

Insomnia and Hyperactivity in ASD Children

Practical strategies for families supporting children with night-time wakefulness and high activity levels

Sleep difficulties can affect the well-being of the entire family, particularly when an autistic child remains awake for long periods during the night and requires ongoing supervision.

Some children have difficulty falling asleep. Others wake frequently, wake very early, or remain active for several hours during the night.

For children with significant sensory sensitivities, limited spoken communication, or complex support needs, identifying the reasons for disrupted sleep may be particularly challenging.

There is no single approach that works for every child.

Understanding the child's individual sleep patterns, sensory needs, communication abilities, and daily activities can help families develop a more supportive routine.

1. Understand the Child's Sleep Patterns

Before changing the bedtime routine, spend several days observing when and how the child sleeps.

Notice when they become sleepy, how long it takes them to fall asleep, when they wake during the night, and what they do when awake.

Consider whether the child appears distressed, uncomfortable, restless, or simply alert and interested in an activity.

A brief sleep diary can help identify patterns that may otherwise be difficult to recognize.

It is also important to consider possible physical causes of disrupted sleep.

Pain, constipation, reflux, breathing difficulties during sleep, seizures, anxiety, and medication effects may contribute to sleep problems. Persistent difficulties should be discussed with the child's healthcare provider.

The first question is not simply how to make the child sleep, but what may be preventing them from sleeping comfortably.

2. Establish a Predictable Bedtime Routine

A familiar sequence of activities can help a child recognize that the day is coming to an end.

Try to maintain reasonably consistent bedtime and wake-up times, while allowing flexibility for the child's individual sleep needs.

A bedtime routine might include changing into comfortable clothing, brushing teeth, using the toilet, enjoying a familiar quiet activity, and preparing for bed.

For children who benefit from visual information, photographs or a simple picture schedule can help show what will happen next.

Choose activities the child finds comfortable. A warm bath or bedtime story may be relaxing for one child but unpleasant or stimulating for another.

Reduce stimulating screen activities close to bedtime and provide a gradual transition from daytime activities to the night-time routine.

The aim is to create familiarity and predictability, not to insist on completing every step regardless of how the child is feeling.

3. Create a Comfortable Sleep Environment

A child's sensory preferences can significantly influence their comfort at bedtime.

Consider the following aspects of the sleeping environment:

- **Lighting:** Some children prefer a dark room, while others feel more comfortable with a dim night-light.
- **Sound:** Reduce unexpected household noises. A familiar, quiet background sound may help some children, while others prefer silence.
- **Clothing and bedding:** Choose comfortable fabrics and avoid irritating seams, labels, or textures.
- **Temperature:** Keep the bedroom at a comfortable temperature and avoid excessive bedding.
- **Familiar objects:** A favourite blanket or age-appropriate comfort object may help the child feel secure.

Observe how the child responds to each adjustment.

Avoid introducing several changes simultaneously, as this may make it difficult to identify what is helpful.

4. Provide Opportunities for Movement During the Day

Many autistic children enjoy frequent movement, including jumping, running, rocking, pacing, or spinning.

These activities may provide sensory feedback, enjoyment, or opportunities for self-regulation.

Rather than trying to eliminate movement, provide safe and predictable opportunities for the child to engage in activities they enjoy.

Depending on the child's interests and abilities, these might include outdoor play, walking, dancing, jumping, swimming with appropriate supervision, or other movement-based activities.

For children who benefit from visual schedules, pictures can help show when preferred activities are available throughout the day.

Some children may enjoy several short movement opportunities rather than one long period of structured exercise.

Observe whether particular activities help the child feel comfortable and engaged or leave them more alert and stimulated.

Where vigorous movement appears to interfere with settling at bedtime, consider scheduling it earlier in the day.

The purpose of daytime movement is not simply to tire the child out. It is to respect their need for activity while supporting a healthy daily rhythm.

5. Respond Thoughtfully to Night-Time Wakefulness

When a child wakes during the night, begin by considering whether they may be uncomfortable, frightened, hungry, unwell, or in need of assistance.

For a child who cannot easily communicate through speech, observe their facial expressions, movements, vocalizations, and other familiar signals.

If the child appears comfortable but remains awake, keep the environment quiet and avoid introducing stimulating activities.

Use familiar, simple communication to indicate that it is still night-time.

Some children may benefit from a visual cue showing the difference between sleeping time and morning activities.

If the child needs to move, consider whether a safe, low-stimulation space is available.

Avoid turning night-time wakefulness into a prolonged teaching session or repeatedly demanding that the child remain still.

Respond to distress and provide reassurance while maintaining a calm, predictable environment.

6. Support Communication and Emotional Well-Being

Sleep difficulties can be especially frustrating for children who cannot explain why they are uncomfortable or what they need.

Explore accessible ways for the child to communicate messages such as "help," "toilet," "drink," "too hot," "pain," or "I need a break."

Depending on the child's abilities, these may include gestures, photographs, pictures, written words, or a communication device.

For children who already use an AAC system, ensure that it remains accessible at night.

Pay attention to how the child expresses agreement, refusal, discomfort, or a desire for interaction.

A child who is repeatedly leaving their bed may be communicating an unmet need rather than simply resisting the bedtime routine.

Responding to their communication can help families identify what needs to change.

7. Seek Professional Support When Needed

If sleep difficulties persist, significantly affect the child's daytime functioning, or leave the family struggling to cope, consult the child's healthcare provider.

A sleep diary can provide useful information during the consultation.

The healthcare provider may consider underlying medical conditions, medication effects, sleep patterns, and whether further assessment is needed.

An occupational therapist may help identify sensory or environmental factors affecting bedtime, while a speech-language pathologist can support the development of accessible communication methods.

Melatonin may be considered for some autistic children when sleep difficulties persist despite appropriate sleep strategies and contributing medical factors have been addressed. Its use should be discussed with the child's healthcare provider, including the formulation, timing, potential side effects, and ongoing need for treatment.

Other sleep medications require individualized medical assessment rather than routine use.

If the child snores loudly, gasps, chokes, or appears to stop breathing during sleep, seek medical assessment for possible sleep apnea.

8. Remember the Needs of Parents and Caregivers

Supporting a child who is awake for much of the night can be physically and emotionally exhausting.

For families in which one parent provides most of the care, prolonged sleep disruption may become particularly difficult to manage.

Whenever possible, share night-time responsibilities with another trusted adult so that the primary caregiver can have uninterrupted periods of rest.

Explore opportunities for respite care, family assistance, or community support.

Connecting with other families who have experienced similar challenges may also provide practical ideas and emotional support.

If the child requires continuous supervision, caregiver rest must be arranged without compromising the child's safety.

Parents and caregivers need adequate rest and support to sustain their own well-being and continue providing care.

Final Thoughts

Sleep difficulties and high activity levels can be challenging for autistic children and their families, but they should not automatically be viewed as behaviours that need to be controlled.

The child's sensory experiences, physical comfort, communication abilities, and individual sleep patterns all deserve consideration.

Begin by observing the child, identifying possible causes of disrupted sleep, and creating a predictable daily routine that respects their needs.

Provide opportunities for enjoyable movement, develop accessible ways for the child to communicate, and seek professional support when difficulties persist.

The goal is not simply to make the child sleep through the night. It is to understand what the child needs to feel comfortable, supported, and able to rest—while also protecting the well-being of the family.