# autism at-a-glance

#### April 2018

Autism at-a-Glance is a publication of the Center on Secondary Education for Students with ASD (CSESA).



# Supporting Healthy Sleep Habits in Adolescents

Autism at-a-Glance is a series of practitioner and familyfriendly documents created by the Center on Secondary Education for Students with ASD (CSESA) designed for high school staff members supporting students on the autism spectrum, as well as family members of adolescents with ASD. The purpose of the Autism at-a-Glance series is to provide a current summary of topics relevant to high school students with ASD as well as practical tips and resources for school and community personnel and family members.

This Autism at-a-Glance was designed to support high school staff and family members in supporting adolescents on the autism spectrum as they learn to establish healthy sleeping habits.



S leep is a basic human need just like water, food, and shelter. However, as many as 80% of children/teens with autism spectrum disorder (ASD) have experienced some level of sleep problems (difficulty falling asleep, staying asleep during the night, and/or excessively sleeping). Sleep problems occur in individuals with ASD regardless of cognitive level. The potential causes for these sleep issues range from children with ASD not understanding the importance of sleep to neurological, behavioral, and/or medical issues.

### Why is Sleep Important?

The amount of sleep that each person needs to function can vary by the individual. The current sleep recommendation for adolescents to perform at their best is between 8-10 hours per night. However, research indicates that older children and teens with ASD are sleeping less than their peers without ASD. Not getting enough sleep or sleeping excessively can cause a teen with ASD to have more difficulty with academic and/or social/behavioral functioning. Lack of sleep can cause teens to become exhausted, which can increase challenging behaviors, and can negatively impact their ability to attend school consistently and/or maintain steady employment. These sleep problems can also cause stress and anxiety in teens with ASD, as well as their parents, caregivers, and/or siblings.



# Healthy Sleeping Habits

Sleep Diary				Dates:				
	Example	S	м	т	w	т	F	S
Went to Bed (Time)	9:00 PM							
Fell Asleep (Time)	9:30 PM							
Woke During the Night (Tally & Length of Time)	XXX 45 min 1 hour 30 min							
Factors That May Have Influenced Waking (Time; If applicable)	10:30 PM – Loud noise in another area of the house 12:00 AM – Sirens in the distance 2:30 AM - Unknown							
Awake Next Morning (Time)	6:00 AM							
Method of Waking	Alarm clock Parent							

## Seek Support from Medical Professionals

# Determine if there are unaddressed medical issues

When trying to determine which strategies to use to help your teen improve sleep habits, it is best to consult your doctor to determine if your teen's sleep difficulties are a result of an underlying medical condition (e.g., gastrointestinal, diabetes, seizures, depression, sleep apnea, etc.) or the due to medication.

#### Keep a sleep diary

A sleep diary can help you and your doctor have a better idea about your teen's sleep patterns and habits. The diary may aid your doctor with a diagnosis of sleep disorders and help to monitor the effectiveness of the strategies that you are using at home. A basic sleep diary should include the following information:

- Time your teen goes to bed and wakes up
- Total number of hours your teen slept
- How many times your teen woke up at night and the duration of the waking period
- List of strategies used to help your teen improve sleep habits

You may need to check in with your teen in order to complete some of these items. You could ask your teen to help monitor their own sleep or use some type of technology (e.g., activity trackers that can be worn on the wrist) for tracking sleep.

# Strategies to Improve Sleep

#### Explain the importance of sleep

Some teens may not understand how sleep impacts their growth and well-being. Explain to your teen that he/she needs to get a good night sleep to be healthy. Be clear in your definition of a good night's sleep (e.g., going to bed at a designated time, sleeping for about 8 hours, sleeping throughout the night). For some teens, a simple social story may better help them understand why they need to sleep.

#### Establish a bedtime routine

Develop a short, easy to follow bedtime routine for your teen to follow. A visual schedule can be an effective tool to help teens get used to, follow a new routine, and promote independence.

- Set a specific time for your teen to go to bed at night and wake up in the morning. Be sure to use the routine consistently (even on the weekends) to help your teen internalize the routine.
- The routine should begin no more than 1 hour before bedtime and can include relaxing activities such as reading a book, yoga/meditation, gentle massage, and/or listening to soft music.

#### Create a comfortable sleep environment

At bedtime, your teen's bedroom needs to be a place that is calming and that has limited distractions.



- Try to make the room dark and quiet, because some teens with ASD may be sensitive to certain noises. Blackout curtains may help reduce the amount of outside light.
- Keep the room at a cool temperature. Research indicates that temperatures at or just below 70 degrees Fahrenheit are optimal for sleeping.
- Remove possible distractors at bedtime, such as televisions, video games, computers, and/or phones, so that your teen will not be tempted to use these items rather than going to sleep.

# Ensure diet and exercise habits are supportive of sleep

During the day, incorporate exercise and a healthy diet to aid in your teen's ability to fall asleep.

- Exercising during the day can help a teen sleep longer and deeper at night. However, exercising too close to bedtime can cause your teen to have a difficult time settling down to fall asleep. Exercise should end at least two hours before bedtime.
- Avoid caffeine and sugary drinks in the evening such as sodas, caffeinated tea, chocolate, and coffee. If your child's routine includes having a snack before bedtime, try to phase out caffeinated items by replacing them with healthier alternatives, such caffeine free and low/no sugar beverages and/or snacks.



### Parent Resource

*Sleep Strategies for Teens with Autism Spectrum Disorder: A Parent's Guide* 



This website includes a link to a free downloadable tool kit designed to provide parents and families of teens with ASD specific strategies to improve sleep habits. The tool kit has information on how to tackle the problems of falling asleep and staying asleep through the night. Links for quick tips and strategies for developing sleep habits in younger children with ASD are also listed.

https://www.autismspeaks.org/science/resource s-programs/autism-treatment-network/tools-



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## Resources

#### **AFIRM Module: Exercise**

Griffin, W., & AFIRM Team. (2015). *Exercise*. Chapel Hill, NC: National Professional Development Center on Autism Spectrum Disorder, FPG Child Development Center, University of North Carolina. Retrieved from <u>http://afirm.fpg.unc.edu/exercise</u>

#### **AFIRM Module: Self-management**

Sam, A., & AFIRM Team. (2016). *Self-management*. Chapel Hill, NC: National Professional Development Center on Autism Spectrum Disorder, FPG Child Development Center, University of North Carolina. Retrieved from <u>http://afirm.fpg.unc.edu/self-management</u>

#### **AFIRM Module: Social Narratives**

Sam, A., & AFIRM Team. (2015). *Social narratives.* Chapel Hill, NC: National Professional Development Center on Autism Spectrum Disorder, FPG Child Development Center, University of North Carolina. Retrieved from <u>http://afirm.fpg.unc.edu/social-narratives</u>

#### **AFIRM Module: Visual Supports**

Sam, A., & AFIRM Team. (2015). *Visual supports*. Chapel Hill, NC: National Professional Development Center on Autism Spectrum Disorder, FPG Child Development Center, University of North Carolina. Retrieved from <u>http://afirm.fpg.unc.edu/visual-supports</u>

## References

Baker, E., Richdale, A., Short, M., & Gradisar, M. (2013). An investigation of sleep patterns in adolescents with high-functioning autism spectrum disorder compared with typically developing adolescents. *Developmental Neurorehabilitation*, *16*(3), 155-165. Retrieved from

https://www.tandfonline.com/doi/full/10.3109/17518423.2013.765 518

Cohen, S., Conduit, R., Lockley, S. W., Rajaratnam, S. M., & Cornish, K. M. (2014). The relationship between sleep and behavior in autism spectrum disorder (ASD): A review. *Journal of Neurodevelopmental Disorders, 6*(1), 44. Retrieved from

https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4271434/

Malow, B. A., Byars, K., Johnson, K., Weiss, S., Bernal, P., Goldman, S. E., ... & Glaze, D. G. (2012). A practice pathway for the identification, evaluation, and management of insomnia in children and adolescents with autism spectrum disorders. *Pediatrics, 130*(Supplement 2), S106-S124. Retrieved from

http://pediatrics.aappublications.org/content/130/Supplement 2/S 106.long