The Culture of Sleep and Child Care

Across the world people sleep in different ways. Some people sleep inside, some sleep outside. Some people sleep in beds, others in hammocks or on mats on the floor. Some people sleep alone, some sleep with a spouse or children or both. Some people sleep only at night, while others value a nap during the day. How, when, and where people choose to sleep has a lot to do with their culture, traditions, and customs. This can include where they live, how their family sleeps, even how many bedrooms are in their home.

Teachers have a role in providing a sleep environment that is comfortable and safe for the children in their care, while honoring families’ cultural beliefs. Home visitors may support families in creating safe sleeping arrangements for their babies. Teachers and home visitors can be a valuable resource to families.

What is the culture of sleep in child care? Here are a few ways that sleep environments or routines might be different in child care from home:

• A classroom could be more or less active than the child’s home environment. This might be especially true for the sleep area. Think about the activity and noise level in a child’s home as you decide which space should be theirs for sleep.

• A baby who is held or in a sling much of the time at home might find a crib lonely and frightening. Consider asking parents permission to use a sling in the classroom. A baby who is used to being held might find comfort from being swaddled.

• A toddler who is used to two daytimes naps might have a difficult time adhering to a classroom schedule. Find or create quiet times in the morning when tired toddlers can rest. Have a cozy area in your room where toddlers may lie down with a book or soft toys.
The Culture of Sleep and Child Care (Cont.)

What can you do to help infants and toddlers feel more “at home” when it is time for them to rest?

• Think of sleep and sleep routines as part of the child’s individualized curriculum.

• Classroom teachers should meet with a family before an infant or toddler enters your care. This is an opportunity to find out about a child’s sleep habits before they join the classroom. When you know how a baby sleeps at home, you can use that information to plan for how they might sleep best in your care.

• Home visitors can approach the topic of sleep with families after a few visits. It is better to have a good relationship with a family before you discuss sensitive topics like sleep issues.

• Brainstorm ways to adapt your classroom to help a baby feel “at home” during rest times. A baby who is used to sleeping in a busy environment might nap better if you roll a crib into the classroom. Some mobile infants and toddlers might have a hard time sleeping in child care because they think they will miss something fun! These children benefit from having a very quiet place to fall asleep. When you have a positive relationship with a baby it will be easier to know what will help them relax into sleep.

• Encourage families to bring in “a little bit of home” to the program – like a stuffed animal or special blanket. A comfort item from home can help babies feel connected to their family. They might want that comfort all day. The comfort item from home can also help babies make the transition to sleep while in your care. Make sure that babies under one do not have any extra toys or blankets in the crib with them.

• Share with families what you learn about their child. Use pick up and drop off times to ask questions about sleep at home. Parents can share information that could make their child more comfortable in your care. You can be a resource for families about sleep and their child. Remember that parents are the experts about their child.
Napping

Have you noticed that some children will fall asleep every day at the same time no matter what else is going on? These kids could fall asleep into their lunch if it is served too late! Have you known children who seem to fall asleep easily some days and other times just can’t settle into sleep? These children might need a very stable routine. Some toddlers nap less and sleep more at night while others need to have a long sleep during the day.

Temperament and Sleep
Some of the different patterns in children’s sleep has to do with their temperament (Jenni & O’Connor 2005, 204). Temperament is like the personality we are born with. Some babies are naturally easy going and adapt to new situations while others really need a routine that is the same every day. One child might fall asleep easily just by putting her in her crib or cot when she is drifting off to sleep. Another child might fall asleep in your arms but startle awake the moment he realizes he is in a crib alone.

Circadian Rhythms and Sleep
Something else that can make nap time easy or difficult for infants and toddlers has to do with their natural sleep cycles. Everyone has a kind of “clock” inside of their bodies that tells them when they are hungry or sleepy. The cycle of this clock is called circadian rhythms. Circadian rhythms are the patterns of sleeping, waking, eating, body temperature and even hormone releases in your body over a twenty four hour period. How much babies and toddlers need to sleep, when they feel tired, and how easily they can fall asleep are all related to their circadian rhythms (Ferber 2006, 31).

So what do circadian rhythms mean for EHS? For teachers, home visitors and families it helps to know that there are times of day when a child will feel more tired and ready to sleep, and times when children will feel more active and ready to play and learn. The times of day where a child is naturally more active or more tired are due to circadian rhythms. What can happen if we ignore a child’s natural sleep window?

According to Ferber (2006, 275):

- A child might become overly tired and have trouble settling to sleep at nap time
- The child will be fussy or irritable and have challenging behaviors
- The child will have difficulty coping with transitions or conflicts
- When the child does have the opportunity to sleep, they might wake more easily

When infants and toddler’s circadian rhythms are respected, they are able to get the sleep they need.

Meeting Each Individual Child’s Sleep Needs
Thinking about the circadian rhythms and temperament reminds us how each baby is different. That is why it is important to have nap times that meet the needs of all infants and toddlers in your care. Helping babies to learn to recognize their bodies’ needs and find ways to meet those needs is the very important skill of self-regulation.
Napping (Cont.)

When the children you care for are well rested you probably notice they are more engaged and focused on classroom activities. Everyone has an easier time coping with transitions or conflicts when they have gotten enough sleep.

How to Individualize Nap Schedules
Creating a space for sleepy toddlers can allow them to relax or nap when their body tells them they are tired. It can take some creativity to figure out how to let a young toddler nap or rest when they are tired. What do you do if a child won’t nap when others are? How does one child rest quietly in a busy classroom?

Two and a half year old Henry is new to your classroom. His mother has shared with you that he does not nap during the day with her. When nap time comes around you can tell that Henry does not seem very tired.

What can you do for Henry, or other children like him, while the other rest of the class sleeps?

• Do you have a “cozy corner” that could also be a one child nap area?
• Are there soft places to sit and relax with a book or stuffed animal?
• Are there ear phones to listen to soft music?
• For older toddlers;

- Are books or other quiet activities provided if a child isn’t able to rest or settle when other children are?
- Are children provided techniques and strategies for calming their bodies e.g. deep breathing, tensing and relaxing their bodies, feeling their heartbeat, etc.
The Biology of Sleep

Sleep is an important part of life! Infants and toddlers spend at least half of their time asleep. We know how busy they are when they are awake, but what are they doing during all of those restful hours? Actually, sleep has many purposes.

• **Growth**: Growth hormone is released when babies sleep (Berk 2002, 302). Doesn’t it just seem like you can put a baby down for a nap and when they wake up, they look bigger? It could be. Babies and toddlers are growing in their sleep, and since they have a lot of growing to do, they need all the sleep they can get.

• **Restoration**: Some sleep researchers have found that sleep is important for letting the brain relax and restore some of the hormones and nutrients it needs (Jenni & O’Conner 1995, 205).

• **Memory**: Sleep is also a time when the brain is figuring out what experiences from the day are important to remember (Jenni & O’Conner 1995, 205).

• **Health**: A study found that infants and toddlers need at least 12 hours of sleep in a 24 hour day. When infants and toddlers had less than 12 hours they were more likely to be obese by the age of 3 (Taveras et. al. 2008, 305).

Sleepy Cues

Infants and toddlers may not be able to say, “I’m tired and would like to sleep now” but they have many ways to communicate when they are getting sleepy. **Look for these sleepy cues:**

— Rubbing eyes
— Yawning
— Fussiness / crankiness
— Laying down
— Sucking fingers or pacifier
— Pulling ears
— Staring off into space- looking miles away
— For toddlers, may be more likely to tantrum or bite
— Being unusually active
Questions about Sleep

Q: How much sleep do infants and toddlers need?
A: Infants and toddlers need a lot of sleep!

— Babies in their first month may sleep up to 17 hours in a 24 hour period!
— Over the next few months, babies will sleep 13-14 hours in a 24 hour period. Young infants still need to eat frequently and may sleep for only 1-4 hours before they are hungry again.
— Around three to six months of age babies will start sleeping for longer periods of time at night, referred to as consolidation, and be awake for much of the day. During these months babies can be expected to take around three naps per day. Around six months they will usually stop needing a third nap.
— Young infants up to around 12 months still need 13-14 hours of sleep but will begin getting into a routine of sleeping more at night with two regular naps during the day.
— Toddlers 1-3 years old still need 10-13 hours of sleep. Sometime between turning one and turning two a toddler may be ready to go to one nap a day.

“How much sleep” is compiled from “Solve Your Child’s Sleep Problems” by Richard Ferber, M.D., and “Sleep the Brazelton Way” by T. Berry Brazelton, M.D. and Joshua D. Sparrow, M.D.

Q: Wow, it looks like babies need a lot of sleep. What can I do to help infants and toddlers sleep?
A: Since naps are such an important part of the day, think of sleep as a part of the curriculum in your classroom or as you work with families at home.

— Home visitors can ask families what time children in their home nap. Make sure to schedule visits around nap times.
— Teachers can find out from families what they are already doing that works for them. Think about ways to adapt home practices to your classroom. For instance, a family might share the lullaby they sing at night, which you can use to help their baby fall asleep during the day. This can be especially comforting for a baby who is not used to the language you speak, or is in her first child care experience.
— Babies find ways to tell you they are tired. Learn to recognize sleepy cues like yawning, rubbing eyes, or fussing.
— Most babies and toddlers like a routine to help them relax into a nap. Holding and rocking a baby is a wonderful way to help them fall asleep.
— For older toddlers who may have difficulty napping, backrubs can work wonders. Also, bags of small, soft, quiet toys and books can amuse toddlers who wake early or cannot fall asleep.
— Understand that learning to sleep is a developmental process, just like learning to walk. Infant/toddler sleep patterns may change frequently depending on how they are growing or the family schedule. Staying consistent with napping routines helps babies and toddlers get back “on track” and get the sleep they need.
Questions about Sleep (Cont.)

Q: Sometimes parents ask me for advice about how they can help their baby sleep at night. Some parents even ask me to keep their child awake all day so they will sleep better at night. What can I tell them?

A: It is important to learn what the family expects their baby to do. Waking up at night is normal for infants, toddlers, and adults. — A child who is well rested will fall asleep more easily (Brazelton & Sparrow 2003, 77). If a child is kept awake too long they can become over-tired and have a hard time falling asleep. You can help parents understand the importance of naps to a good night’s sleep. — Some families find that a bedtime routine helps their baby calm down and feel ready for sleep. Parents and caregivers might bathe, rock, read to, or sing with a baby as part of a bedtime routine. Being consistent about a bedtime routine helps babies and toddlers wind down and learn to anticipate that it’s time to sleep. — Routines are important in the daytime too! Parents and caregivers can work together to coordinate routines. When everyone works together the child can nap at the same time every day, whether weekday or weekend.

Q: One of the families I work with lets their toddler stay up very late. They say it is because evenings are the only time they have to spend with their child. They may have a nice evening, but our mornings are difficult. What can I do?

A: Some families have very different sleep schedules than we might expect. It’s important to adapt so that the child is getting as much sleep as they need. — Make sure you have a place in your classroom where sleepy toddlers can rest whenever they need to. Some toddlers need more than just one afternoon nap and you can provide them with a place where they can rest in the mornings as well. This child’s primary caregiver can read cues to know when he needs a rest. When the child is tired, suggest a story or quieter activity on a cot, cozy corner, or couch. — Many adults and program philosophies in America take an approach to toddler napping that expects all toddlers nap at the same time. Another option is to help children learn to understand their own bodies and rest when they feel tired, not just when it is convenient to the group schedule (Gonzalez-Mena 2001, 275).
What is Sudden Infant Death Syndrome?

Sudden Infant Death Syndrome (SIDS) is the medical term used when an infant dies in their sleep, suddenly and without a cause that can be determined. **Here are specific messages caregivers can share with parents to reduce the risk of SIDS:**

- Babies should ALWAYS be put to sleep on their backs.
- Whether in a crib, bassinet or in bed with parents make sure baby is not too warm and that bedding is tight fitting.
- There should not be any toys, pillows, or loose blankets around a sleeping baby.
- Avoid exposing babies to cigarette smoke.
- Parents who have been drinking, using drugs, taking sleeping medication or are overly tired should not co-sleep.

Information from ZTT Babies and Sleep Safety Key Topics. (Parlakian & Lerner)

Information to Share with Families

Many families will view you, their child’s teacher or home visitor, as an expert! Sometimes families will ask for your help with problems they are having, especially around sleep. **Here is some information families might find helpful.**

- Acknowledge how hard it is to have a child who isn’t sleeping at night. When a baby doesn’t sleep the parents don’t sleep and everyone is exhausted. Remember, none of us are at our best when we feel sleep deprived!

- When parents ask about night time waking, or getting their baby to sleep through the night, there is no one strategy that will work for all families. Help parents think through what they will do when the baby wakes up so that they have a plan. The plan might include quietly going into the baby’s room, waiting a few minutes before going in, or safely co-sleeping.

- Ask about the family’s bedtime routine. A lot of infants and toddlers sleep better when they eat dinner and go to bed at the same time every night. A bedtime routine might include some activities like bath time, brushing teeth, stories, or a short cuddle and off to sleep. Over time a consistent routine will be a cue that it is time to calm down and be ready for sleep.

- If the baby is teething or nearing a milestone, like walking, they might wake up more at night. Brazelton (1992) points out that during times of exciting growth babies may have more trouble sleeping (382).
Information to Share with Families (Cont.)

• Just like adults, babies and toddlers can react to stress by losing sleep. Think about the child’s experiences while you are with her – have there been any changes in caregivers, peers, or classrooms? Ask the family if there is anything going on in their lives that might be stressful. If so, find out if there are ways that you can support the family and the child.

• Some parents have found that “white noise,” that is, the sound of the vacuum cleaner, a fan, or running water helps their baby sleep. If that works try recording the sound to play back during sleep times. A fan can also provide some white noise to drown outside sounds and lull a baby to sleep. The white noise can be comforting because it is similar to the sounds babies experienced in the womb.

• Researchers have found that when a baby has trouble sleeping the mother is more likely to have depression (Hiscock & Wake 2001, 1317). If a family member seems to be having a very difficult time work with your mental health consultant.

Parent resources about sleep are available at ZERO TO THREE.

When Sleep is a Problem

Sometimes a baby or toddler has a lot of trouble sleeping. You and the parent may feel you have tried everything. Maybe it is time to consult with your program nurse, look into community resources, or work with a pediatrician. It can be useful to document and share the child’s sleep patterns, evening routines and diet. You can offer to help parents by creating a “sleep journal” using these guidelines:

• Include bedtime routines, what the child ate and drank, and what the sleep issues are.

• Write down when the child sleeps during the day while they are in your care.

• Note any medications the baby is using, even if they are over-the-counter.

• Keep the records for the parent to share with their pediatrician. The “sleep journal” will help the doctor figure out how to support the family.

• Ask parents to share times of waking and sleeping with you when they drop their child off.
Hot Topic

To Co-sleep or Not to Co-sleep, That is the Question!

What is co-sleeping?

It can mean different things to different families. Some co-sleeping families all sleep together in a “family bed.” Others will have the baby in their room but in a separate crib or bassinet. Many cultures around the world co-sleep. In a study of cultures around the world researchers found that more than two thirds of mothers slept with their babies. The number of families who co-sleep was even higher when including mothers who sleep in the same room as their babies (Barry & Paxton, 1971 and Burton & Whiting, 1961 as cited in Shonkoff & Phillips 2000). Some families in Early Head Start may co-sleep with their young children. Many families don’t realize they are co-sleeping if they bring the baby into their bed at some point in the night. The best sleeping arrangement is the one that works for everyone in the family!

The choices a family makes about how they sleep can come from many places. New parents get messages from family members, doctors and books. An EHS Teacher or Home Visitor can give parents the information they need to have a safe night’s sleep.

Good Tips for a Safe Night’s Sleep:

• All babies need to be put on their backs to sleep

• Use a firm mattress

• Only use one light blanket, never use heavy blankets or pillows.

• Do not put toys or stuffed animals in with the baby

Co-sleepers do all of the above and:

• Make sure there is no space between the mattress and headboard.

• Make sure the adult bed is safe for infants – no fluffy comforters, pillows, and use a firm mattress.

• The edge of the bed should be protected with a tightly fitting bed rail.

• Never co-sleep when either parent is under the influence of alcohol or drugs (even prescription medications). Overly tired parents should not share a bed with a baby.

• Older children should not be in the same bed with an infant.

Have more questions? Look for “Sleep” under key topics on the ZERO TO THREE website.
Suggested Reading about Sleep for All Ages

Even very young babies can understand more about the world around them through listening to stories. Some stories about sleep talk about routines, others about the separation and fear a young child may feel when saying goodnight. The following books about naps and bedtime can help infants, toddlers, and adults learn more about sleep together.

— The Napping House by Audrey Wood and Don Wood
— Time for Naps by Jane Yolen and Hiroe Nikata
— Sleepyheads by Roberta Grobel Intrater
— Dulces Sueños: Sleep! by Roberta Grobel Intrater
— How do Dinosaurs say Goodnight? Jane Yolen and Illustrated by Mark Teag
— Sweet Dreams/Dulces Sueños by Pat Mora and Illustrated by Maribel Suarez
— The Going to Bed Book by Sandra Boynton
— Buenas Noches a Todos by Sandra Boynton
— Pajama Time by Sandra Boynton
— Llama Llama Red Pajama by Anna Dewdney
— Goodnight Moon by Margaret Wise Brown and Illustrated by Clement Hurd
— Buenas Noches, Luna by Margaret Wise Brown and Illustrated by Clement H
— Guess How Much I Love You by Sam McBratney and Illustrated by Anita Jer
— Adivina Cuánto te Quiero by Sam McBratney and Illustrated by Anita Jeram
— Time for Bed by Mem Fox
— Love You Forever by Robert N. Munsch and Illustrated by Sheila McGraw
— Peekaboo Bedtime by Rachel Isadora
— Goodnight Baby by DK Publishing
— Buenas Noches, Bebe! by DK Publishing
Sleep Vocabulary

Did you know that sleep has a vocabulary? Below are some words you will find in this News You Can Use as well as other articles or books about sleep. Knowing these words will be helpful if you decide to learn more about sleep.

Sleepy words:

**Circadian Rhythm** means the biological cycles people go through in a twenty-four hour period. These cycles include sleeping, waking, eating, hormones, and even body temperature (Ferber 2006, 31). Think about the times of day when you feel hungry or tired; this is part of your body’s circadian rhythm!

**Consolidation** means sleeping through the night, or at least for longer periods of time.

**Self-regulation** refers to the ability to manage emotions, physical needs, and arousal. For example young babies may need help to fall asleep and to manage their emotions. A very young infant who is startled might have a hard time calming down by themselves, but if a trusted adult holds and comforts them they may find it easier to settle. That sort of responsive interaction, repeated over time, can help a baby learn how to self-regulate.

**Self-soothe** is the ability to soothe, or calm down without help from an adult. Babies are not born with this ability! Babies learn how to soothe themselves when the adults in their lives are available to help them be calm. Some babies are really good at this and will suck their thumbs to help themselves fall asleep. Sometimes babies need a little more help to calm down like rocking and lullabies.

**Sudden Infant Death Syndrome (SIDS)** is the medical term used when an infant dies, usually when left alone to sleep, suddenly and without a cause that can be determined.

**Temperament** describes the way a child approaches and reacts to the world (ZTT website). Temperament is something we are born with and tends to stay the same over time. A child who is naturally more easy going is likely to have an easier time falling asleep than a child who has hard time adapting to new situations.
References:


