

Average Sleep Needs

Bear in mind that these are just averages and certainly may not apply to every child. Nevertheless, you may want to record your child's sleep duration and compare it with the average amount of time other children of a similar age spend sleeping.

Age	Average Hours of Sleep	Your Child's Hours of Sleep
0 to 2 months	16 to 18	
2 to 6 months	14 to 16	
6 to 12 months	13 to 15	
1 to 3 years	12 to 14	
3 to 5 years	11 to 13	
5 to 12 years	10 to 11	
12 to 18 years	8.5 to 9.5	

HOW TO

Establish a good bedtime routine

- 1.** Make the bedtime routine consistent and repeatable. It should be the same every night so your child knows what to expect. It should start at the same time (e.g., 30 minutes before bedtime) and last for the same amount of time.
- 2.** Make the routine relaxing, not stimulating. Have a relaxing bath, not a stimulating shower. Play quietly and avoid loud music. Your child should fall asleep without sleep "props," such as television or music.
- 3.** Provide a drink from a sippy cup before your child goes to sleep if it doesn't interfere with potty training. If you're giving anything other than water, make sure to brush your child's teeth afterward. For both sleep and dental health reasons, don't provide a bottle in bed to help your child fall asleep.
- 4.** Leave the room while your child is still awake so she can fall asleep by herself in her own bed.

HOW TO

Treat inappropriate sleep associations

The key treatment goal is to teach your child to fall asleep on her own by teaching appropriate sleep associations. Once your child knows how to fall asleep on her own, her awakenings during the night will not become full awakenings. She will learn how to soothe herself back to sleep independently or

to stay asleep throughout the night. However, this is easier said than done!

1. Begin slowly. Baby steps are often more tolerable than big steps. Avoid changing too many things at once — this may increase the risk of failure.

2. Before removing any inappropriate sleep associations, first create a consistent sleep schedule and routine. Evaluate your child's schedule — wake time, nap time, bedtime, and mealtimes. Readjust as needed to ensure that your child is eating and sleeping an appropriate amount for her age. If she's still feeding at night, wean her off these feeds. If your child initially spends a lot of the night awake crying, she should still be woken at her regular time and be kept awake until her regular nap times. This prevents your child from shifting her sleep schedule (i.e., sleeping much longer during the day because she was awake all night). Do your best, bearing in mind that this is sometimes pretty difficult.

3. Assess your child's sleep-onset associations. What does your child's bedtime routine look like, where does she fall asleep, and what is happening while she's falling asleep? Is she in her room or your room when falling asleep? Are you present? Are you holding her, rocking her, singing to her? Do you carry her to her room once she is asleep? Often, parents are present when their child is falling asleep.

4. Write out a list of these sleep associations. This will be your working list for change.

5. Choose an appropriate start time. Some sleep experts suggest starting this process during a daytime nap or on the weekend, if you're not the

caregiver on weekdays. The rationale is that you may have more energy and determination at this time of day. Other parents prefer to start this approach when they feel it's most important, during the night. This is a personal decision.

6. Remove incorrect sleep associations. If your child has multiple sleep associations, remove these associations gradually, one at a time. For example, if your sleep routine is to walk your child up and down the stairs, then sing and rock her to sleep, you should eliminate each association individually over the course of 2 to 3 days. For the first 2 to 3 days, stop walking up and down the stairs; for the next 2 to 3 days, stop rocking her to sleep; and for the last 2 to 3 days, stop singing at sleep time. You can certainly still rock her and sing as part of your bedtime routine — just ensure that your toddler isn't falling asleep while you do so. Ultimately, you will be putting your child to bed sleepy but awake.

7. Be consistent. All caregivers should use the same approaches during the day and night. There is nothing more confusing for your toddler than getting different responses to the same behaviors at different times. And don't start any technique unless you have the time, energy, and family support to see it through. Starting and stopping a method prior to completion will only confuse your child and worsen her sleep habits.

Guide to

Using the timed-waiting method

- Ensure that your child's bedroom is safe. Because she may get out of her bed when you're not in the room, there shouldn't be anything that she can pull down or climb onto that could injure her.
- Put your child down in her crib or bed following your normal bedtime routine (bath, brush teeth, read a book, give her a hug and kiss, etc.). Explain to her that you will leave her door open and will be outside her room. Explain that if she tries to leave her bed or her room, you will close her door.
- Leave the room. This may evoke many responses from your child, including protests and crying.
- Leave the door open, if this is your normal routine, as long as your child doesn't leave her room. If she tries to get out of bed and leave her room, you will need to use the door-closing technique.
- If your child is in a bed and keeps getting up and tries to leave her room, implement the following door-closing technique: First, escort her back to her bed and remind her that if she tries to leave her room, you will have to close her door. Tell her that if she returns to

her bed, you will open it. Next, if she leaves her bed, close her door. You may open it once she returns to her bed. If your toddler tries to open the door, you may actually even need to hold it shut. This may upset your toddler, who does not want to sleep alone in her room. Remind her that you will open her door if she returns to her bed. In the beginning, she may actually fall asleep on her floor rather than in her bed. This is okay. It may continue for a few nights until she learns to fall asleep alone.

- Continue to return to your child's room at timed intervals (see chart on page 291) until she is calm or asleep. When you return to her room, if she's still awake, remind her that you are still there, that it is her bedtime, that she should be sleeping, and that you love her. You can escort her back to bed if she'll go, but this isn't essential. Then leave the room.
- Do not pick her up or cuddle her, because this will serve as positive reinforcement of inappropriate behavior. This should be a businesslike interaction, reassuring but not particularly desirable. When you check in on your child, do not introduce any new sleep associations.

Guide to

Using the chair-sitting method

- Ensure that your child's bedroom is safe. Because she may get out of her bed when you're not in the room, there shouldn't be anything that she can pull down or climb onto that could injure her.
- Place a chair that can be easily moved, such as a dining-room chair, beside your child's bed. Inform your child that you are going to sit in this chair while she falls asleep and then leave when she is asleep.
- During the first week of the process, place the chair beside the bed, and if you usually touch your child when she's falling asleep, you can do this initially, but don't lie on the bed with her. Discourage talking and eye contact — it is now time for sleep.
- Let her know that you will always be around and that if she wakes up, she can call you and you will return to the chair and sit there until she falls asleep. (If this is in the middle of the night, chances are that you will fall asleep before she does!)
- Every couple of nights, move the chair gradually closer to the bedroom door. Once you start to do this, you should discontinue physical contact with your child while she's falling asleep. You should also stop having conversations. You can turn the chair so that you're not looking directly at your child but she can still see you and know that you're there. By the end of the first week, your chair should be at your child's door.
- At the start of the second week, position the chair outside your child's door so that she can see you (but not necessarily your face). For the next week, sit in the chair while your child falls asleep, day or night.
- At the start of the third week, inform her that you will no longer be sitting in the chair while she falls asleep but that you will be close by, and if she calls out to you, you will come to her doorway. Find a quiet activity (e.g., reading a book) that you can do near her room so she knows you're close by. By the end of the three weeks, your child should be able to fall asleep without you. She will have progressed from falling asleep with you to doing it all by herself.

HOW TO

Set sleep behavior limits

The best way to deter limit-setting disorders is for you to establish and maintain a bedtime schedule and routine.

1. Make sure your child has consistent bedtimes, wake times, and nap times and stays on schedule. If your child stays up later with frequent curtain calls, she should still get up at the regular time the next morning. If you let her sleep in, she will get used to staying up later and adjust her routine accordingly. Be firm.

2. Make sure that you also have a routine you follow at bedtime. This routine can include strategies to avoid callbacks. For example, your child can have a small drink of water before going to bed. She should also try to use the potty or toilet before going to bed.

3. Once your child is in bed, leave the room.

4. If the issue is keeping your child in her room, you may need to assess her sleep-onset associations. Does your child always fall asleep with you and need to learn how to fall asleep on her own?

5. If the issue is callbacks, make a plan and share it with your child. For example, tell your child that it's bedtime, that she should be sleeping, and that you won't be talking to her. Stick to this plan — do not answer her callbacks (unless they are valid). If you do, plan on being called back many times!

6. Create a method to reward your child for a job well done (e.g., a sticker calendar or special toy) and let her know what she needs to accomplish to receive her reward. Praise good behavior to reinforce it.