

Drs. Meltzer and Crabtree, both master clinicians and leaders in the field, have created an invaluable resource that addresses one of the most common concerns raised by parents. They equip practitioners across all disciplines—whether in mental health or primary care—with practical, empirically supported tools that can be tailored to each child's and family's needs. This book sets the standard for evidence-based care in pediatric behavioral sleep medicine.

—**Jodi Mindell, PhD, DBSM**, Professor of Psychology, Saint Joseph's University, Philadelphia, PA; Associate Director, Sleep Center, Children's Hospital of Philadelphia, Philadelphia, PA, United States

Drs. Lisa Meltzer and Valerie McLaughlin Crabtree are two of the best pediatric clinical experts in the world. It would be great to have them sitting in the room with you when you're working with pediatric sleep patients. But this book gives you the next best thing—their knowledge, teachings, and guidance stuffed into your back pocket!

—**Michael Gradisar, PhD, MPsy (Clin)**, CEO, WINK Sleep, Australia

The new edition of *Pediatric Sleep Problems: A Clinician's Guide to Behavioral Interventions* is invaluable to pediatricians, mental health providers, and anyone working with tired kids and parents. The problem-based approach and clear writing will help practitioners come up with a plan of action to address an array of sleep problems. My copy of the first edition is well-worn, as I use it all the time, and this version is even better.

—**Craig Canapari, MD**, Associate Professor, Yale University School of Medicine; Director, Pediatric Sleep Center, Yale New Haven Hospital, Division of Pediatric Respiratory Medicine, Yale University, New Haven, CT, United States

The second edition of *Pediatric Sleep Problems* is an essential resource for professionals at all levels of training in the field of sleep medicine. It is structured in a clear and accessible manner, allowing busy clinicians to easily grasp key concepts. The recommendations are practical and can be easily implemented within a clinical practice. The authors recognize that families come in many different forms and configurations. Thus, the content stresses the importance of considering individual environmental and cultural factors when treating behavioral sleep problems. It also addresses modifications in approach that may be needed in children with neurodivergence. In summary, *Pediatric Sleep Problems* emphasizes that behavioral sleep interventions should be tailored to the unique circumstances of each patient. This informative book advocates for personalized, culturally sensitive, and adaptable methods to improve patient outcomes.

—**Althea Robinson Shelton, MD, MPH**, Associate Professor of Pediatrics and Neurology, Vanderbilt-Sleep Division, Vanderbilt University Medical Center, Nashville, TN, United States

There is no doubt that sleep is critical for our kids' well-being. In a societal and professional world in which time is of the essence, access to reliable, practical, and effective information and guidance to solve sleep problems and optimize sleep in our children is a must. The first edition of the book by Drs. Meltzer and Crabtree was great, but this edition is simply it!!

—**David Gozal, MD, MBA, PhD (Hon)**, Dean, Joan C. Edwards School of Medicine;
Vice President for Health Affairs, Marshall University, Huntington, WV, United States

Praise for the First Edition

This is a phenomenal book that will serve as an excellent resource for clinicians in a variety of health care fields. It is well written and nicely organized and offers a level of detail that is essential for successfully understanding and treating sleep problems in children. I wish this book had been available when I started my career in pediatric behavioral sleep medicine. Any clinician who works with children or their parents should read this book. It is comprehensive yet presents the information in a user-friendly format. The handouts are a key resource.

—**Sarah Morsbach Honaker, PhD, DBSM**, Associate Professor of Pediatrics, Department of Pediatrics, Indiana University School of Medicine; Director, Behavioral Sleep Medicine, Riley Hospital for Children, Indianapolis, IN, United States

Meltzer and Crabtree present a comprehensive guide for clinicians dealing with pediatric sleep problems. They provide an excellent overview of common sleep problems and their assessment as well as rich descriptions of behavioral principles underlying evidence-based interventions for these common problems.

—**Avi Sadeh, DSc**, (deceased), Professor of Psychology, School of Psychological Sciences, Tel Aviv University, Tel Aviv, Israel; author of *Sleeping Like a Baby*

This is a compelling book that offers clinicians the most complete behavioral intervention guidelines for pediatric sleep problems currently available. The authors were able to translate a vast amount of research into practical application without sacrificing treatment rigor and integrity. The arrangement of chapter by sleep problem also gives clinicians quick access to the most effective treatments.

—**New England Psychologist**

The text is well written, comprehensive, up-to-date, and absolutely practical for day-to-day clinical use. I applaud the authors on their attention to detail, accuracy, and lack of deficiencies. This book is appropriate for medical students, residents, fellows, midlevel providers, pediatric primary care providers (pediatricians, family practitioners), psychologists, and sleep medicine specialists. Even a veteran, experienced sleep specialist will learn something new within these chapters.

—**Journal of Clinical Sleep Medicine**

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PREFACE

Have you ever heard any of the following in your clinical practice?

- “My baby is a terrible sleeper.”
- “She wakes up several times every single night.”
- “Bedtime is a nightmare at our house, it will take at least 1 to 2 hours to get him down.”
- “She is afraid of her room and afraid of sleeping, so we just let her sleep with us.”
- “He is often late to school because he can’t wake up, even with three alarm clocks and us throwing water on him.”
- “She has her days and nights mixed up.”

If the answer is yes, then this is the book for you. Sleep problems are common in children, with estimates of 25%–40% of youth experiencing a sleep problem at some point from infancy through adolescence (Calhoun et al., 2014; de Zambotti et al., 2018; Mindell & Owens, 2015). Although some pediatric sleep problems resolve spontaneously, many become chronic. Nearly half of children and adolescents with insomnia will continue to experience insomnia as adults (Fernandez-Mendoza et al., 2022). When left untreated, these sleep problems can result in significant daytime impairments (Chan et al., 2022). Insufficient or disrupted sleep in youth negatively affects mood and can increase or exacerbate symptoms of psychiatric disorders (e.g., depression and anxiety; Gregory & Sadeh, 2016; Marino et al., 2021), behavior problems (Fulfs et al., 2024), social development, academic functioning (e.g., attention, concentration, learning; Stormark et al., 2019), and physical health outcomes (e.g., hypertension, weight gain; DelRosso et al., 2020; Deng et al., 2021).

The good news is that many pediatric sleep problems respond quickly to behavioral interventions. This includes (but is not limited to) bedtime problems and night wakings in infants and young children (Meltzer & Mindell, 2014; Meltzer, Wainer, et al., 2021; Mindell et al., 2006), anxiety in middle childhood (El Rafihi-Ferreira et al., 2018; Gordon et al., 2007), and insomnia and delayed sleep–wake phase in adolescents (Arns et al., 2021; Dewald-Kaufmann et al., 2022; Meltzer, Wainer, et al., 2021). Treating behavioral sleep problems is incredibly rewarding because patients often get better quickly, and families are very appreciative of the treatment advice and support that are given. With a little practice, and the right tools, any clinician can provide behavioral interventions for common sleep problems.

Although pediatric sleep problems are common, most health care clinicians, including psychologists, other mental health professionals, physicians, and nurses, receive very little (if any) training in sleep medicine, let alone pediatric behavioral sleep medicine (Meaklim et al., 2020; Mindell et al., 2011; Zhou et al., 2021). Ninety-five percent of practicing psychologists have reported receiving no specific training in sleep throughout their graduate, internship, and fellowship training, and almost all express a desire for more formal education in treating sleep problems (Zhou et al., 2021). Physicians fare no better, with an average of only 2.5 hours of sleep medicine training (Mindell et al., 2011). Limited information is available for health care providers who want to learn more about pediatric sleep problems, with the available texts focused heavily on adults, and in particular the medical side of sleep problems, with treatments for adult behavioral sleep problems often limited to only one or two chapters. In pediatrics, there are only a handful of texts, again with only limited information on behavioral interventions for infants through adolescents. Furthermore, the information provided is heavy on the research and light on the practical application of interventions for behavioral sleep problems.

With this in mind, we published *Pediatric Sleep Problems: A Clinician's Guide to Behavioral Interventions* in 2015 with the goal of providing clinicians with detailed information on the diagnosis and treatment of common sleep problems seen from infancy through adolescence. In addition, we provided clinical tools to assist clinicians with the diagnosis of sleep problems as well as evidence for and step-by-step implementation of behavioral sleep treatments. Because we know how busy clinicians are, the book was designed to be a handy and accessible resource that could be used in all types of clinical practice.

In this second edition of *Pediatric Sleep Problems: A Clinician's Guide to Behavioral Interventions*, we remain committed to providing clinicians with developmentally appropriate information that will enable them to treat commonly seen behavioral sleep problems. With a concise format, the book provides clinicians a hands-on guide to behavioral treatments for pediatric sleep problems, with practical information, including

- the presentation, prevalence, and etiology of sleep problems;
- options for different treatment approaches, including considerations related to a socioecological framework and for special populations

(e.g., neurodiverse children or children with chronic medical conditions), which can influence discussions of how and why treatments work;

- step-by-step instructions for implementing treatments;
- examples of what to say to families;
- ways to manage potential pitfalls; and
- treatment handouts for patients/families that may be downloaded for use in clinical practice at <https://www.apa.org/pubs/books/pediatric-sleep-problems-second-edition>; see the Resources tab.

This clinical guide takes the empirically supported treatments you read about in the literature and translates them into different ways to implement them in your everyday practice and provide a tailored treatment plan for each individual patient.

In the 10 years since the first edition of *Pediatric Sleep Problems: A Clinician's Guide to Behavioral Interventions* was published there has been a significant increase in research that has evaluated the behavioral interventions included in the original edition. Thus, in this second edition we have reevaluated the evidence supporting the recommended interventions. In some cases, this has led to more specific recommendations, such as strategies for supplementing imagery rehearsal therapy in the treatment of recurrent nightmares (Chapter 9). In other cases we have tempered the strong behavioral recommendations and followed new guidance to consider adjunctive pharmacological approaches, such as in the management of nocturnal enuresis (Chapter 14). Furthermore, novel work in the nonpharmacologic management of disorders of hypersomnolence has emerged over the past decade. As such, this second edition includes a chapter focused on cognitive-behavioral interventions for disorders of hypersomnolence (Chapter 12).

Other significant changes in this edition include newer and more nuanced frameworks for understanding sleep in children and adolescents. The use of a socioecological framework not only highlights the dynamic interaction among sleep and individual factors (e.g., child age, temperament, chronotype, medical/neurodevelopmental/behavioral health comorbidities), family, home and school factors (e.g., caregiver beliefs, family routines, caregiver mental health, living arrangements, etc.), and neighborhood and broader sociocultural factors (e.g., light pollution, noise, safety, perceived discrimination) but also brings the consideration of sleep health disparities to the forefront (Lupini & Williamson, 2023). Thus, in this edition we highlight areas where clinicians may need to conceptualize sleep problems from a broader lens, modifying the assessment and treatment of pediatric sleep concerns.

We also introduce the Peds B-SATED model of pediatric sleep health (see Chapter 2, this volume; Meltzer, Williamson, & Mindell, 2021). This multidimensional model of sleep health serves as the foundation for the assessment of and intervention for pediatric behavioral sleep problems presented in this edition.

Furthermore, we have made efforts to use more inclusive language. Throughout the text, we refer to “caregivers” to acknowledge the role of parents, step-parents, foster parents, grandparents, and other adults who may care for or are involved in the sleep routines of children and adolescents. We also recognize that not all children sleep in a bed and/or in a bedroom, with some sleeping on couches or in different locations in different homes. However, we chose to use the term “bed” and “bedroom” throughout the book to represent the child’s sleep surface and location, regardless of whether it is a bed in a bedroom.

Finally, the handouts, which can be printed and given to patients and families, are one of the most unique, and clinically used, aspects of the original book. Since 2015, there have been many requests, and there is a significant need, for both English- and Spanish-language handouts. Thus, handouts in both languages are included in this edition. We have also included an Excel program in this edition that allows you to graph patients’ sleep diary data to share with your patients and families, providing them with a visual depiction of their sleep and its response to treatment.

It is important to note that this clinical guide is not a comprehensive review of every treatment that has been proposed or studied in the literature. Instead, it enables clinicians the flexibility of selecting from among the most common and effective interventions that can be used to address the same presenting problem. This guide also does not focus on the treatment of sleep disorders that primarily require medical interventions, including obstructive sleep apnea, periodic limb movements in sleep, or restless sleep disorder. Furthermore, although a brief discussion of pharmacological or other medical interventions for behavioral sleep problems are provided where appropriate, in general these treatment approaches are also beyond the scope of this book. That said, we believe clinicians will find this book to be a valuable resource for the treatment of behavioral sleep problems that commonly present in pediatric practice.

SUMMARY AND TAKE-HOME POINTS

By age 18 years, children should have spent up to 40% of their lives sleeping. However, for many children sleep is not as simple as it seems. We wrote this second edition to help clinicians address the most commonly seen behavioral sleep issues in infants, children, and adolescents. It is designed to be a user-friendly resource for busy clinicians, with a brief description of how different sleep problems present, a basic explanation of how the treatments work and the evidence to support the treatment, a step-by-step description of how to implement different treatments, and handouts that can be used in a clinical setting.