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Back to School, Back to Sleep

Fixing your children's sleep problems may improve their grades and their behavior.

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The new school year is upon us. From bedtime battles to the misery of morning call, summertime sleep habits die hard. Late summer nights combined with early school start times, and the stresses of just being a kid, deprive our children of essential sleep. And sleep deprivation often wreaks havoc with health, academic performance, and behavior. It is an unrecognized epidemic.

From elementary school through high school and beyond, a great many of our children are chronically sleep-deprived. With more than two-thirds of elementary school-age children having some kind of sleep problem and most adolescents not getting enough sleep, many will struggle to meet the barrage of new challenges, demands, and emotions of a new school year.

It is not widely recognized and appreciated just how pervasive and critical quality sleep is for brain development and how it directly influences daytime functioning, performance, mood, and behavior. When was the last time your doctor asked about your child's sleep? Parents wouldn't think of letting their child skip meals or run into a busy street, but staying up late is very often of little concern. It shouldn't be.

Sleep Affects How Your Child Thinks, Feels, and Functions

More and more research studies demonstrate that daytime sleepiness from chronic sleep deprivation and poor-quality sleep has significant affects on daytime behavior as well as concentration, attention, and mood. Even 20 fewer minutes of needed sleep may significantly affect behavior in many areas. One study showed that those students with C's, D's and F's got about 25 fewer minutes of sleep and went to bed an average of 40 minutes later than A and B students. The pediatric research findings are startling and alarming:

- Poor sleepers reported being significantly more depressed, without energy, tired, tense, moody, stressed, irritable, and less rested and alert than good sleepers. Interestingly and importantly, they were also more likely to have a negative self-image, which, in light of the above, is not surprising.
- Insufficient sleep has been associated with daytime fatigue, inability to concentrate in school, ADHD, a tendency to doze off in class, problematic behaviors, and lower levels of social skills.
- Persistent sleep problems have been associated with learning difficulties throughout the school years.
- Poor sleepers were more likely to display type A behavior patterns.
- Teenage insomnia has been related to anger, depression, difficulty with school adjustments, and stress. And studies suggest that insomnia often begins early in life and persists into adulthood.
- Sleep-disturbed elementary school-age children may have poorer coping behaviors and display more behavioral problems at home and in school.
- Several studies report that more total sleep, earlier bedtimes, and later weekday rise time are associated with better grades in school.
- Those with poor grades are more likely to sleep less, go to bed later, and have more irregular sleep/wake habits.

From Elementary to High School, Sleep Problems Are Pervasive and Widespread

You may be surprised to learn how prevalent sleep problems are. In studies of elementary school-age children, nearly 40% showed some kind of sleep problem, and 10% had daytime sleepiness. Up to half of adolescents reported at least occasional difficulty falling or staying asleep, with up to 13% experiencing chronic and severe insomnia. Clearly, the sleep time most teenagers get is insufficient: the average is under 7 ½ hours, with only 15% sleeping 8 ½ hours or more on school nights and more than 25% typically sleeping 6 ½ hours or less.

Results from the National Sleep Foundation's 2004 Sleepiness in America poll may (or may not!) surprise you:

- About a third of infants seem sleepy or overtired during the day and about a fifth also wake too early in the morning at least a few days a week.
- About a third of toddlers, half of preschoolers, and more than 40% of school-aged children stall about going to bed.
- About a quarter of toddlers and preschoolers resist going to bed at bedtime and seem sleepy or overtired during the day.
- And a fifth or more of preschoolers and school-aged kids snore or have difficulty waking up a few days a week.

Does My Child Have a Sleep Problem? Awareness Is Key

Given the prevalence and enormous impact of sleep problems on daytime functioning, we should all regularly look at our own children to see if they are getting the sound sleep they deserve. For some it may be obvious, but for most of us it requires some education, investigation, and a keen, watchful eye. This is because few of us really know what normal, healthy sleep should be, plus there is a great deal of individual variation among children and at different ages. Sleep deprivation is also difficult to detect because sleep problems are masters of disguise, often masquerading in myriad manifestations. Consider that:

- Children rarely complain about sleep problems. A study of adolescents showed that very few sought help for their sleep, even though some considered their problems to be very severe. Another found that almost 90% of adolescents say that they need more sleep, but how many parents have heard their child say, "You know, I think I am going to go to bed early tonight."
- Adolescent sleepiness is so prevalent that it almost seems normal. Though bedtimes get later and later, the biological need for sleep in adolescents does not decrease with age.
- Parents may overestimate the amount of sleep their child gets because we may be unaware of when our child actually falls asleep, as well as night awakenings. Research has shown that medical conditions may cause or contribute to sleep problems even when overt medical symptoms seem well controlled. For example, asymptomatic children with asthma may have poor sleep and daytime fatigue. Allergies may cause respiratory distress when sleeping. In one study, almost one-third of the children in elementary school reported significant body pains during the night, of which parents were largely unaware.
- Sleep deprivation may present itself in many ways other than daytime sleepiness -- inattention, poor concentration, moodiness, behavioral problems, and poor academic performance and social skills, to name a few. Interestingly, poor sleepers were found not to be consistently more tired than good sleepers, and they were actually least tired in the evenings, when most good sleepers were tired.

What Can I Do? Think Sleep!

With so many hidden faces of sleep deprivation, you must be aware and "think sleep." As a parent, if you do not recognize the problem, it may well go unrecognized. You will also likely implement any remedies required. Early intervention is important, given the consequences and that children do not "grow out of" sleep problems; rather, the sleep problems of childhood tend to persist into adulthood.

Talk with your child. Just taking the time to ask some of the right questions can go a long way. If there is a problem, discuss it and make a plan agreeable to all. Include detailed targeted behavior changes and rewards.

With your child in school during the day and with after-school activities and part-time jobs for many, it is critical to talk with teachers, coaches, bosses, etc. to see if your child is exhibiting any signs of sleep deprivation. This may involve you taking some time to educate the educators.

Teach your child good sleep habits, also known as "sleep hygiene." Establish sleep-healthy bedtimes, bedtime routines, habits, and diets. Identify and reduce as much daytime stress as possible. Limit TV and other "screen time" (computers, video games), especially at bedtime, and do not put a TV in your child's bedroom; children with a TV in their room tend to go to bed later and get less sleep than those without, and those kids who get less sleep are more likely to spend two or more hours watching TV.

As in everything in life, do your best to be consistent and ask for help. Do not

hesitate to call your doctor or sleep specialist. It's too important not to.

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SOURCES: Ferber and Kryger. *Principles and Practice of Sleep Medicine in the Child*. 1995. pp.19-27. Ownen, Judith, et. al. "Sleep Habits and Sleep Disturbances in Elementary School-aged Children." *Developmental and Behavioral Pediatrics*. Vol. 21. No.1, February 2000. pp. 27-36. Blader Joseph et al. "Sleep Problems of Elementary School Children A Community Survey." *Archives of Adolescent Pediatric Medicine*. Vol. 151, May, 1997. pp. 473-480. Chervin Ronald, et al. "Symptoms of Sleep Disorders, Inattention, and Hyperactivity in Children." *Sleep*. 20(12):1185-1192. Owens Judith, et al. "Television-Viewing Habits and Sleep Disturbance in School Children." *Pediatrics* Vol. 104 No.3 September 1999. Kirmil-Gray Kathleen et al. "Sleep Disturbance in Adolescents: Sleep Quality, Sleep Habits, Beliefs about Sleep, and Daytime Functioning." *Journal of Youth and Adolescence*, Vol. 13 No. 5, 1984. pp. 375-384. Wolfson Amy and Mary Carskadon. "Sleep Schedules and Daytime Functioning in Adolescents." *Child Development*, August 1998, Vol.69, No. 4, pp. 875-887. Morrison Dianne et al. "Sleep Problems in Adolescence." *Journal of the American Academy of Child Adolescent Psychiatry*, 31:1, January 1992. pp. 94-99. Labege L et al. "Development of Sleep Patterns in Early Adolescence." *Journal of Sleep Research* (2001) 10, 59-67. National Sleep Foundation "Sleepiness in America Poll," 2004.

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