Nightwakings

Nightwakings in young children is one of the most common problems that parents face. By 6 months of age, most babies are physiologically capable of sleeping throughout the night and no longer require nighttime feedings. However, 25%-50% continue to awaken during the night. Nightwaking problems can occur at any age but are most common with infants and toddlers.

Why does your child wake during the night?

When it comes to nightwaking, the most important thing for parents to understand is that all children, no matter the age, wake briefly throughout the night. These arousals occur between four to six times per night. So the problem is rarely the waking during the night but rather why the child is unable to return to sleep on her own. Children who are able to soothe themselves back to sleep (“self-soothers”) awaken briefly throughout the night but their parents are unaware of these arousals. In contrast, “signaler” children are those children who alert their parents by crying or going into the parents’ bedroom upon awakening. Many of these “signaler” children have developed inappropriate sleep-onset associations and thus have difficulty self-soothing.

What are sleep associations?

Many parents develop the habit of helping their child to fall asleep by rocking, holding, or bringing the child into bed with them. Over time, children may learn to rely on this kind of help from their parents in order to fall asleep. Although this may not be a problem at bedtime, it may lead to difficulties with your child falling back to sleep on her own during the night. Thus, sleep associations are conditions that the child learns to need in order to fall asleep at bedtime (such as rocking, nursing, or lying next to a parent). These same sleep associations are then needed in order to fall back to sleep during the night. The bottom line is that your child needs to learn to fall asleep on her own so that she can put herself immediately back to sleep when she awakens.

What can you do to help your child sleep through the night?

There are a number of steps that you can take to help your child sleep through the night:

- **Develop an appropriate sleep schedule with an early bedtime.** Ironically, the more tired your child is, the more times she will awaken during the night. So, be sure to have your child continue to take naps during the day and set an early bedtime.
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• **Security object.** Try to introduce your child to a transitional/love object. A transitional object, like a stuffed toy, doll or blanket, helps a child feel safe and secure when you are not present. Help your child become attached to a transitional object by including it as part of the bedtime routine. Try to include this object whenever you are cuddling or comforting your child. Don’t force your child to accept the object, and realize that some children will not accept one no matter how cute and cuddly the object.

• **Bedtime routine.** Establish a consistent bedtime routine that includes calm and enjoyable activities, such as a bath and bedtime stories. Avoid exciting high-energy activities, such as playing outside, running around, or watching television shows or videos. The activities occurring closest to “lights out” should occur in the room where your child sleeps. Also, avoid making bedtime feedings part of the bedtime routine after 6 months.

• **Consistent bedroom environment.** Make sure your child’s bedroom environment is the same at bedtime as it is through the night (e.g., lighting).

• **Put your child to bed drowsy but awake.** After the bedtime routine, put your child in her crib/bed drowsy but awake and leave the room. Remember, the key to having your child sleep through the night is to have her learn to fall sleep on her own, so she can put herself back to sleep when she naturally awakens during the night.

• **Checking method.** If your child cries or yells, check on her. Wait for as long or as short a time as you wish. For some children, frequent checking is effective; for others, infrequent checking works best. Continue returning to check on your child as long as she is crying or upset. The visits should be brief (1 minute) and boring. Calmly tell your child it’s time to go to sleep. The purpose of returning to the room is to reassure your child that you are still present and to reassure you that your child is okay.

• **Respond to your child during the night.** In the beginning, respond to your child as you normally do throughout the night (e.g., nurse, rock). Research indicates that the majority of children will naturally begin sleeping through the night within 1 to 2 weeks of falling asleep quickly and easily at bedtime. If your child continues to awaken during the night after several weeks, then use the same checking method during the night as you did at bedtime.

• **A more gradual approach.** Some parents feel that not being present when their baby falls asleep feels like too big of a first step for them and their baby. A more gradual approach is to teach your baby to fall asleep on her own but with you in the room. This approach will take longer but feels more comfortable to some families. The first step is to put your child in her crib/bed awake and sit on a chair next to the crib/bed. Once she is able to consistently fall asleep this way, sit farther and farther away every three to four nights until you are finally in the hallway and no longer in sight.

• **Be consistent and don’t give up.** The first few nights are likely to be very challenging and often the second or third night is worse than the first night. However, within a few nights to a week, you will begin to see improvement.
Books for more help

For parents
• Sleeping Through the Night, Revised Edition: How Infants, Toddlers and Their Parents Can Get a Good Night’s Sleep. By Jodi Mindell March 2005

For babies and toddlers - weaning stories
• Milkies in the Morning by Jennifer Sabem, 2014
• Nursies When the Sun Shines by Katherine Havener, 2013
• Sally Weans from Night Nursing by Lesli Mitchell, 2013

Free Interpreter Services
• In the hospital, ask your child’s nurse.
• From outside the hospital, call the toll-free Family Interpreting Line 1-866-583-1527. Tell the interpreter the name or extension you need.