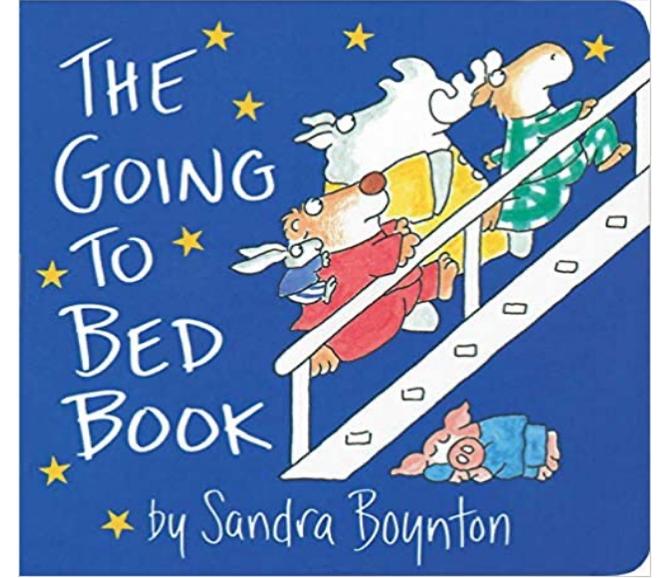
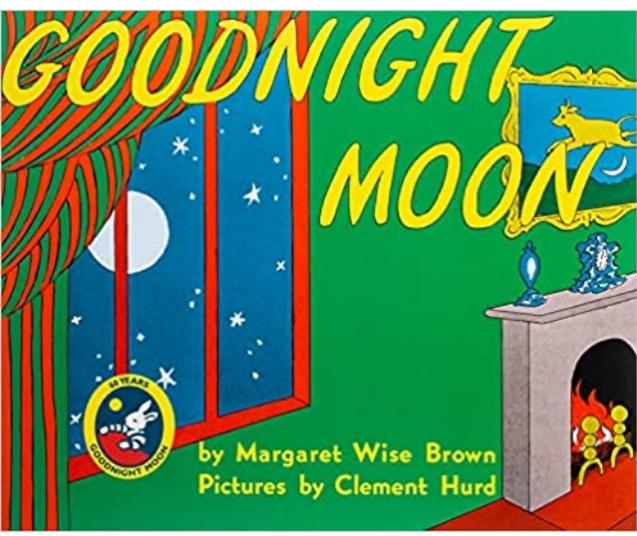


Sleep for Foster Care Children

Encourage each child to get the sleep they need each night





Introductions

Amy Wolfson, Ph.D.
Professor of Psychology
awolfson@Loyola.edu

Josie Munoz Nogales
Research Assistant
Loyola U. MD, Class of '22

Maddie Valentine
Research Assistant
Loyola U. MD, Class of '22





Background

Importance of Sleep

- Healthy lifestyle includes getting enough quality sleep.
- In short-term, lack of sleep can make you feel irritable, moody, impulsive, & can affect memory, learning, creative thinking.
- Lack of sleep or irregular sleep can affect health, and is linked to health conditions such as obesity in children and heart disease and type 2 diabetes in adults.

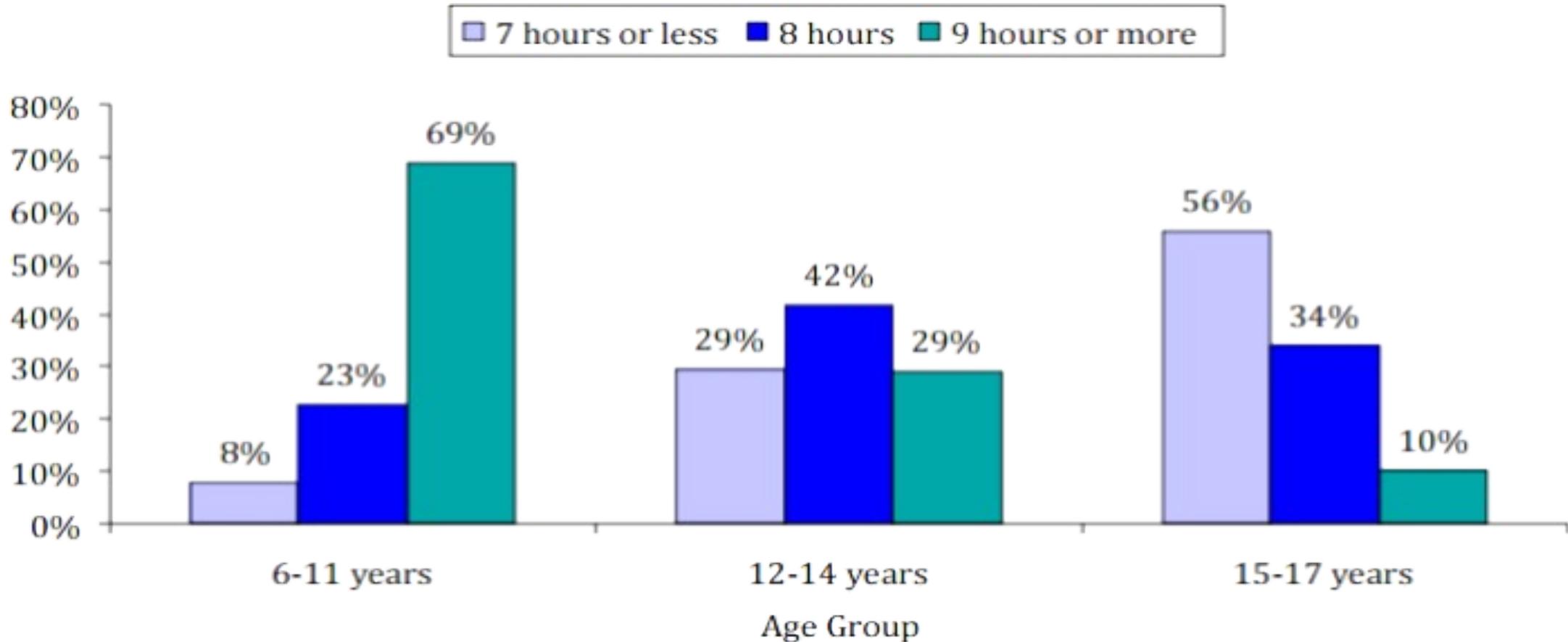


Sleep Duration recommendations for youth

- Children and adolescents need quality sleep to function their best.
- Hours needed vary, depending on age.
- Children aged 5-11 years: ~ 9.5 – 11 hours.
- Adolescents aged 11-18 years: ~ 8.5 – 9.5 hours.
- How much sleep do adults need?
- Most adults need between 7-9 hours of good quality sleep a night to function at their best!



How Much Sleep do Children Obtain?





Assessment

The BEARS

Owens & Dalzell, 2005



The BEARS

- Brief, easy to remember pediatric sleeping screening instrument
- Bedtime problems
 - Difficulty going to bed falling asleep
- Excessive daytime sleepiness
- Awakening during the night
- Regularity of sleep/wake cycles
 - Bedtime, wake time, and average sleep duration
- Snoring

Prevention

Regular Screening During Well Pediatrician Visits

Snoring

Pitch, quality, pauses, intensity, onset, frequency, duration

Sleep Patterns

Timing, restlessness, sleep positions, behavior during sleep, noisy arousals

Functioning While Awake

Development, school performance, personality, morning headaches, hyperactivity

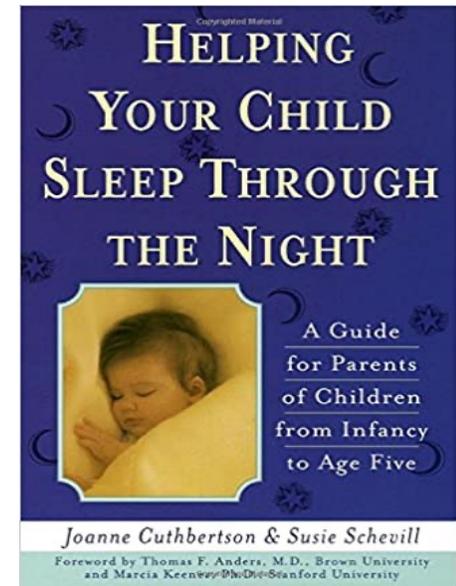
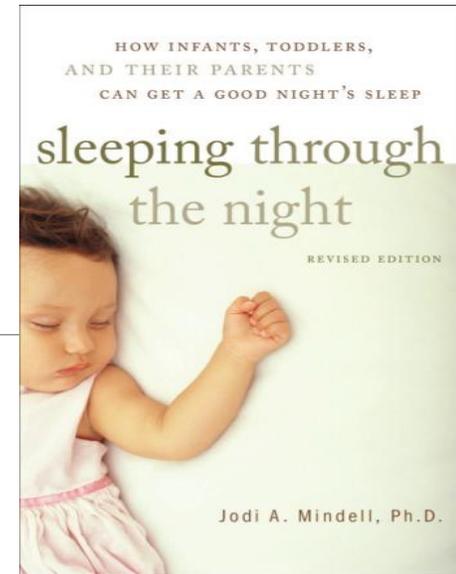
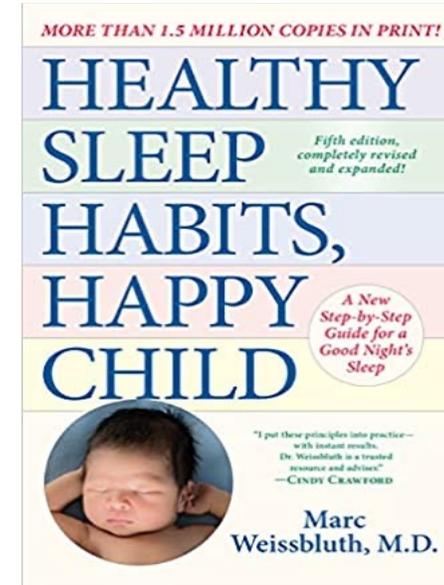
Growth

Failure to thrive, obesity

Preventing Sleep Problems

75% of sleep problems resolve with improved sleep habits

- Relaxing bedtime routine is important way to help your child get a good night's sleep.
- Create a 'sleep friendly' bedroom – a dark, quiet, cool environment
- Once they're in bed, encourage your child to read quietly or listen to some relaxing music, or read a story together.
- Avoid giving your child large meals just before bedtime.
- Encourage physical activity during the day.





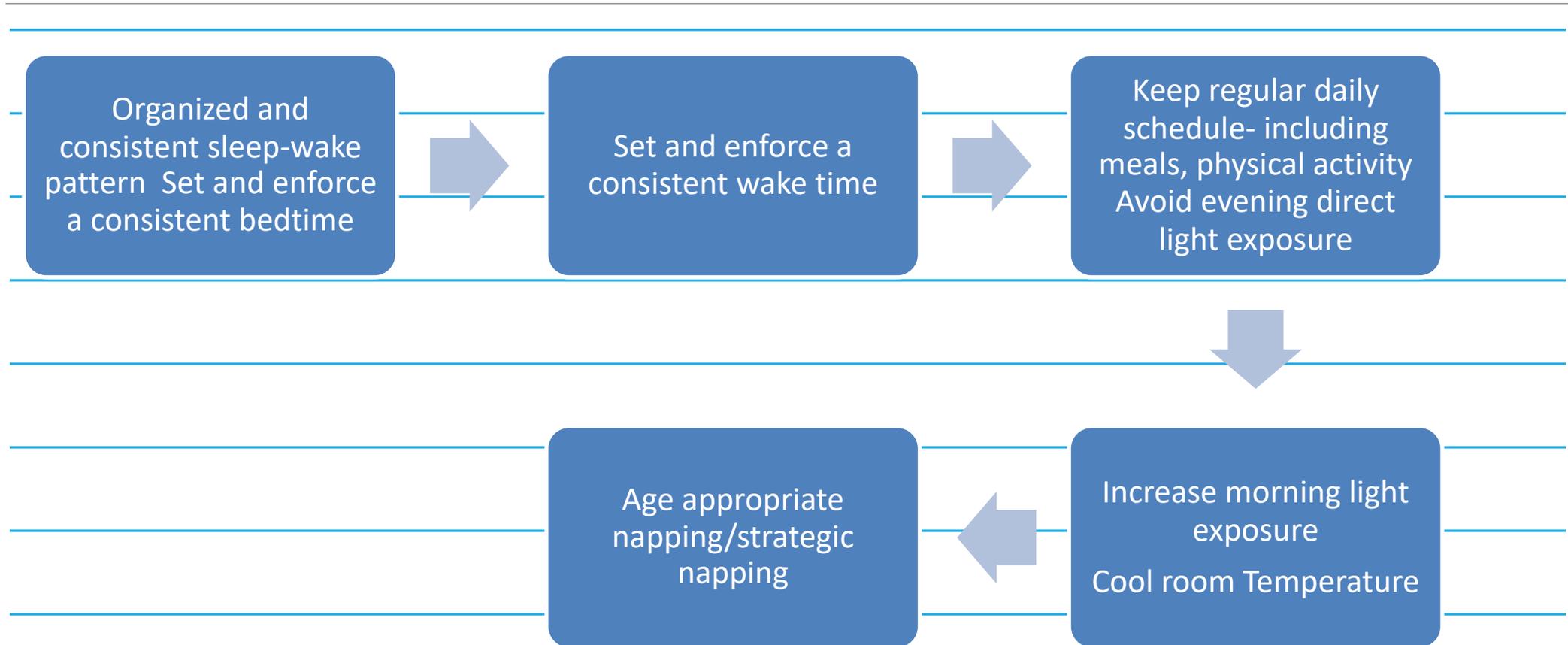
Intervention

Intervention

Behavioral Treatments Work!

- 80% of children improve
- 94% of studies report intervention was efficacious
- Treatments are typically short-term

Practices to Promote Sleep Regulation



Practices that Promote Healthy Sleep Conditions

Regular and consistent bedtime routine (3-4 activities in same order)

Limit activities that promote wakefulness while in bed

Don't use bed for punishment or staying up as reward

Avoid sleeping anywhere else
Bed is only for sleep

Practices that Reduce Arousal and Promote Relaxation



Reduce stimulating play at bedtime

Avoid heavy meals 1-2 hours before bed

Limit/eliminate caffeine!!!!!!!!!!

Calming activities at bedtime- reading, listening to music

Soothing sleep environment

Keep electronics out of bedroom & limit use before bedtime

Plugged in and Wired Up

97% of adolescents have at least 1 electronic device in their bedroom



Why not? Directly displaces sleep, replaces good sleep and health practices, increased mental/emotional/physiological arousal. Blue light exposure, electromagnetic radiation cell phones delay melatonin onset and alter sleep architecture

Bedtime Problems

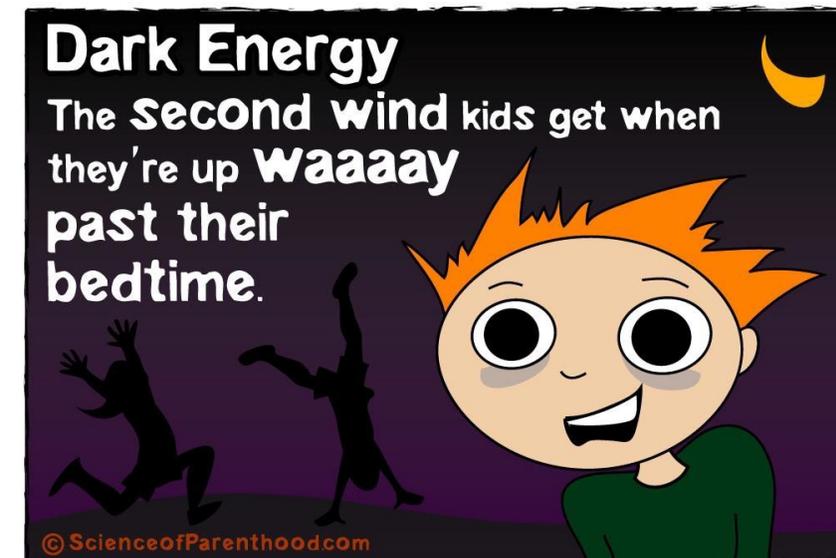


Behavioral Insomnia of Childhood: Difficulty Falling Asleep

- Arguing about going to bed, stalling
- Curtain Calls (e.g., one more hug, can I have a drink? Can I have a snack?)
- Leaving the bedroom
- 10-30% of preschoolers; 15% of children 4-10yrs

Bedtime Resistance

- Conceptualized as problem of parent-child interaction
- Might include anxiety, fears
- Look for noncompliance, tantrums, etc.
- “Second wind”
- Attend to child’s natural circadian rhythm (clock)



Bedtime Resistance Recommendations/Strategies

- Keep regular sleep/wake schedule
- Try bedtime fading
- Maintain bedtime routine
- Consider a transitional object (stuffed animal, blanket, t-shirt, etc.)
- Positive reinforcement over punishment
- Attend to when your child is awake vs. drowsy
- Avoid engaging in arguments with child



Prolonged Night Awakenings

Behavioral Insomnia of Childhood: Waking up and trouble falling back to sleep!

- Inability to initiate or maintain sleep unless certain circumstances exist (e.g., the parent) being present to initiate sleep
- Sleep associations (e.g., need parent, lights, fears, transitional object, etc.)
- Most of the time, if you fix the problem at bedtime, prolonged awakenings stop
- 15-20% of preschool and school-age children

Interventions-Approaches

Unmodified
extinction (Cry
it out)

Graduated
extinction
(Walking chair)

Sleep fairy

Extinction
with parental
presence

Bedtime pass

Nightmare vs. Sleep Terror



Nightmares:

- Last a third of night
- REM sleep
- Often awakened from sleep
- Good recall

Sleep terrors:

- First few hours of night
- NREM sleep
- Agitation, confusion, disorientation
- Amnesia for the event

Medications?????

- Prescriptions
- Melatonin
- Antihistamines
- “Natural” Remedies
- No sleep medications including hypnotics FDA approved for children under 16
- Pediatric sleep psychopharmacology one of most poorly researched areas



Thinking about the children under your care!?

- How many hours of sleep does your child usually get?
- What might be some reasons your child slept well or didn't sleep well during the night?
- How does your child usually feel when they wake up in the morning?
- What are some of your bedtime routines?

Foster Caregivers' Perceptions of Children's Sleep Patterns and Sleep Environment

Methods

- Collaborative study with a team of researchers from University of Houston (C. Alfano), Farleigh Dickinson University (E. McGlinchey), and Pajama Program (C. Ripple).
- Foster caregivers of children ages 4-11 throughout US invited to complete *Sleep Health among Children in Foster Care* Qualtrics Survey via foster care private Facebook groups.
- Included quantitative and qualitative questions focused on sleep patterns and emotional/behavioral well-being.

Participants

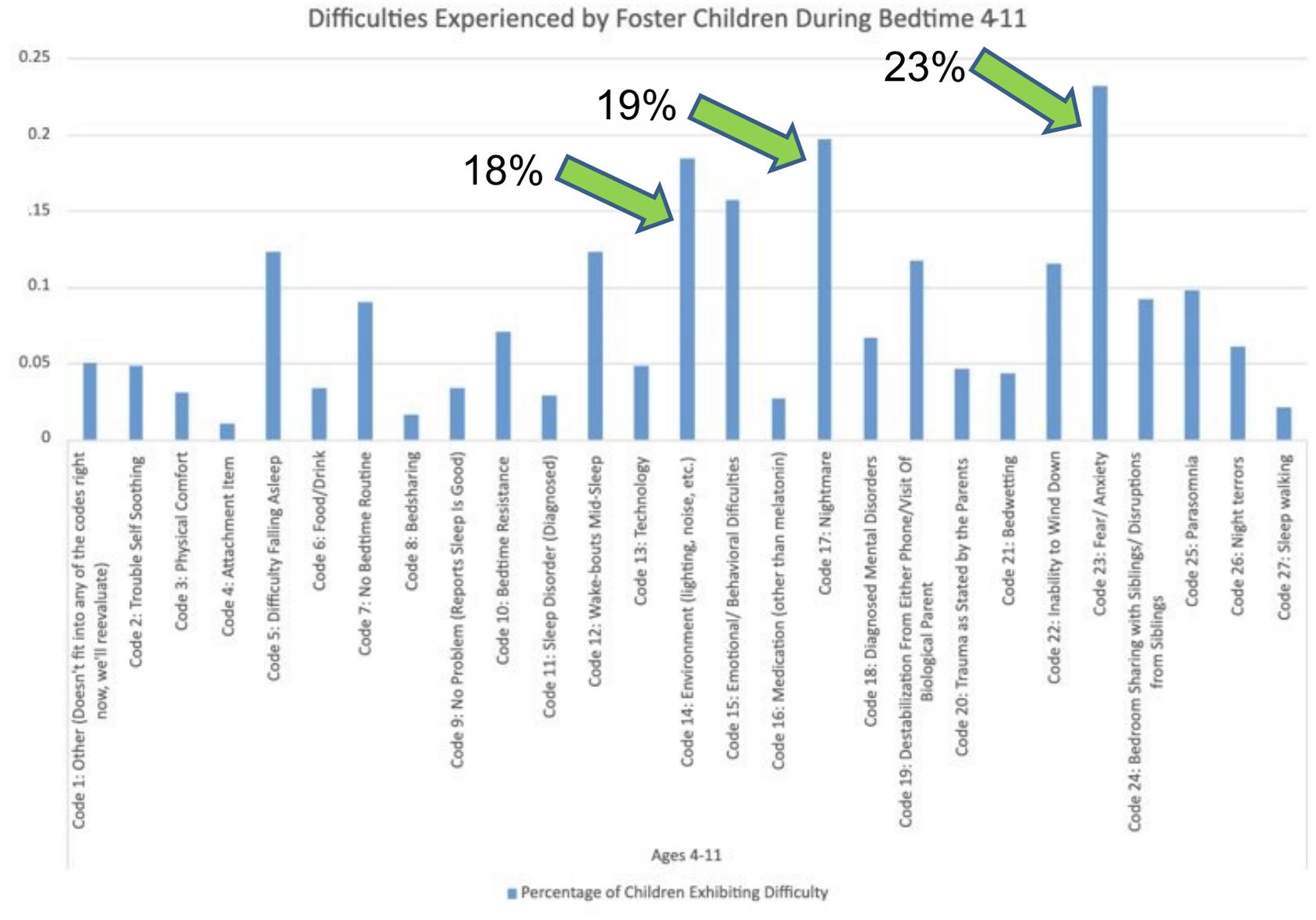
- 485 total participants
- Mean age of child: 6.4 years old
- Sample nearly 50% male/female
- Level 1 or 2 Care: 81%
- 72% of caregivers are married
- 72% of caregivers had at least a college degree

Sleep Concerns: Key Findings

- Foster caregivers receive minimal training/education about sleep but frequently seek sleep-based advice and/or services from health care providers.
- On average (scale 1-10), sleep quality was rated a 6 (mediocre).
- Compared to other children, sleep schedule & duration not vastly different, however, **more sleep related problems** (McGlinchey et al., 2022).
- 12% reported that their child took at least 1 prescription medication for sleep problems.
- 50% caregivers reported having given their child over-the-counter medication for sleep, with majority reporting use of melatonin (91%).

Open-Ended, Qualitative Findings

1. Fear/Anxiety
2. Nightmares/
Night terrors
3. Environment (e.g.,
disturbances
from noise and light)



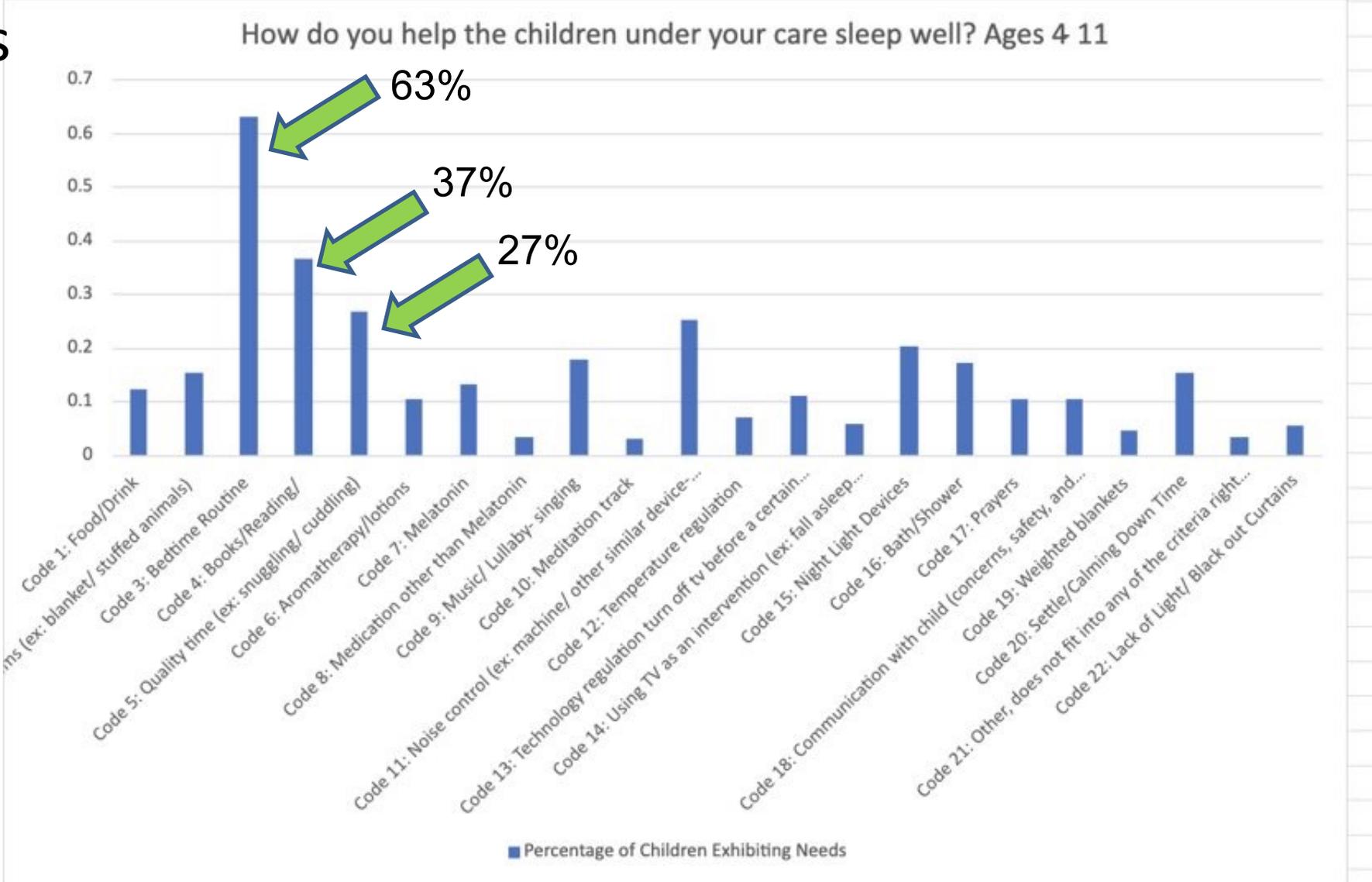
How are the Sleep Problems of Children in Foster Care System being Addressed?

Key Findings

- Only 13% of foster caregivers reported that their foster care agency provided them with information about children's sleep.
- 55% of foster caregivers reported having spoken with a healthcare provider about their child's sleep.
 - Among caregivers that spoke with a healthcare provider, most common recommendations:
 - melatonin (35%)
 - keeping consistent bedtime routine (22%)
 - prescription medication (19%) (Alfano et al., in press)

Open-Ended, Qualitative Findings

- 1. Bedtime Routine
- 2. Books/Reading
- 3. Quality Time (e.g., snuggling, cuddling)



Conclusions

- Foster caregivers perceive that fear & anxiety interfere with sleep of preschool and school aged children under their care.
- Foster caregivers report that children require a bedtime routine, consistency, & reassurance of safety to sleep well.
- Foster caregivers acknowledge that fear & anxiety interfere with the children's sleep, and they have developed some strategies to help them.
- Sleep health of foster care children is an area that we must continue to study and provide education and interventions!

Questions?

