Bedwetting Bedwetting happens when children don't wake up in the night when they need to do a wee. Some children wet the bed because they sleep very deeply. Other children wet the bed because they produce larger than usual amounts of wee at night, or because their bladder spasms during sleep.

Children can't control bedwetting, and they almost always grow out of it. Reassure your child that **bedwetting is natural**. It might help to explain in simple terms some of the reasons for bedwetting.

It might be a good idea to see the GP if your child is still wetting the bed regularly at 7-8 years and you are concerned about how your child will handle sleepovers or overnight school camps or bedwetting is starting to bother or worry your child.

Obstructive sleep apnoea If your child has obstructive sleep apnoea, it means that they sometimes stop breathing when they're asleep. Your child might snore, pause or struggle while breathing at night. This can disrupt their sleep. You might notice that your child seems tired during the day. If you think your child has sleep apnoea, see your GP.

Night terrors and nightmares Night terrors are when your child suddenly gets very agitated while deeply asleep. They're less common than nightmares and usually disappear by puberty. **Night terrors** don't harm your child, who often won't remember them in the morning. But they can be scary for you. Night terrors usually happen in the first few hours after falling **asleep. Nightmares are very common in early school-age children, and nightmares are** often scary enough to wake children up. As children get older, they get better at understanding that a dream is just a dream. Nightmares happen in the second half of the night, which is when your child dreams the most.

Sleeptalking and sleepwalking Many school-age children sleep talk, especially if they're excited or worried about an event like a holiday or a test. Sleep talking is nothing to worry about. Calmly talking with your child about whatever is worrying them might help reduce sleep talking.

Sleep walking happens when your child's mind is asleep but their body is awake. It sometimes runs in families, and it can also be caused by anxiety or a lack of sleep. Sleepwalking usually doesn't need treatment, and most children grow out of it as teenagers.

Sleepwalking and sleep talking usually happen in the first few hours after falling asleep, when your child is in deep sleep.

Teeth-grinding and thumb-sucking during sleep Many children grind their teeth in their sleep. It doesn't mean there's anything wrong with your child, and it usually doesn't cause damage.

Thumb sucking can cause dental problems for children older than about 5 years. If you're concerned about your child's teeth-grinding or thumb-sucking, talk to your dentist.

Autistic children can have particular sleep and settling difficulties Sometimes good sleep habits and routines can help. Autistic children. These habits include bedtime routines, regular bedtimes, healthy sleep associations and comfortable sleep environments.

Useful resources

https://www.gosh.nhs.uk/conditions-and-treatments/procedures-and-treatments/sleep-hygiene-children/

https://raisingchildren.net.au/pre-teens/healthy-lifestyle/sleep/about-sleep

https://www.nhs.uk/conditions/baby/health/sleep-and-young-children/

How to help your child with sleep routines.

We will always seek to work alongside parents to ensure the best outcomes for our pupils and families If you have any concerns or questions at any time, please contact us

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Why sleep is important for children aged 5-11 years

When your child sleeps well, your child will be settled, happy and ready for school the next day. That's because good-quality sleep helps your child concentrate, remember things, manage emotions and behave well. This all helps your child learn well. Getting enough sleep is also important for your child's health. That's because it strengthens your child's immune system and reduces the risk of infection and illness. Some children fall deeply asleep very quickly when they go to bed. Others sleep lightly, fidgeting and muttering for up to 20 minutes, before getting into deep sleep. These are the recommendations from the NHS of how much sleep your child should have.

Your child's age	Recommended sleep time in 24 hours
Infant 4-12 months	12-16 hours including naps
Children 1-2 years	11-14 hours including naps
Children 3-5 years	10-13 hours including
Children 6-12 years	9-12 hours
Teenagers 13-18 years	8-10 hours

If your child will not go to bed

Decide what time your child should go to bed (according to how much sleep they need –as the table above). Start a 'winding down' bedtime routine around 30 minutes before the time your child usually goes to sleep. Bring this forward 15 minutes every night until you get to the bedtime you want. Set a limit on how much time you spend with your child when you put them to bed. For example, only one story, then tuck your child in, one cuddle and kiss and say goodnight. Give your child their favourite toy and comforter (if they use one) before settling into bed. Leave a dim light on if necessary. If your child gets up, keep taking them back to bed again with as little fuss as possible. Try to be consistent. You will have to repeat this routine for several nights.

Things to think about

Food and mealtimes Eating a large meal before bedtime can prevent sleep. Consider the best time to eat your main evening meal; if your child has an early bedtime, ensure that a large meal is not being eaten directly beforehand. On school nights, it might be preferable for your child to eat earlier, saving family meals for weekends or holiday periods. Some foods can be helpful in promoting sleep – for example, a drink of warm milk.

Exercise Children may have difficulty in falling asleep if they have been inactive throughout the day. Encouraging your child, where possible, to undertake sports and to play outside can help to burn off energy and promote tiredness at the end of the day. Even going for a walk in the fresh air can be helpful. However, avoid exercise too near to bedtime.

Environment Your child's sleeping environment should be a place where they feel safe and secure, but also be a place to sleep and not play. There are ways in which the sleeping environment can be adjusted, which will depend on the needs of your child (and other children sharing the room).

For instance, some children may find a nightlight can make them feel safe, others may sleep better in total darkness. If possible, adjust room temperature and noise to levels at which your child feels comfortable to fall asleep.

Your child's bedroom should not contain items that distract from sleeping. For example, would it be possible to remove toys from the bedroom before bedtime, or move toys to a different area of the house?

Set a routine Having a bedtime routine and a set bedtime can help your child to understand what to expect and how they should behave. A routine can begin 30 minutes to two hours before bedtime and can include activities to help wind down, such as a warm bath/shower or reading a story.

Sticking to a set pattern each night will help your child to settle before bed and give them the time to calm down before sleeping. Going to the toilet as the last task before getting into bed can also help prevent your child from needing to get up in the night time.

Technology The use of electronic devices (such as televisions, mobile phones and tablet computers) close to bedtime can prevent your child from settling to sleep. This is because they produce light that is good at suppressing natural hormones in the brain that cause sleepiness.

Ideally, these devices should not be used in the hours before bed and removed from your child's bedroom to create an environment that your child associates with sleep.

If your child uses these devices to help them fall asleep, consider replacing this routine with a bedtime story or playing soothing music.

Self-settling If your child is routinely waking in the night, it is important that they learn to self-settle rather than seeking a parent or joining a parent's bed. This can be difficult to enforce, and may be emotionally challenging, for both child and parent, but parents should remain firm and assertive.

If your child leaves their bed and seeks you out at night-time, try not to engage them in conversation, but lead them quietly and immediately back to bed. This may need to be repeated several times each night, but it is important that your child learns that they will receive the same response from you each time.

If your child is anxious, the use of a night light, cuddly toy or baby monitor may help them to feel safe and learn how to self-settle.

Praising your child in the morning for staying in bed at night can help reinforce good behaviour; this can be aided by the use of a reward chart or stickers, with a small token prize when a certain number of stickers/rewards have been won.