NO PREP

Sleep, Routines, and Schedules

Includes: Student reading, case study, differentiated questions, teacher key

Name: Period: Date:

Sleep, Routines, and Schedules

Sleep Is Not a Reward for Good Behavior

Sleep gets treated as the flexible part of a family's day, the thing that gives when everything else runs long. The research says the opposite, and the numbers are specific. The American Academy of Sleep Medicine's 2016 recommendations, endorsed by the American Academy of Pediatrics, set the targets by age: infants four to twelve months need twelve to sixteen hours per day including naps, one- to two-year-olds need eleven

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Why Babies Wake Up

Understanding infant sleep architecture removes an enormous amount of unnecessary worry. Adults cycle through sleep stages in roughly ninety minutes; infants cycle in about fifty, and they spend a much larger share of the night in light, active sleep. At the end of each cycle everyone surfaces briefly toward wakefulness,

adults included, and adults simply roll over and drop back down without ever remembering it. Infants do exactly the same thing, several times a night, all night. The question is not why the baby woke up, because the baby was always going to wake up. The question is whether the baby can get back down without help. That is where sleep associations come in. Whatever conditions are present when a child falls asleep at bedtime are the conditions they will look for at two in the morning. A baby who always falls asleep while being rocked will need rocking at two, because from their point of view the room has changed and something is missing. This is the reasoning behind the standard advice to put a baby down drowsy but awake, letting them finish the last stretch of the trip themselves so that they own the skill. Sleep also consolidates gradually over the first year as short stretches merge into longer overnight blocks, and that timeline varies widely between perfectly healthy babies. Most infants begin stringing together longer stretches somewhere between three and six months, but a baby who does not is not broken and usually needs time rather than intervention. Comparing babies on this particular measure has ended more friendships than it has solved problems.

The Routine Is the Signal

A bedtime routine is not decoration; it is a signal system. Young children have a shaky sense of time and rely heavily on sequence to know what happens next, so a predictable chain of events tells a child that sleep is coming long before anyone says the word bed. Effective routines share a few features. They are short, roughly twenty to thirty minutes, because a ninety-minute production becomes a stalling opportunity. They run in the same order every night, since the order is the actual message. They move steadily downward in stimulation, so bath, pajamas, teeth, two books, song, lights out works while a wrestling match after the books undoes the whole thing. They end in the room where the child will actually sleep. Screens come off at least an hour before bed, both because the light interferes with the body's sleep signals and because the content is stimulating right when the goal is the reverse. Consistency in timing matters too, since a bedtime that swings between seven and ten produces something close to permanent jet lag. Weekends are part of the pattern, and a two-hour weekend shift is enough to make Monday morning miserable for a school-age child. The routine takes a few weeks to establish and repays that investment nightly for years. Travel, illness, and holidays will break the

routine, and that is expected rather than a failure. Routines are unusually easy to restart, and most families find that two or three consistent nights are enough to get back to where they were.

Where the Baby Sleeps

Where an infant sleeps is a safety question before it is a convenience question. Safe-sleep guidance is the ABCs: alone, on the back, in a bare crib. Alone means the baby has their own sleep surface with no other person on it. On the back means every sleep, including naps, until the baby can roll both directions on their own, at which point they may be left in the position they choose. Bare means a firm mattress and a fitted sheet and nothing else, so no blankets, pillows, bumpers, wedges, or stuffed animals. Room-sharing without bed-sharing is recommended for at least the first six months, meaning the crib or bassinet sits in the caregiver's room, which is associated with lower risk while keeping night feedings manageable. A wearable sleep sack replaces a loose blanket when warmth is a concern. The most dangerous situations tend to be unplanned rather than chosen: an exhausted adult who falls asleep with the baby on a couch or a recliner, which is substantially riskier than an adult bed. That is a strong argument for feeding the baby somewhere other than a soft surface at three in the morning. Every caregiver who ever handles the baby overnight, including grandparents and babysitters, needs to know these rules, because a rule followed by only one adult is not a rule. Grandparents in particular may have raised their own children under different guidance, since back sleeping only became the standard recommendation in the 1990s, so the conversation lands better when it is framed as what has changed rather than as what they did wrong.

Routines Beyond Bedtime

The logic of the bedtime routine applies to the whole day, and applying it is one of the cheapest ways to reduce conflict with a young child. Predictability lowers anxiety, and a great deal of what adults label defiance is actually a child being surprised. Transitions are the pressure points, so a child who is deep in play and told to leave immediately will resist, while the same child given a warning has time to finish. Two more minutes, then shoes, works far better than shoes, now. Visual schedules help, especially for children who cannot yet read, and a simple strip of pictures showing the sequence of the morning lets a three-year-old check what comes next without asking an adult, which is quietly good for their sense of control.

Naps deserve planning too, since most one-year-olds still need two, most two-year-olds shift to one afternoon nap, and many children drop the nap somewhere between three and five, often unevenly and with a rough patch on either side. Families with unpredictable work schedules can still deliver most of the benefit, because what a child needs is not a fixed clock time but a reliable sequence. If dinner, bath, books, and bed always happen in that order, the routine survives a shift change even when the hour moves. The same principle rescues weekends, holidays, and time spent at a second household. Keep the order, accept that the clock will drift, and a child still knows what is happening next, which is most of what a routine was ever providing.

Key Information: Sleep, Routines, and Schedules

Detail	Information
Infants, 4 to 12 Months	12 to 16 hours per day, including naps
Toddlers, 1 to 2 Years	11 to 14 hours per day, including naps
Preschoolers, 3 to 5 Years	10 to 13 hours per day
School Age, 6 to 12 Years	9 to 12 hours per day
Teens, 13 to 18 Years	8 to 10 hours per day
Infant Sleep Cycle	About 50 minutes, so brief night wakings are normal
Bedtime Routine	Roughly 20 to 30 minutes, same order, winding downward
Screens	Off at least one hour before bed for every age group

Case Study: The Nine O'Clock Wall

Elena works retail and her shifts move every week, so her four-year-old Theo goes to bed whenever she gets home, sometimes at seven and sometimes at ten. Theo is not sleepy at bedtime. He is wild. He runs laps, he argues, he cries about the wrong pajamas, and the whole thing takes ninety minutes on a good night. Elena assumes he is fighting sleep on purpose. At a parenting workshop she hears that overtired preschoolers often look wired rather than tired, and that a routine can run on sequence instead of clock time. She cannot control her schedule, so she builds a fixed order instead: dinner, bath, teeth, two books, one song, lights out, in that order, whenever she walks in the door. She also moves the tablet out of the routine entirely. By the third week Theo starts putting his own book on the pile after teeth. Elena's note to the workshop leader reads, same order, different times, and he finally stopped fighting me.

1. Elena thought Theo was fighting sleep on purpose. Use the reading to explain what was more likely happening.

2. Elena could not fix her work schedule, but the routine still worked. Explain why sequence can matter more than clock time for a young child.

Multiple Choice

1. How much total sleep does the AASM's 2016 guidance recommend for a three- to five-year-old?

    a) 12 to 16 hours per day

    b) 9 to 12 hours per day

    c) 8 to 10 hours per day

    d) 10 to 13 hours per day

2. What does the phrase drowsy but awake mean when putting an infant down?

    a) Letting the baby fall asleep during the last feeding

    b) Placing the baby in the crib before they fall fully asleep

    c) Waiting until the baby is deeply asleep before moving them

    d) Keeping the baby up an extra hour to build sleep pressure

3. Why do brief night wakings happen even in perfectly healthy infants?

    a) Infants surface between short sleep cycles all night long

    b) They signal that the baby is not getting enough to eat

    c) Room-sharing interrupts the baby's deepest stage of sleep

    d) Infants cannot tell the difference between day and night

Matching

Write the letter of the correct definition on the line next to each term.

Term	Definition
1. ___ sleep consolidation	A) The condition a child comes to need in order to fall back asleep at night
2. ___ sleep association	B) Putting a baby down sleepy but not yet asleep so they settle the last stretch
3. ___ bedtime routine	C) A heads-up given a few minutes before an activity is going to end
4. ___ drowsy but awake	D) The gradual merging of short sleep stretches into longer overnight blocks
5. ___ transition warning	E) A short sequence of calming steps performed in the same order every night

Fill-in-the-Blank

1. Infants surface between sleep _____ several times a night.

2. A bedtime routine works best at about 20 to 30 _____.

3. Put a baby down _____ but awake so they can settle alone.

Short Answer

Answer each question in 2-4 complete sentences.

1. Explain why chronic short sleep in a young child is often mistaken for a behavior problem.

_____

_____

_____

2. Why does the reading treat brief night wakings as normal rather than as a problem to solve?

3. How can a caregiver with an unpredictable work schedule still give a child a real routine?