Sleep and the Looked After Child

The ability to initiate and maintain sleep is closely related to aspects of stress regulation and vigilance (i.e., arousal). Individuals who regularly experience high levels of vigilance or who perceive their environment as unsafe are vulnerable to sleep disturbances. Sleep and vigilance are competing, incompatible states that are greatly impacted by perceptions of safety and threat. For humans to engage in sleep, perceptions of safety are essential.



For young children, it is normative to perceive night as a fearful time and to request "curtain calls" after the lights are out to provide soothing gestures and to address fears. Looked After Children may experience bedtime differently because they may not view carers as sources of regulation of normative fears due to compromised attachment relationships. Furthermore, night time and darkness may be directly associated with

experiences of abuse, thus further increasing anxiety around bedtime. Given the strong relationship between sleep and daytime problems, if sleep is adequately addressed, some daytime difficulties may also be alleviated for these children.

Despite strong evidence that stress inhibits a child's ability to obtain adequate sleep, there is evidence of resilience in children experiencing multiple stressors. Factors that have been related to increased quality, quantity, and regularity of sleep include a consistent sleep schedule, secure attachment with a primary caregiver, responsive and warm caregiving, and a contingent and consistent environment. Establishing predictable routines during the day will also support the quality and quantity of sleep at night. As outlined above, a primary factor is to encourage the process of "attunement" (a powerful emotional connection in which the caregiver recognises, connects with, and shares the child's inner states) with a responsive caregiver. This will help your Looked After Child identify, organise, and work through their emotions. That attunement, more than "crying-it-out", is what will rewire your child so that they develop genuine self-soothing skills. It is important to note that most health professionals do not recommend sleep training that involves prolonged crying. If possible, get support so that you can be more emotionally and physically available at night, and try to think of these night time interactions as an opportunity for bonding, and a way to repeatedly show your Looked After Child that she is loved, safe and well-cared for.

Top Tips

- Keep things dim in the hour before bedtime, dark at night except for a dim nightlight (if necessary) and brightly lit through the day.
- Physical handling and eye contact are potent stimuli that can boost adrenaline levels for the Looked After Child. Keep the physical play and long intense gazes for daytime.
- Use sleep logs to keep track of signs of tiredness and when he/she actually falls asleep.
- If night wakings occur, be responsive to their needs but ensure that it is boring and minimalist and not overstimulating. Use quiet, reassuring language. If you suspect night terrors, do less. They are often more distressing for you than your child and sleep experts discourage waking the child.