Normal Infant Sleep: Changing Patterns

Normal child sleep includes wakefulness, owlishness, and varied length

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“My child wakes up at 2am and is up for 1-2 hours!”

One of us remembers very clearly the first time her daughter ended up doing this. At around 14 months, she woke up in the middle of the night and didn’t seem ready or able to go back to sleep for one to two hours no matter what strategies her parents tried. This continued regularly for a couple months. And then as quickly as it started, it stopped and hasn’t happened again in over a year.

The “why” of this is relatively unknown—although researchers are continuing to explore the physiological underlyings of sleep—but we do know that extended night wakings like these are experienced by many children until around 3 years of age (Weinraub, Bender, Friedman, Susman, Knoke, Bradley, et al., 2012). Many times the wakings are brief and the child settles quickly. Other times settling takes longer. In either case, these wakings do not readily suggest your child has a sleep “problem”. Increased night wakings, call-outs, and crying are more common around 6 months of age or so, and again as infants near 2 years of age. These wakings may simply be one (of many) manifestations of separation anxiety experienced by the child—a normal change that occurs as infants learn that they exist separately from their caregivers (for a review, see Middlemiss, 2004).

Some argue that night wakings in toddlerhood are reflective of sleep problems, but these opinions are based on criteria that do not necessarily reflect the realities of infant sleep. Several studies found that night waking is relatively common between age 12 and 24 months (Richman, 1981; Goodlin-Jones, Burnham, Gaylor, & Anders 2001; Scher, 2000; Weinraub et al., 2013). Thus, a parent’s perceptions about what constitutes a sleep problem may be triggered by either a disconnect between expectations of uninterrupted sleep and a toddler sleep pattern that arguably falls within the range of normal, or by the impact that night waking has on the parent’s quality of sleep and daily functioning (Loutzenhiser, Ahlquist, & Hoffman 2012). However, although changes in sleep patterns may be inconvenient and frustrating, they are normal occurrences in the context of a healthy parent-child relationship. When viewed as indicating problematic, rather than normal, sleep patterns that will come and go, parents can experience greater
stress and worry (Middlemiss, 2004). As we have learned from many parents, understanding that these night wakings are normal can go a long way to making them more bearable.

“My child won’t go to sleep before 10 pm.”

It is not uncommon in some parts of Western societies to assume that infants and young children must be in bed by, for example, 7 pm to develop good sleep habits. Unfortunately, that’s just not the reality for many families and it’s not because parents are negligent in getting their infants to bed, but because some children simply have a different circadian rhythm or a later schedule may work for the family. Some children will continue this pattern into their toddler years and beyond.

Cross-cultural data on bedtimes for infants and toddlers shows that later bedtimes are actually quite frequent in predominantly Asian countries (Mindell, Sadeh, Wiegand, How, & Goh, 2010). Whereas the mean bedtime for children in predominantly Caucasian countries was found to be 8:42 pm, it was a full hour later for predominantly Asian countries (with a mean at 9:44 pm), with the latest mean bedtime being 10:17 pm in Hong Kong. Notably, the rising time was also significantly later in these countries. A concurrent finding was that the vast majority of children in predominantly Asian countries sleep either in the parent’s bed or room. Thus children who sleep with their parents may naturally have a sleep schedule closer to their parents owing to the sleeping arrangements.

What is important to remember is that a late bedtime in and of itself is not a problem. If it poses a problem for the family as a whole, then parents may want to adjust the bedtime routine (Mindell, Telofski, Wiegand, & Kurtz, 2009) or start the routine earlier in small increments in order to gradually move to an earlier bedtime (Richman, 1981).

“My child sleeps less than (or more than) the recommended amount no matter what I do!”

Most people have seen the “sleep guidelines” about how much sleep our children need at various stages. Parents are told that newborns should sleep around 16-18 hours, that at two years of age, children require a total of 13 hours sleep, and so on. When researchers explore questions of how long infants and children should sleep and what are healthy recommendations, the answers are not particularly clear and are often based on examining how much children are sleeping at different times in history (Matricciani, Oide, Blunden, Rigney, & Williams, 2012).

As parents it is important to remember that they are recommendations. Each child is different and the recommendations may not fit every child. Some will require much more sleep and some will require less. If a child is truly sleep deprived, there will be noticeable signs. Signs of sleep deprivation include rubbing eyes, looking dazed and not focusing on people or toys, becoming overly active late at night, and having a hard time waking up in the morning. By paying attention to your child and his or her cues and behaviours, you will be able to tell if your child is getting enough sleep, regardless of the exact number of hours your child sleeps. Sleep is important, but there are many ways to get it apart from one long, uninterrupted stretch.

*Interestingly, researchers are now telling us that waking in the middle of the night is common in adulthood and was viewed as normal in past eras—the “first sleep” lasted about 4 hours with an awake period in between.
followed by a “second sleep” of another four hours (for more details, see here and the book: *At Day’s Close: Night in Times Past* by Roger Ekirch (Norton 2005).

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- Simple Ways to Calm a Crying Baby
- Normal, Human Infant Sleep: Feeding Method and Development
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**Co-Authors**

Tracy Cassels, University of British Columbia, www.evolutionaryparenting.com

Sarah Ockwell-Smith, babycalming.com

Wendy Middlemiss, University of North Texas

John Hoffman, uncommonjohn.wordpress.com

Kathleen Kendall-Tackett, Texas Tech University, http://www.uppitysciencechick.com/sleep.html

Helen Stevens, Safe Sleep Space

James McKenna, Mother-Baby Behavioral Sleep Laboratory, University of Notre Dame, www.copssleeping.nd.edu

**References**