



**autism**  
oxford uk

NDC Post  
Diagnostic  
Workshop

**Sleep**

Week 7

Hello my name is.....

Tara



Holly



# Recap and Check-in

- How was week 6 – Introduction to the sensory system?
- How is everyone feeling?
- Any positives or learning points in the last week?
- It would be great if people want to share things as we go along.
- Remember this is a safe confidential space.



# How does Autism and ADHD affect sleep?

# How sleep is affected



Individuals who are autistic/ADHD often have trouble falling and staying asleep.

Approximately 80% will have problems with their sleep during their life.

# Sleep, Autism and ADHD

Sleep may be less restorative due to lack of time in the REM (rapid eye movement) stage. For example, most neurotypical people will spend around 23% in REM each night compared to those who are autistic/ ADHD who spend only around 15% in REM.



# Sleep Disorders

**Insomnia** is the difficulty falling and staying asleep. Insomnia can be both occasional and chronic and can also look like waking early. Insomnia can be triggered by anxiety.



# Sleep Disorders

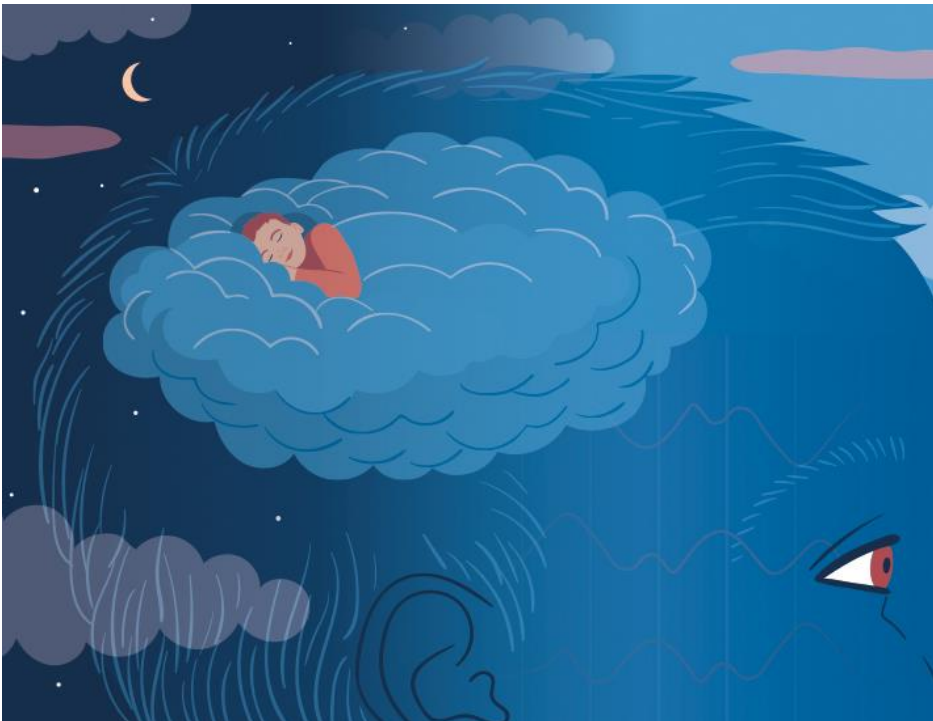


**Narcolepsy** causes people to fall asleep suddenly at what is considered inappropriate times. Approximately 30% of people with narcolepsy are also neurodivergent due to what scientists believe is because of shared pathways in the brain.

**Sleep Apnea** is a condition that affects breathing whilst sleeping often making someone stop breathing multiple times throughout the night.



# Sleep Disorders



**Circadian Rhythm Disorder-** This is when the body struggles time the onset of sleep at the correct time and instead will instead cause people to feel sleepy during the day.

**Hypersomnia-** Sleeping too much, usually as a result of increased exhaustion due to being overwhelmed.

# Parasomnias



- Sleep walking /talking
- Night terrors
- Sleep paralysis



What else can affect sleep?

# Things that can affect sleep

Medication such as stimulants.

Racing thoughts making it difficult to switch off or relax.



# Things that can affect sleep

Neurological conditions such as epilepsy

Lack of the sleep hormone, Melatonin.

Restless Leg Syndrome (RLS)



# Things that can affect sleep

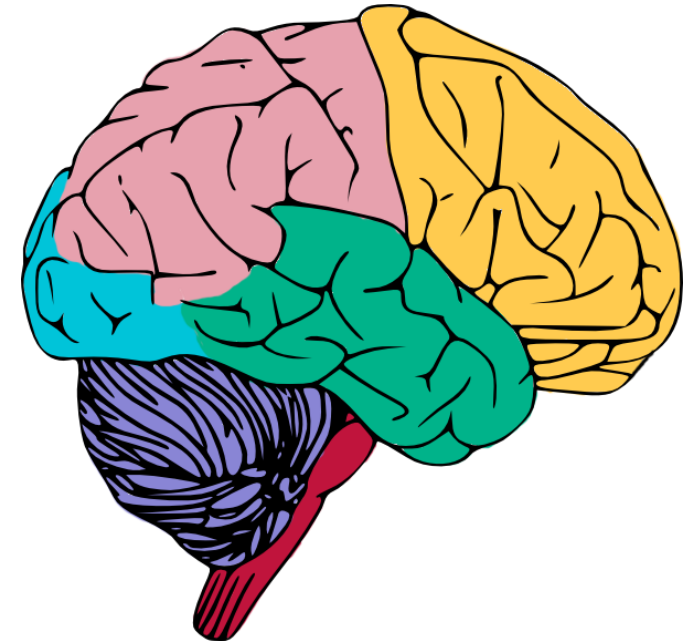


Allergies that can lead to skin discomfort or gastrointestinal issues.

Not reading the social cues and making the connection between family members in the house going to bed and their own need to sleep.

# Sensory processing differences and sleep

- Children with **sensory processing difficulties** more likely to have difficulty getting to sleep and/or staying asleep
- Children who are sensitive to sights, touch, movement, and sound have greater difficulty with sleep (Engel-Yeger & Shochat, 2012; Shochat, Tzischinsky, & Engel-Yeger, 2009)
- Think about the night time sensory experience – pyjamas, bedding, environment



# Lack of sleep



- Emotional regulation
- Cognitive function
- Executive function
- Can affect the whole family
- Increases anxiety and low mood





What can you do to help?

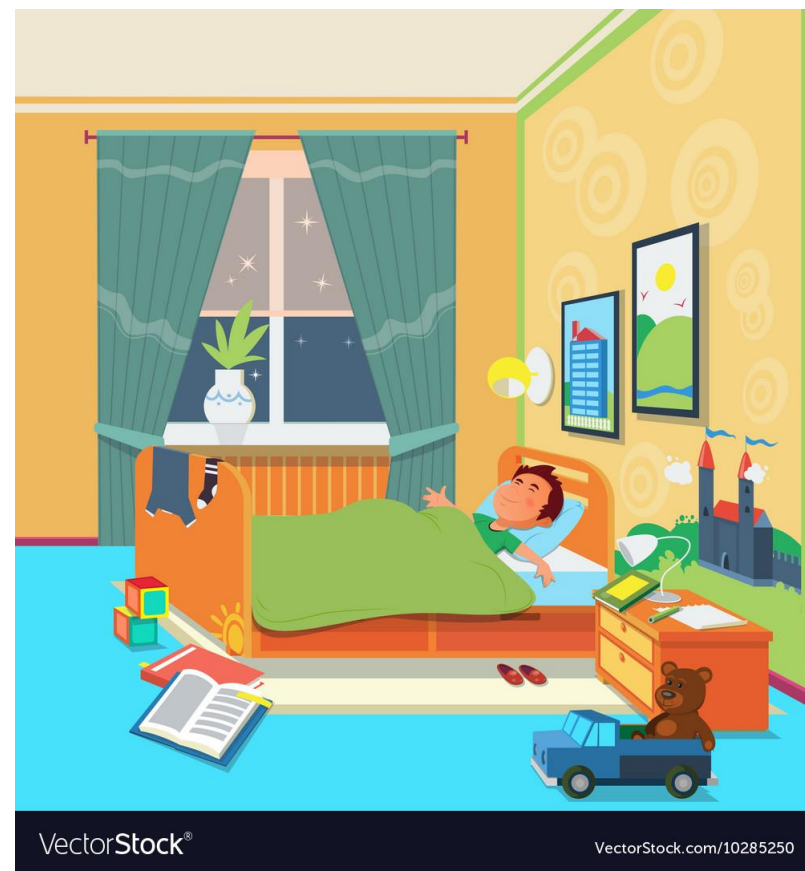
# Before bedtime...

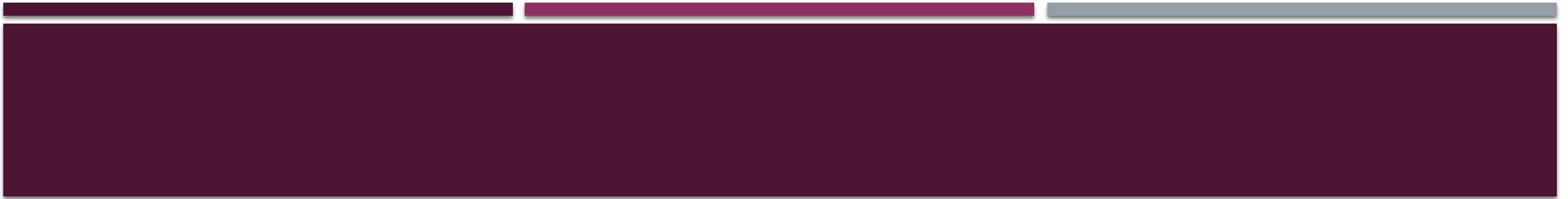
- Ensure lots of opportunity for movement throughout the day
- Avoid napping
- Limit sugary foods / caffeine / stimulants close to bedtime



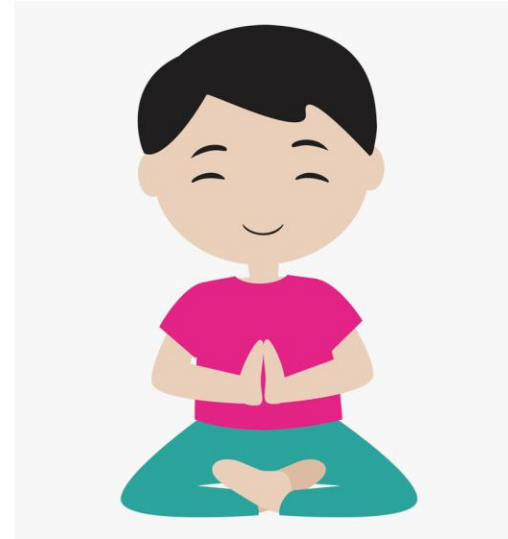
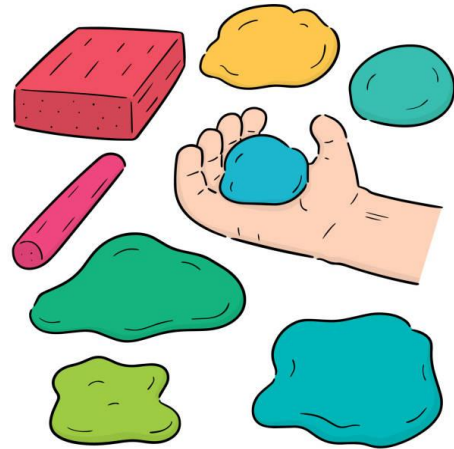
# Make the bedroom comfortable

- Blackout curtains
- Comfortable pyjamas and bedding
- Reduce smells coming into to room / use calming scents
- Minimise distractions – tablets, phones etc.
- Think about noises
- ❑ Sleep associations – try and keep the environment the same after your child falls asleep (do not turn off night light for example)





# Calming evening activities



# Bedtime routine

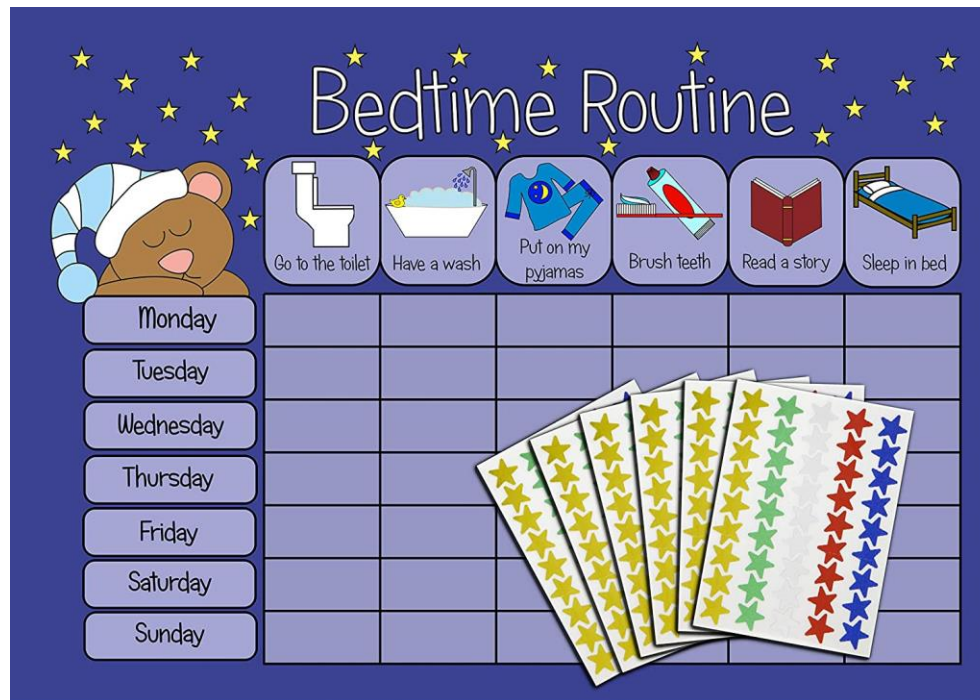
- Maintain a regular bedtime!
- Be creative - trial and error
- Example bedtime routine:
  - Brush teeth
  - Put on pyjamas
  - Do 15 wall push ups
  - Set alarm
  - Go to toilet
  - Put on rain sounds
  - Get into bed.

## My Bedtime Routine

	TAKE A BATH	
	PUT ON MY PJ'S	
	BRUSH MY TEETH	
	READ A BEDTIME STORY	
	LIGHTS OUT	

# Bedtime routine – visual aids

- Make the bedtime routine visual
- Ensure the young person has ownership of the visual routine



# Keep a sleep diary

- Location
- Snack eaten before bed
- Time bedtime routine started
- How did the routine go?
- Time got into bed. Any problems?
- Time fell asleep
- Time and length of night awakenings?
- Time awake in the morning and their mood.

		Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7
	Enter the Weekday (Mon, Tues, Wed, etc.)							
1	At what time did you go to bed last night?							
2	After settling down, how long did it take you to fall asleep?							
3	After falling asleep, about how many times did you wake up in the night?							
4	After falling asleep, for how long were you awake during the night <u>in total</u> ?							
5	At what time did you finally wake up?							
6	At what time did you get up?							
7	How long did you spend in bed last night (from first getting in, to finally getting up)							
8	How would you rate the <u>quality</u> of your sleep last night?							
	1    2    3    4    5 V. Poor                      V. Good							



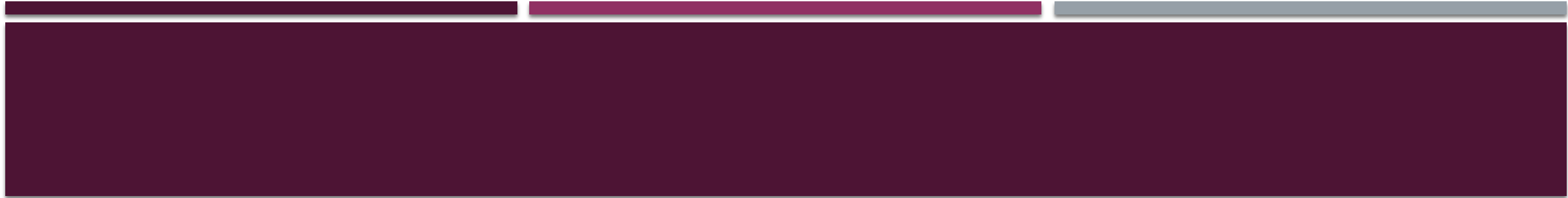
# Some helpful strategies

Does anyone else have any helpful strategies to share?

# Useful websites



- <https://www.autism.org.uk/advice-and-guidance/topics/physical-health/sleep/parents>
- [Advice Sheets - The Sleep Charity](#)
- [National Sleep Helpline - The Sleep Charity](#)
- [Sleep - Cerebra](#)
- <https://www.sleepadvisor.org/adhd-and-sleep/>



**Thank you**