

Good Sleep

The importance of good sleep cannot be over estimated. Poor sleep affects both our mental and physical well-being, often leading to poor concentration, stress, worry and mood disorder.

The Gloucestershire Online Pupil Survey indicates that many of our children are not getting good enough sleep to be refreshed and ready for learning:

24% of Y6 pupils report regularly going to bed at 10pm or later

27.4% of Y4 & Y6 report taking 2 or more hours to go to sleep once in bed

15.8% of Y4 & Y6 spending this time in front of screens (TVs, computers, devices)

47% of secondary age pupils report sleeping for less than the 8-9 hours NHS Choices recommendation to function at their best.

Many of the children and young people surveyed are using electronic devices and TVs close to bedtime which may contribute to disrupted sleep patterns. Good sleep has proven advantages for memory and performance. Sleep releases growth hormones and helps the body and mind develop well; it enables the brain to make sense of the day's events and helps us to keep emotionally balanced.

There is increasing evidence that too little sleep in children has a detrimental effect on their growth, attainment and mental health. Good sleep habits can be laid down during childhood and this resource aims to teach children and young people how to avail themselves of a good night's sleep.

Getting Ready to Sleep Well: Simplified Top Tips

- Limit how much TV you watch close to bedtime
- Avoid watching programmes or films that have upsetting or scary content close to bedtime
- Avoid sugary foods or drinks in the evening
- Leave mobile phones or other devices in another room, ideally downstairs if you live in a house
- Listen to or read a calming story (save the action and thrills for early evening!)
- Listen to some soothing music
- Cut down on caffeine, especially in the evening. Drinks such as cola as well as tea and coffee contain caffeine. Too much caffeine prevents deep sleep and can make falling asleep difficult.

Dreams, Nightmares and Night Terrors

A common cause of a poor night's sleep, especially in younger children, is the occurrence of upsetting dreams or night terrors.

The following information is from the NHS Choices website

<http://www.nhs.uk/conditions/night-terrors/pages/introduction.aspx>

Many children experience nightmares and night terrors, but most grow out of them. They don't cause any long-term psychological harm. Night terrors are very different from nightmares. A child having night terrors may scream and thrash around, and may not recognise family members. This behaviour happens when waking suddenly from deep, non-dream sleep, also known as non-rapid eye movement (REM) sleep. A child won't be fully awake during these episodes and will have no memory of their behaviour the next morning. Nightmares occur from dream sleep (REM sleep). A child may wake up from the nightmare and, depending on their age, may be able to remember and describe the bad dream.

Night terrors

Night terrors are common in children aged between three and eight years. A child who experiences night terrors may scream, shout and thrash around in extreme panic, and they may even jump out of bed. Their eyes will be open but they're not fully awake. The episodes usually happen in the early part of the night and can go on for several minutes (up to 15 minutes).

Why they happen

Night terrors are more common in children with a family history of night terrors or sleepwalking behaviour.

A night terror attack may be triggered by anything that:

- increases how much deep sleep a child has, such as tiredness, fever or certain types of medication
- makes a child more likely to wake from deep sleep, such as excitement, anxiety or sudden noise.

What a parent or carer could do to help a child experiencing night terrors



The best thing to do if a child is having an episode of night terrors is for the parent or carer to stay calm and wait until the child calms down, avoiding getting involved, provided that the child is safe. Night terrors can be frightening to witness, but they are not harmful. A child shouldn't be woken when they're having an episode. They may not recognise family members and may become more agitated if someone tries to comfort them. After the episode has ended, it's safe to wake the child. If necessary, try to use the toilet before settling back to sleep. If the child returns quickly into deep sleep, they may have another episode. Making sure they're fully awake before they go back to sleep can break this cycle. Children don't remember the episodes the next morning, but it may still help to have a general chat to find out if anything is worrying them and triggering the episodes. It will also help if they have a relaxing bedtime routine. If the night terror episodes are frequent and occur at a specific time every night, it may be that waking the child breaks the cycle. Wake the child 15 minutes before the anticipated time of the episode every night.

When extra help is needed

Most children will eventually grow out of night terrors. However, you should talk to a GP if they're happening several times a night or happening most nights. A GP will be able to check whether something that's easily treatable is causing the episodes. For example, large tonsils could be causing breathing problems at night and waking the child. In a small number of children who have frequent episodes of night terrors, a GP may suggest that they go and see a specialist.

Nightmares

Nightmares are common in children aged three to six years. Most children grow out of them.

Nightmares usually happen later in the night and cause strong feelings of fear or distress. A child may wake up and be able to remember and describe the dream. Nightmares in children can be caused by a frightening experience, such as watching a scary film, or by something that's worrying them.

What a parent or carer could do to help a child having nightmares

Talking to a child to find out whether anything is worrying them that could be triggering their nightmares can be helpful. As with night terrors, making sure that a child has a relaxing bedtime routine will also help. It's a good idea to see a GP if a child is having repeated nightmares (a series of nightmares with a recurring theme). If the child's nightmares are being caused by a stressful past experience, they may need counselling. Night terrors and nightmares are common in young children, but most will eventually grow out of them.

Sleep Diary Activity

There is still much uncertainty about why we dream. Advances in brain imaging suggests that dreaming could play a role in memory, learning and emotions. There are suggestions that dreaming is the brain's way of processing the information that it has gathered through the day and that a person's emotional state can have a bearing on what they dream about, or the nature of their dreams, but there isn't anything conclusive at the moment. Experience tells us that over stimulation close to falling asleep, hearing about or being involved in upsetting events or feelings of anxiety can all impact the nature of our dreams.

Sleep Diary Activity: A Parent's View

Source: www.nhs.uk/Livewell/Childrenssleep

A sleep diary might reveal lifestyle habits or experiences in your child's day-to-day activities that contribute to sleep problems.

A sleep diary could include answers to the following questions:

- What were your child's sleeping times?
- How long did it take them to get to sleep?
- How many times did they wake up during the night?
- How long did each awakening last?
- How long did they sleep in total?
- Did they do any exercise shortly before going to bed?
- Did they take any naps during the day or evening?
- Has anything made them anxious or upset?

For more help or advice about sleep, visit www.nhs.uk/Livewell/Childrenssleep

