases, such as an extra 30 minutes of sleep, can have a huge impact on quality of life and behavior. You don't have to reach these goals overnight.

4. Where do I go for help if my child has a sleeping problem?

The first place to go for help is to visit your pediatrician or primary care physician. They will be able to give you guidance on what next steps you should consider. This could include visits with a psychologist, a neurologist, a sleep specialist or a behavior specialist.

For additional help, please call Milestones at (216) 464-7600 ext. 200 or info@milestones.org. The free Helpdesk can make recommendations about professionals that can help your child with his or her sleeping problems.

5. Types of Sleep Disorders

Not all sleep disorders have the same cause or treatment. Below is a list of common sleep disorders.

- **Insomnia:** Difficulty falling and staying asleep
- **Parasomnias:** Includes night terrors or sleep walking during the first half of the night and during deeper sleep levels
- **Disordered Breathing:** Also known as Obstructive Sleep Apnea (OSA) can be caused by Hypotonia (low muscle tone), muscle weakness, and high body weight
- **Rhythmical Movement Disorder:** Repetitive motion of head, trunk, limbs, usually noted during the transition from wake to sleep
- **Restless Leg Syndrome/Periodic Limb Movements:** A sensory motor disorder that gives an urge to move legs at bedtime

6. Other concerns that could interfere with sleep

A child with Autism Spectrum Disorder may also have co-occurring conditions that could cause sleep challenges. If a child is unable to communicate, you may be unaware that his or her sleeping problems might be a result of other issues. Here is a list of common conditions that could be causing problems with your child's ability to sleep.

- **Gastro Esophageal Reflux (GER)** [<https://kidshealth.org/en/parents/gerd-reflux.html>] or **Gastro Esophageal Relfux Disease (GERD)** [<https://kidshealth.org/en/parents/gerd-reflux.html>]
- **Allergies** [<https://www.webmd.com/allergies/default.htm>]
- **Sleep apnea** [<https://www.webmd.com/sleep-disorders/sleep-apnea/default.htm>]
- **Night terrors** [<https://www.webmd.com/sleep-disorders/nightmares-in-adults>]
- **Seizures** [<https://www.webmd.com/epilepsy/understanding-seizures-basics#1>]
- **Bipolar disorder** [<https://www.nimh.nih.gov/health/topics/bipolar-disorder/index.shtml>]
- **Anxiety** [<https://www.nimh.nih.gov/health/topics/anxiety-disorders/index.shtml>]

Please see your child's physician for further guidance, who can refer you to a specialist if needed.

7. How can lack of sleep affect my child?

Many behaviors that children with Autism Spectrum Disorder display are associated with lack of sleep. These behaviors include, but are not limited to:

- Aggression
- Depression
- Hyperactivity
- Increased behavioral problems
- Irritability
- Poor learning and cognitive performance

8. Evaluation and treatment of sleep disorders

Your medical provider will rely on a number of tools and techniques to evaluate if your child has a sleep disorder. These include asking you questions about your child's quality of sleep and your nightly routines. If additional information is necessary to identify the cause of the child's sleep disorder, your medical provider may request that you schedule an appointment to complete a Sleep Study. A Sleep Study generally requires that your child stay overnight at a Sleep Center so that medical professionals can evaluate them while they sleep.

If your medical health professional identifies that your child has a sleep disorder, they may prescribe medication to support your child's sleep routine or to address underlying symptoms that may be causing

disruptions. Some families may also seek the support of a mental health professional to help them with identifying calming, developmentally appropriate nightly routines based on their specific needs.

9. Further reading

Sleep Problems in Children with Autism Spectrum Disorder: Summary for Families and Caregivers, American Academy of Neurology [<https://www.aan.com/Guidelines/Home/GuidelineDetail/988>]- scroll down to Patient Tools and Materials and select “Patient Summary”.

Sleep Better: A Guide to Improving Sleep for Children with Special Needs by Vincent Mark Durand

When Children Don't Sleep Well: Interventions for Pediatric Sleep Disorders - Parent Workbook by Vincent Mark Durand

Sleepless nights rouse behavioral problems in children with autism

[<https://www.spectrumnews.org/opinion/viewpoint/sleepless-nights-rouse-behavioral-problems-children-autism/>]- Spectrum

Milestones has [Guiding Questions](#) that can help when you are interviewing new services for your child. These printable guides can go with you to an appointment and prompt you with questions that can help you make a decision.