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*This intervention is a set of recommendations that should reduce or eliminate the problems in question in most average children. If problems do not improve and/or if problems are severe, you should seek the personal assistance of a child psychologist, psychiatrist, or pediatrician for further evaluation and treatment.*

## Interventions for **BEDTIME HASSLES**

### **The Problem**

Learning to be in bed alone and falling asleep alone is an important developmental task many children resist and one many parents have difficulty enforcing. Going to bed at night and sleeping in their own bed through the night can sometimes be difficult habits for children to form. Children may have a burst of energy at bedtime and be difficult to calm. They may complain and find excuses for putting off bedtime. They may insist on sleeping with their parents or other family members, or they may wake up during the night to get into bed with others.

This upsets household harmony and disrupts the sleep of all family members. It prevents the child from making progress with the important developmental task of developing independence. Sometimes, motivation for correcting this problem is missing because parents find it comforting to have their child in bed with them, but this is usually not in the best interest of the child.

### **Solutions**

Children find comfort and security in routines, even though they may resist at first. Children are usually not capable of enforcing schedules that benefit them. They depend on their parents for structure and enforcement.

### ***The Bedtime Ritual***

Children should have a specific time for going to bed each night. That is the time they get into bed and stay there. On weekends they might be allowed to stay up a little later, but there should still be a specified bedtime which is the same each weekday and each weekend.

It is most helpful if the steps leading up to bedtime are the same each night. They should begin at the same time and should be done in the same order. The following steps are recommended. If you follow these steps strictly for the first week or two, it should not take much effort to get the same results in the future. Starting with a bath is a good idea because a warm bath can be relaxing when handled correctly and it takes the child away from stimulating activities such as active play or TV.

1. Give the child a five-minute warning (preschool age) or a ten-minute warning (school age). “Maria, you have ten more minutes to play and then it will be time for a bath. I’m setting the timer now.”
2. Use a timer to remind your child and yourself when five or ten minutes has passed. When the timer rings, do not allow the child to negotiate for additional time. Stop what you are doing and escort your child into the bathroom and supervise the child getting into the bathtub.
3. Allow the bath to last a specific amount of time, e.g., 15 minutes. Set the timer again to let the child and yourself know when that time is up. Supervise the child getting out of the tub and into their pajamas in the bathroom. While still in the bathroom, take care of additional activities such as brushing teeth, using the toilet, and getting a drink of water.
4. Escort the child directly from the bath to their bedroom. Do not permit the child to find excuses to run around the house. Others should come into the child’s room to have good-night hugs, rather than letting the child run around the house seeking out persons to hug. A cup of water can be placed by the bed, rather than letting the child get up to get a drink later.
5. You may wish to complete the ritual by reading the child a story after they get into bed. The child should be in bed and you should be in a chair near the bed. Do not get into bed with the child.
6. It is now time for you to leave the child alone. A nightlight or light from the hallway might be left on if needed. A favorite toy might be kept in bed.

### ***Enforcement***

Your job at this point is to maintain the stage you set.

#### **What if your child....**

#### **Your response is...**

Gets out of bed.

Put him back promptly without carrying on a conversation with him.

Gets out of bed repeatedly.

Put him back each time.

Says he has to use the bathroom.

Tell him to go. Do not go with him unless he requires your help because of his age. If he delays, escort him back to bed.

Calls to you, says she forgot to hug someone, etc.

Let her know it’s too late, now.

**What if your child....**

**Your response is...**

Calls to you repeatedly.

Ignore this each time.

Tantrums.

Ignore this.

Gets in your bed during the night.

Get up and put him back to bed.

Comes to your bed complaining of a nightmare.

Take her back to bed, give reassurances of safety, offer a drink of water, tuck her back in bed, then leave.

Following these steps may require a good bit of energy for a few nights, but when your child sees that you consistently enforce the routine, he should follow the routine quite easily.

***Additional Tips***

For children who share a room and tend to play or argue in a way that makes going to sleep difficult, or for any child who gets up or calls out frequently....

Place a reward of some kind in the room, on top of a chest of drawers, for example. It might be a coupon or token that can be exchanged for a treat or privilege the next day. Tell the child/ren the reward belongs to them unless you have to come back into the room to settle a dispute or put someone back in bed. If you have to come back into the room, you will take back the reward. If it is still there in the morning, it belongs to the child/ren.

***Exceptions***

If complaints about fears and nightmares are intense or new and unusual for your child, if your child's distress seems to be severe, or if your child consistently has great difficulty falling or staying asleep even after following the bedtime ritual, you should seek the help of a child psychologist, psychiatrist, or a pediatrician to determine if there is a disorder requiring professional attention further evaluation and treatment.