

# Sleep Disorders and Treatment in Children with ASD

by Craig Marrer MS, BCBA, LBA



Children and adolescents with ASD struggle with sleep problems, particularly insomnia, at a higher rate than typically developing children. Research suggests that between 40% to 80% of children and adolescents diagnosed with ASD experience some form of sleep disruption. In addition to insomnia, children and adolescents diagnosed with ASD also commonly present with difficulties falling asleep, remaining asleep, and early morning awakenings.

As is true for any child, the benefits of a good night's sleep cannot be overstated. Poor sleep is associated with increases in challenging behaviors along with corresponding decreases in social skills and academic performance. Untreated sleep disorders in childhood have been linked to childhood and adult obesity, adolescent behavioral and emotional problems, anxiety in adulthood, and the persistence of sleep problems into adulthood.

## Establishing Optimal Sleep

**1. Develop an ideal sleep schedule** based on the recommended number of hours your child should get each night, based on their age.

Age	Total Sleep	Night Sleep	# Naps
2	11 hrs. 30 min	9 hrs. 30 mins	1 (2 hr)
3	11. hrs 15 min	10 hours	1 (1hr. 15 mins)
4	11 hrs	10-11 hours	0-1
5	10 hrs 45 min		
6	10 hrs 30 mins		
9	10 hrs		
12	9 hrs 45 min		
15	9 hrs. 15 min		
18	9 hrs.		

**2. Habitualize nighttime routine.** This will eventually evoke sleepiness from your child as these activities become more associated with sleep. It is best to establish a consistent sequence of events that occur every night before putting your child to bed. These routines often include baths, brushing teeth, reading, etc. In addition to having a set routine, it is best practice to limit access to over-stimulating activities such as bright screens, reduce the amount of liquids and foods consumed an hour before bedtime, and create an environment that encourages sleep (e.g., reducing light levels, setting a cooler temperature in the home, and reducing physical activities).

**3. Manage problematic sleep dependencies and support the development of favorable ones.** Healthy sleep dependencies for children can include a favorite blanket or stuffed animal, a nightlight, or a white noise machine. Unhealthy or problematic sleep dependencies often include one or both parents needing to be present for sleep to occur.

**4. Address sleep interfering behavior. If needed, talk to your child's BCBA or another trained professional to help.**

For more resources, check out our Best Practice Blog at [www.cahumanservices.org/bestpractice](http://www.cahumanservices.org/bestpractice)