Bedtime Strategies

Bedtime Strategies

When your head hits the pillow at night, do you quietly drift off to sleep with no problem? If you do, you are the envy of many of us who have quite another experience which is to contend with the deluge of thoughts and emotions that swirl around and keep us awake for some time. The day's stresses, unresolved problems, plans for the next day, or even mentally working over a budget can seem to press against us just at that time when we need to relax and restore ourselves before the next day is upon us. Does it come as any surprise that some children find themselves in a similar situation when bedtime comes? Only for kids it is a different experience because they can't begin to think through their struggles. Rather they get an emotional discomfort, which they attempt to discharge through acting out. They get out of bed, ask for a drink of water, go to the bathroom, complain that they had to stop playing too soon, say they aren't sleepy yet, and if all this fails, cry or throw a tantrum until they successfully get someone's attention. They simply are not ready to pack it in. For some, this turns into a nightly bedtime struggle that plagues tired and overworked parents, and keeps everyone from getting the rest they need. So how can parents successfully turn this around and make it a peaceful end to the day that leaves everyone satisfied and happy?

We have found that one of the most effective strategies for dealing with bedtime struggles is to establish a regular routine that begins around 45 minutes before you plan to leave your child's room for the last time of the night. The purpose of the routine is to begin a winding down process, and to foster a sense of connection and closeness that reestablishes the bond between you and your child that may have been tested by the stresses of the day. Many children struggle at bedtime because they have lost that connection over the day (or even over the week), and leaving the parents at bedtime exacerbates that feeling of separation. We suggest the following routine to help deal directly with this problem.

Approximately 45 minutes prior to the appointed time, announce bedtime will be at such and such a time (this should be the same time each night with the exception of weekends). Point to the hands on a clock to demonstrate. If your child is older and can tell time, that works even better. Let them use their own clock to monitor the time. During the next fifteen minutes finish all television programs, play, or other activities, and put toys away. Begin the process for preparing for bed such as changing into pajamas, brushing teeth, going to the bathroom, etc. Move to the child's bedroom and proceed with your special ritual. This may be telling or reading a story, or simply talking about the day. Jane Nelson (*Positive Parenting*) suggests that you ask your child to describe the happiest thing that happened to them that day, and then the saddest thing. (You can also word this as the "best" and "worst.") This gives you a chance to find out what's on your child's mind, and gives her a chance to discharge any negative emotions that are bothering her. It also strengthens the bond between you. When finished, you might allow your child to spend another ten to fifteen minutes looking at a book before drifting off to sleep. You can call this her "quiet time." Make it clear that she is not to get up again, and you will not come back to her room again for any reason other than to put her back in bed. If she comes out, pick her up and put her back in bed. Do this as many times as is necessary until she stays there. Most kids will not need to go through this many times before they realize they are in bed for the night. Refrain from becoming angry or frustrated yourself, and act firmly and neutrally.

You may find that at first you have a good deal of difficulty in trying to establish your routine. Remember that children sometimes do not make transitions easily, and this would be particularly true for children who have previously been successful in extending their bedtime through acting out behaviors. The idea is to stick to the routine until your child accepts it, and in fact begins to look forward to it. If you find, however, that you continue to have bedtime struggles after trying this for several weeks or so, then you need consider whether or not your child has enough time with you outside of bedtime. As implied above, children who have too little positive contact with parents are often those that have chronic bedtime struggles. They are simply letting you know that they need more attention from you. Try extending your playtime during other parts of the day, and on the weekends. Not only will bedtime become a more pleasant experience, but you may find that your child is easier to handle all the way around. Sweet dreams!

Children's Nightmares

The occurrence of children's nightmares is a problem that comes up rather often in my work with parents. This is especially true for parents of children ages four to six. Usually the nightmares are similar and include monsters or other fantastic creatures that are threatening the child's demise. Sometimes they awaken the child in the middle of the night requiring the parents to comfort and reassure them. Persistent nightmares often worry parents, but the truth of the matter is that these kinds of nightmares are quite normal for certain age groups, and are related to particular developmental tasks. Let me provide a quick summary.

Children begin having symbolic dreams around the age of two, but usually don't begin to report them with any regularity until around three. Even at this age they may not be able to distinguish very easily between the dream and reality, yet they can report some of the dream content. By five children will be able to realize that they have had a scary dream upon awakening from a nightmare, although they may still feel the effects of the dream for some time after they have awakened.

Nightmares are frightening dreams that are usually reflective of children's emotional conflicts, particularly those related to developmental tasks. For example, toddlers who are working with the issue of separation may have dreams about losing their parents, not being able to see them, or not having physical access to them. Youngsters working on toilet training may have dreams that symbolically reflect parental disappointment, or a loss of approval and love. This might be particularly true if the youngster is having some difficulty with soiling and feels unsuccessful in his or her parents' eyes. Between the ages of three and six, there is an upsurge in nightmares brought on by two particular aspects of emotional development. These are the awareness of aggressive drives and sexual impulses. Note that I said "awareness." Children do display aggressive behavior earlier than three years of age, but they aren't really very aware that the aggression is coming from within them until sometime after three. The increase in awareness goes hand in hand with the development of a self-concept that is crystallizing around the same time. As children become aware of themselves as separate selves with their own emotional life, they also become very acquainted with their negative emotions such as anger, jealousy, envy, wrath, and so forth. Nightmares serve a particular purpose in relation to aggressive drives. They allow the child to project into a dream the intensity of the emotions which are overwhelming to them, and then react to their own projection as though it was "out there" and could get them. The monster is nothing short of a representation of the child's aggressive impulses by which he is feeling overwhelmed and of which he is afraid.

Sexual impulses play out a little differently. Around the ages of four or five, children become very aware of their gender differences. They realize they are either a boy or girl, and begin to make identifications with the same sex. Conversely, they may feel some attraction for the opposite sex, which at first shows up in their relationships with their parents. This is the stage where little boys talk about growing up and marrying mommy, buying her house, and setting daddy up in a house next door. Little girls tend to flirt with their daddies, dress up for them,

primp in front of them, or maybe rough house more with them while mommy is excluded. The nightmares related to this developmental stage are usually called oedipal nightmares and revolve around the alternating conflict of wanting to replace the parent of the same sex in the eyes of the other parent, and guilt about having such feelings. Or sometimes the dreams reflect the child's fear or recognition that the parent whom he desires to replace is bigger, stronger, and more powerful, and ultimately capable of winning the battle. Again, the powerful dream representation in the form of monsters and huge, hulking creatures serve the purpose of acting out the child's conflict.

What's important for parents to recognize is that most of these nightmares are quite normal, and will pass by the time children reach seven to eight years of age. In the meantime, the parent's job is to be as soothing as possible when they occur, and to make some allowances for dealing with the child's fear. Keep in mind that these dreams are truly frightening. You can best calm your child's fear by allowing them to tell you about it, and then confirming for them that you are in control and can protect them. Remind them they have had a dream. You may have to spend some time in the middle of the night soothing them, and perhaps even stay with them for some time until they fall back asleep. Make use of night-lights, leave doors open, or maybe leave hall lights on. This is not a time to "tough it out."

QUICK TIP: Avoid violent television, movies, stories, books, or any type of media that is scary. Also, children ages three to seven are particularly adversely affected by arguing or aggressive behavior by other family members, and you will most likely see an increase in nightmares if they are exposed to this type of stress. If nightmares persist after seven years of age, consider seeking professional counseling.