## Getting Your Baby to Sleep on a "Normal" Schedule<sup>1</sup>

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Given that newborns sleep 15 or more hours a day, how can it be that they always seem to be up half the night? All babies challenge their parents when it comes to getting into a sleep schedule that allows other family members to sleep too. But as your baby approaches her first birthday and beyond, her sleep patterns should become more normal or typical. That is, she may take a morning and afternoon nap but do most of her sleeping at night. The number of times she wakes during the night should also decrease.

Some infants and toddlers who are visually impaired struggle when it comes to sleeping on a "normal" schedule. No one knows exactly why they have such a hard time learning to regulate their sleep. One widely held belief is that a baby who has trouble seeing doesn't observe the light changes in the environment that sighted babies do. Your little girl may not be able to see the sun going down, signaling nighttime and triggering sleep reactions in the brain. There are studies underway to find out if the visual system stimulates the production of the chemicals that trigger these sleep reactions. Other theories speculate that the perception of light is tied into the body's rhythms, which includes sleeping and waking.

## **Changing Sleep Patterns**

Here are some ways you may help your baby develop normal sleep patterns.

**Establish a bedtime routine.** Choose a combination of pre-bedtime activities that you and your child enjoy and find calming, such as a bath, lotion, massage, reading, and/or singing. Regardless of the combination of calming activities, consistent implementation of the routine is essential.

Try to get your baby in the habit of sleeping only in her crib or bed, rather than napping on the couch or in her playpen. If she started sleeping with you early in her life, begin to move her into her own bed as soon as you're comfortable doing so. It's important that she learn where she's expected to sleep. If she only sleeps in her crib, she'll come to recognize that when she's put there, it's time for sleep and that the crib or bed is her special "space."

**If your baby wakes up during the night,** try waiting a short time before picking her up to see if she can settle herself and go back to sleep. All babies wake up during the night, and it takes them a while to learn to let themselves go back to sleep.

**If you need to go to your baby during the night,** use a soft, calming voice and, if your baby has low vision, keep the room dim. Have everything you might need—diapers, wipes, bottles—nearby so that you don't have to make noise looking for them.

<sup>&</sup>lt;sup>1</sup> <u>https://familyconnect.org/browse-by-age/infants-and-toddlers/growth-and-development-iandt/getting-vour-babv-to-sleep-on-a-normal-schedule/</u>



If your baby is sleeping in uninterrupted blocks of hours, but not at night, try limiting the length of her naps during the day. You might have to do that gradually, taking 10 minutes off her nap times each week. Although there's a lot of variation among babies, they often take three naps a day, averaging a total of four to six hours of naptime until they're four to six months old. By six to nine months, they may nap only twice a day, and the time often decreases to a total of two-and-a-half to four hours. As they approach their first birthday, naptime may go down to two to three hours. By age two, a toddler may be napping only once a day for two hours or less. By age three, most children are taking only one nap a day, averaging an hour or so of naptime. Keep in mind that if your child is taking medication, it may affect her sleep schedule. Check with her doctor about what to expect with regard to her schedule for napping.

**Active children are more likely to sleep regularly.** Keep your child engaged in activities as much as possible throughout the day, so when it is naptime or bedtime, she'll be ready to close her eyes and go to sleep.

Some children with visual impairments are helped by doses of melatonin, a naturally occurring substance produced in the brain and thought to be linked to sleep. Ask your baby's doctor if this substance or another substance might be useful.

Finally, if your baby's sleeping is fitful and you're receiving <u>early intervention services</u>, keep a diary of your baby's sleep and wake times and share the information with your early intervention team. Team members who have worked with a wide range of families may have helpful suggestions you haven't thought of for getting your baby on a more regular sleep schedule.