Establishing Healthy Sleep Habits in Infants

By Dr. Nicky Cohen and Dr. Pamela Mitelman

Sleep – or the lack of it - is a popular topic amongst parents. Sleep challenges are common in infancy and are among the top 5 parental concerns reported to physicians. Common sleep problems include bedtime difficulties, frequent night wakings, early morning wakings, and napping problems. While there is so much information available to parents through self-help books and on the Internet, it can be confusing as to which advice to follow.

Below are some guidelines to help you establish healthy sleep habits for your baby.

**Falling asleep independently:** Babies who are at least 3 months of age can start to learn to fall asleep on their own. Learning this life-long sleep skill is associated with falling asleep more quickly, as well as better night sleep and naps. While the window of opportunity to learn how to fall asleep independently does not close, the earlier a child is given the opportunity to learn, the quicker and easier the process can be.

**Optimal Sleep Environment:** A good sleep environment for a child is important in setting the stage for good sleep. This includes a dark and quiet room, and a temperature on the cool side of comfortable. Low-level white or pink noise (a constant and even sound) can help block noise and can be soothing for a young child. Ensure
that the white or pink noise is not too loud in a child’s room (aim for 30-40 decibels) and is as far away from the crib as possible. Moderate-level white or pink noise can also be used in a hallway to help block household noise.

**Safe Sleep Environment:** Practice safe sleep for every sleep period (day and night). According to Canadian Pediatric Society and Health Canada safe guidelines, the back to sleep position is associated with a decreased risk of Sudden Infant Death Syndrome (SIDS). However, according to these guidelines, once a baby can get to another position (side or tummy) on his or her own, they do not need to be repositioned. Due to the risk of safety concerns, most notably suffocation, always ensure that there are no soft materials in your child’s crib. If a second layer of clothing is needed in the cooler months, a sleep sack is a recommended alternative to a loose blanket.

**Consistent Bedtime and Naptime Routine:** A consistent and predictable bedtime routine is an important step in establishing good sleep habits. A bedtime routine cues to a child that bedtime is approaching and prepares the body for sleep. A routine for a baby may include a bath, getting dressed, a bedtime feed, cleaning gums/teeth, and a song and/or a book. The end of the routine should take place in the child’s room in low-level lighting. A shorter nap routine such as a diaper change, sleep sack (if needed), and song can also be helpful.

**Age Appropriate Sleep Schedule:** Ensure that your baby is on the right sleep schedule for his or her age. By 3-4 months of age, many infants are sleeping 11-12 hours at night. Night feeds are usually needed until a baby is 6-8 months of age (unless the baby has dropped his or her night feeds). Most infants are napping 3 times a day by 4 months of age. It is common for the third nap to be dropped between 7-8 months of age. Make sure to keep your baby awake for long enough between naps. The time that your infant spends awake between naps varies throughout infancy and these wakeful windows increase with age. Keeping a baby awake long enough before a nap helps to ensure that he or she is tired enough when put down. See the table below for guidelines for daytime wake windows for infants.

**Daytime Wake Windows**

<table>
<thead>
<tr>
<th>AGE</th>
<th>WAKE - START NAP 1</th>
<th>END NAP 1 - START NAP 2</th>
<th>END NAP 2 - START NAP 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-3 months</td>
<td></td>
<td>Varieties Widely</td>
<td></td>
</tr>
<tr>
<td>4-6 months</td>
<td>2 hours</td>
<td>2.5 hours</td>
<td>2.5 hours</td>
</tr>
<tr>
<td>6-9 months</td>
<td>2-2.5 hours</td>
<td>2.5-3 hours</td>
<td>2.5-3 hours</td>
</tr>
<tr>
<td>9-12 months</td>
<td>2.5-3 hours</td>
<td>3-3.5 hours</td>
<td>Not Applicable</td>
</tr>
</tbody>
</table>
Pleasant dreams!

Dr. Nicky Cohen is a Registered Psychologist in private practice in Toronto. She received her Ph.D. in Clinical Psychology from York University and developed an interest in parenting issues related to children’s sleep disturbances after having her first child. She is active in the community disseminating information on healthy sleep practices and increasing awareness of the importance of making sufficient sleep a family priority. Dr. Cohen’s book PARENTING YOUR CHILD TO SLEEP is now available in Kindle e-book format and paperback on Amazon.

Dr. Pamela Mitelman is a Montreal based Licensed Clinical Psychologist and founder of The Kids’ Sleep Clinic. She received her Psy.D. from the Illinois School of Professional Psychology in Chicago. Her interest in pediatric sleep disturbances was peaked while assessing children for learning difficulties and was further solidified after having children of her own. Dr. Mitelman is passionate about educating families on the importance of healthy sleep practices.

The information provided by Dr. Cohen and Dr. Mitelman is not intended to be a substitute for professional advice. Individuals are encouraged to speak with a physician or other health care provider if they have concerns regarding their child’s sleep and before starting any treatment plan. The information provided by Dr. Cohen and Dr. Mitelman is provided with the understanding that they are not rendering clinical, counselling, or other professional services or advice. Such information is intended solely as a general educational aid and not for any individual problem. It is also not intended as a substitute for professional advice and services from a qualified healthcare provider familiar with your unique facts.