For Parents and Caregivers Dealing with a Child with Bedtime Fears

The following contains a description of the strategy used in *Goodbye to Bedtime Fears*. The children's book enhances the strategy, as it provides an aspirational role model for your child; however, you might prefer to try out the strategy without the book. The information below is not meant as a substitute for professional assistance. If you need that level of support, it is recommended that you engage the services of a competent professional.

Summary of the Strategy:

The strategy, which is described in greater detail below, essentially involves having your child, at bedtime, spend increasingly longer amounts of time alone, in their own bed until, eventually, they're able to fall asleep on their own.

The strategy will start with your child's bedtime routine. The bedtime routine typically involves some variation of the following: changing into pajamas or nightgown, brushing teeth, getting into bed, reading stories, some cuddles and a sweet "nighty night". At this point, you'll leave the room, for a pre-arranged short period of time. You'll want to pick a period of time that your child can tolerate. This initial pre-arranged period of time might be as brief as a few seconds. The long-term goal is to have your child be able to fall asleep in their own bed by themselves. But the short-term goal, in the beginning, is simply to demonstrate to your child that, indeed, they really can stay in their bed all by themselves. It would be the rare child that would struggle with staying in their own bed for a few seconds, especially once they understood that that was all that they had to do. And these few seconds that they are able to stay in their own bed show your child that they really can stay alone in their own bed. Never mind that it's just a few seconds. The fact is; they did it!

Once your child can manage the initial brief period of time being alone (and it doesn't have to be as short as a few seconds) you can then try leaving your child's room for a somewhat longer period of time.

Keep in mind that you'll need to return to their room repeatedly, after the prearranged time interval, until they fall asleep. Eventually, over time, your child will see that they actually can stay in their own bed for however long it takes to fall asleep each night. Then, voila, you have a child who falls asleep on their own.

The Strategy in Greater Detail:

Explanation of the Principles of a Gradual Exposure Strategy:

The strategy used in the book involves the use of what is technically known as "gradual exposure" or "gradual extinction," and it is similar to the popular Ferber method. It should be noted, though, that Ferber does not recommend strict adherence to his standard procedure when the child has bedtime fears. The book, and the strategy below, incorporate the sorts of modifications that would be involved when bedtime fears are contributing to sleep problems in children.

In using an exposure approach to treat a fear or phobia, it is important to adjust the amount of fear that the individual is exposed to with levels of fear that the individual can tolerate. People, adults and children included, have different levels of fear associated with whatever fear or phobia that the exposure approach is being used to address. Ordinarily, the approach starts off with exposing the individual to a small dose of the fear, and then, as the individual demonstrates the capacity to manage that small amount of fear, the dose of fear is increased. Ideally, this process is done with the consent and collaboration of the fearful individual.

Typically, the initial length of time that you'll leave your child alone in their room will be very short, and, as your child demonstrates the capacity to manage that initial length, you'll increase it. Over time, you'll be increasing the length of time your child will be alone until your child is able to manage bedtime, start to finish, on their own. You'll be discussing with your child the lengths of time that you'll be away from their room, and, ideally, you'll have their consent and collaboration. No worries if your child is too young or too frightened to collaborate. The procedure can still be successful without their consent and collaboration.

You'll also want to discuss the strategy with your child before you do it. Many parents find it helpful to have this discussion one or more days in advance of using the strategy, to give their child time to ask questions and prepare for the experience. Should you do this and your child becomes increasingly anxious as the start date approaches, you'll want to reassure them that you'll be there to help them deal with their worries.

Below is a detailed description of the procedure, as well as a number of pointers that will help you to be effective in helping your child overcome their fears. Your child's

success will depend on the extent to which you are able to incorporate, as needed, the information offered below.

The Basic Steps of the Procedure Used in the Book:

The procedure essentially involves the following steps:

- 1. Engage in a soothing bedtime routine.
- 2. Say goodnight to your child, reminding them that you'll be returning periodically to check in on them.
- 3. Leave their room.
- 4. Return to your child after the prearranged short period of time; and briefly engage with them. This might involve merely making eye contact with them as you stand in the doorway, or it might involve offering a swift token gesture of reassurance at their bedside. You want to provide the minimal amount of connection needed in order for them to remain in their bed.
- 5. Then leave again.
- 6. Repeat steps 4 and 5, until your child has fallen asleep.
- 7. Once you and your child have completed enough nights during which they've successfully tolerated your absence from their room without getting out of bed and calling you, you'll want to increase the period of time that you'll be gone. If your child is sufficiently old enough and mature enough, you'll want to discuss this plan with them, and arrive at a period of time that is mutually agreeable.
- 8. Repeat steps 1 through 7 until you have a child who is able to fall sleep on their own without you needing to return at all.

A Sample of The Basic Script of the Procedure Used in the Book:

Pre-procedure discussion with your child:

"Honey, Daddy and I (or whomever is/are the caregivers) have been thinking about how scared you are at bedtime. You get very upset when we tell you that we're finished with

reading stories and saying goodnight, and that we're going to leave. And sometimes you cry. And sometimes we get frustrated and angry about the situation. And sometimes we yell at you.

"We feel so sad about how hard it is for all of us. We know that you don't want to be scared and that you don't want to get upset. And we certainly don't want to get angry with you. So we're going to try to do things a little differently. We're going to try an approach that we think will help you to be able to stay in your bed, all by yourself, when we leave your room. We'll do our normal bedtime routine. You'll get into your pjs, you'll brush your teeth, we'll read some books, we'll cuddle, and then we'll say our "goodnights."

"And then we'll leave your room, but just for a teensy bit of time. Then we'll come right back to check on you. You need to stay in your bed when we leave the room. And you can't call out for us. But, remember, we'll only leave for a very little bit of time.

"And we'll do that over and over again, until you fall asleep. We'll come back to check on you, and then we'll leave again. And then we'll come back and check on you. And then we'll leave again. And then, pretty soon, it will be morning, and we'll have a whole new day to be together."

Here's the part where you discuss with them, if you feel that they're mature enough to have the conversation, how long you'll be gone from the room. It goes like this:

"We're thinking that, right now, you're able to be alone in your room, in your bed, without calling for us, for about one minute. How does that sound to you?"

Depending on your child's response, you'll negotiate an amount of time that seems reasonable, realistic, and enforceable.

Procedure:

Step 1: Engage in a soothing bedtime routine.

"Sweetheart, it's time for bed now.

"Let's put on your pjs. Good job!

"Let's brush your teeth. Very nice job!

"Let's read your books.

"Right now, I'm going to give you the biggest hug ever."

Step 2: Say goodnight to your child, reminding them that you'll be returning periodically to check in on them.

"After I say "goodnight" to you, I'm going to leave. Remember, you have to stay in your bed. And you can't call out for me. But remember, honey, I'm only going to be gone for a teensy bit of time. And then I'll be right back. You'll see. I know you can do it! I'm going to be so proud of you.

"Nighty night."

Step 3. Then leave.

Step 4. Return to your child after the prearranged short period of time; and briefly engage with them. You might be able to do this effectively by only making eye contact at the doorway. Or you might feel that your child won't stay in their bed unless you come by the bed and whisper something short and sweet. Use whatever it takes to reach the goal of demonstrating your reliability and trustworthiness in returning to the room in combination with ensuring, to the best of your ability, that they'll remain in their bed when you leave.

Step 5. Leave again.

Step 6. Repeat steps 4 and 5 until your child has fallen asleep.

Step 7. Once you and your child have completed enough intervals in a given night (or enough consecutive nights) during which they've successfully tolerated your absence from their room without getting out of bed and calling you, you'll want to increase the period of time that you'll be gone. If your child is sufficiently old enough and mature enough, you'll want to discuss this plan with them, and arrive at a period of time that is mutually agreeable. You might want to have this conversation at a time that isn't bedtime, so that your child won't become anxious all over again about staying alone in their room.

"You've been doing so well; we're so proud of you! I think that we can make the time longer that we're away from your room. How about 5 minutes? How does that sound to you?"

Important Details to Keep in Mind:

Determine a Reasonable Bedtime:

Before embarking on this strategy, you'll want to decide on what time your child's bedtime will be. This occurs at the end of the bedtime routine, and it is the time that

your child begins to try to fall asleep. It is cued with the final "goodnight," which might sound like "nighty night," or "goodnight, sweetheart, sweet dreams," or whatever you'd like, followed up by you leaving their bedroom.

You've probably heard the maxim "drowsy but awake," referring to the ideal bedtime to use when you're training a child to stay in their own bed. Of course, you need for your child to be awake. The whole point of this project is for your child to be able to tolerate you leaving them alone at night while they're still awake, so that they can learn to manage whatever feelings they might have as they gradually drift off to sleep. And the drowsier the child, the more quickly they'll be able to fall asleep. The more quickly your child falls asleep, the less time they'll have to worry and fret about being alone.

So you'll want to start the process of helping your child overcome their bedtime fears when they are drowsy. It may be hard for you to know exactly when your child has achieved the proper amount of "drowsy." Keep in mind that your child may not be sufficiently drowsy if you declare a bedtime that is too early. And they might be overtired and therefore wound up, if you decide on a bedtime that is too late. If you have no idea when to begin, then you may want to consider the amount of sleep time that is recommended for children your child's age, and then subtract this number from the time at which you need for them to get up in the morning. So, for example, if you have an eight year old and you need for them to rise at 6:30 a.m. because you need to take them to childcare before you drive to work, then you might want to subtract ten hours (the time, give or take, that is recommended for an eight year old), which would put you at an 8:30 p.m. bedtime. This might not be your child's best bedtime, but it's a start in your effort to try to determine what their "drowsy but awake" bedtime should be.

Create a pleasurable, calming bedtime routine:

You'll want the routine to begin about 30 to 45 minutes before bedtime. It is common to start the routine at some point in the evening when your child is not in the bedroom, with an announcement that it's time to get ready for bed. This is often followed up by having your child put on their pajamas, brush their teeth, get into bed, have a story, enjoy some cuddles and then share "goodnights."

Whatever routine you choose, make sure that the sequence is consistent, that is, exactly the same each night. It may help to know that the results of a recent multinational study pertaining to children's bedtime routines showed that a regular, consistent bedtime routine was associated with better sleep outcomes. Children with consistent bedtime routines fell asleep more quickly, had reduced night awakenings, had increased sleep duration, had decreased sleep problems and had fewer daytime behavior problems.

Determine the Length of Time that You Will Be Gone from Your Child's Bedroom:

A most important detail in the strategy is the length of time that you are gone from your child's room. Fear can be very powerful and extremely painful. If your child is petrified of staying alone in their room, then just a minute will seem like a lifetime. And, if the length of time that you're gone feels too long to your child, then it wouldn't be surprising if they leave their bed, and/or cry for you to return to their room. The more care you put into determining the proper amount of time that you'll be gone from your child's room, the less likely there will be any crying in the first place.

What many families find works well is to start with a very short interval, perhaps even as short as a couple seconds. A couple seconds is basically the equivalent of walking out of the room and then walking right back in. Few children are unable to tolerate a couple seconds' worth of staying alone. In fact, many children will find it rather comical to see their parent walk out and then walk right back in, and most will be willing, at that point, to agree to a lengthier amount of time that their parent will be gone. Walking out and then walking right back in sets the stage for this method by demonstrating that staying alone is, indeed, doable. The fact that your child has stayed alone in their room, even if it is for only two seconds, shows them that, indeed, they can definitely manage their fear of being alone in their room. Once two seconds is doable, a parent can then follow up with leaving the room for five seconds, and then, perhaps, for 15 seconds, and so forth. You needn't start at two seconds at a time. You get the point.

Every child's fear tolerance is unique, and one key to the success of this method is that you use a length of time that your child is able to be manage. It's best if you can discuss this issue with your child prior to starting the program. They're more likely to have buy-in and more likely to be able to tolerate the length of time you are out of the room if the two of you have decided on it together. You may not be able to do this if your child isn't old enough or mature enough to have this kind of conversation, and so you may need to determine the lengths of time based on their emotional and behavioral responses to your decisions about how long you'll be gone. If they cry hysterically, then the time period is probably too long, and you may want to shorten it. If they seem to be lively and relaxed with the time period that you chose, then you might want to use a longer period of time.

Once your child demonstrates the capacity to deal with a given period of time that you are gone, you can then discuss with them how you might lengthen that period of time, or, if they can't communicate the information, then you'll need to gauge this based on their emotional and behavioral responses.

It's worthwhile to keep in mind that if the increments of time that your child tolerates you being out of their room continue to be too short and the pace continues to be too slow, you may want to spend more time doing non-bedtime practice, which is described below, in order to improve your child's capacity to manage fear.

Consider the Use of Non-Bedtime Rehearsal:

Parents whose children demonstrate terror at staying in their room alone for as little as even two seconds, or parents who simply want to speed up the process, find that non-bedtime practice can be very helpful. The kind of practice that is recommended involves having the child spend time alone in their bedroom during the day, at dusk, and at night. The practice doesn't involve the experience of bedtime; that is, the child is not going to be required to the remain in their room until they drift off to sleep.

This practice can be accomplished with a game like treasure hunt, in which they hunt for hidden treasures throughout the house during the daytime, and then at dusk, and then perhaps after dark. At some point, the hidden treasure can be in their bedroom, so that, at some point during the game, they're spending time alone in their room, at first while it is lit, and, eventually, while it is dark.

In the same vein, you might consider a game of hide and go seek, in which, at some point, your child spends a little bit of time hiding, or a little bit of time looking for the hidden person, by being in their room, alone. And the game would take place during the day, at dusk, and once it is dark outside.

Or you may have your child engage in a contest in which they earn certain prizes depending on how long they can stay in their room alone; first, during the daytime, then at dusk, and then, eventually, when it is dark.

In fact, you may wish to give your child a little prize for each time they have demonstrated that they've managed to be alone in their room, for however short a period of time.

Indeed, there is research that shows that children who have participated in various games such as these have ultimately been able to conquer their bedtime fears, without using the graduated exposure strategy demonstrated in the book. The mere fact of playing games that involve gradually increasing amounts of time spent alone in an increasingly darkened room is itself a graduated exposure strategy to conquer bedtime fears.

Remember the Importance of Parental Reliability and Trustworthiness:

Another important detail in this procedure is the level of your trustworthiness. If your child is old enough to appreciate the amount of time that you have said that you will be gone, then it is, quite simply, imperative that you return at the predetermined time. Your frightened child may well be hanging on by a thread, and if you betray them by not arriving when you said you would, then they'll feel that you don't care about their pain. Remember, fear can be very, very painful, and they may well lose her courage and willingness to pursue this approach to conquering their fear if they can't trust that you'll be back by the time you said you would be back. And even if your child is not old enough to know exactly how long you'll been gone, it's still important for them to feel that you'll return essentially when you said that you would return.

While your child is learning to surmount their fear of staying alone at bedtime, it's important that you continue to leave and return until your child has fallen asleep. Just as demonstrating that you only stay away as long as you and your child have planned for, it is also necessary that you demonstrate that you'll continue to return until they have fallen asleep. You want them to feel safe and secure that, at the end of each interval that you are gone, you will indeed return. If they are still awake and you don't return, they'll become frightened that you don't care about their discomfort. They may then begin to cry and/or leave their bed to look for you, and that may well undo all the hard work that the two of you have exerted thus far in trying to get rid of the bedtime fears. Keep in mind that every human being eventually falls asleep, and so, too, will your child. But it may not occur until the wee hours of the night, and so you may want to start this program during a period of time when you might be able to manage with less sleep, such as, for example, on the Friday night of a long weekend.

Consider the Use of Rewards:

Rewards or prizes can enhance your child's motivation and incentivize them to stick with a program that exposes them to something very painful for them, namely, their fear. You might want to give a very small prize for each interval of time that they are able to stay in their bed. And/or you might, instead, wish to give a reward the next morning, after a full night's worth of tolerating each interval in which you were gone.

Require Your Child to Stay in Their Bed:

Keep in mind that while you can set the rule that your child stay in their bedroom when you want them to, or, more specifically, in their bed when you want them to, you can't require them to fall asleep when you want them to fall asleep. Your child can't will themselves to sleep any more than you can. People can force themselves to stay awake

when they are tired; but they can't force themselves to fall asleep, tired or not. Therefore, you don't want to risk making everyone miserable by telling your child to do something that is impossible to do, namely, make themselves fall asleep. The best they can do is to try. They'll eventually fall asleep, whether you tell them to or not, and, indeed, whether they want to or not. But you can let them know that their job is to stay in their bed on her own, and, hopefully, with this approach, they'll do just that. You won't need to keep coming and going if they no longer require you to be in their room with them at bedtime. In fact, at that point, they will have conquered their bedtime fears.

Additional Thoughts:

Teaching a child to sleep in their own bed, on their own, can be very daunting, especially if the child is very frightened. Even with careful application of this strategy, along with the inspiration that their child will experience by reading the book, along with everything else they've read and tried, some parents still find it difficult to help their child to fall asleep on their own.

And so, if all of this still doesn't work for you, then you may wish to consult with your child's pediatrician, or with a recommended mental health professional who specializes in working with anxious children.

For residents of New York State, Dr. Henig is also available to provide support and guidance, either with an in-person session in her Long Island office or via HIPAA secure teleconferencing. You can contact her by phone (516-933-9758) to arrange an appointment.

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