

Shereen Nielsen

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You've tried multiple things to improve your child's sleep. Nothing seems to be working. You're tired, exasperated and down-right confused as to WHY your child isn't sleeping well. You need help, but not sure what should be your next move.

If this sounds like you, you're in the right place.

This short questionnaire will help you make an informed choice on what your next move should be. Interested? Keep reading...

In 99% of cases that I work with, I find an underlying issue affecting a child's ability to sleep well.

Sleep is one of four important bodily processes that are vital for human existence. These processes are breathing, eating, drinking and sleeping. Since sleep is needed for survival, and is a core foundation for optimal life, growth and development, it should work relatively easily.

If there is a sleep presentation where it falls outside the realm of normal, then it should be explored. It's the same concept, that if your child wasn't breathing properly, it would be investigated. The same respect should be given to sleep.

When exploring underlying issues, the areas that I am investigating are categorised into banner terms, being:

- Biological
- Physiological
- Nutritional
- Anatomical

As you can appreciate, if there is an underlying issue affecting your child's sleep, a behavioural, structural or environmental approach will *not* adequately improve a biological, physiological, nutritional or anatomical issue.

To help you determine whether your child's sleep may be interrupted by an underling issue, and not a behavioural cause, I have created a check list for you.

Using the symptoms list checker below, please indicate whether your child did, or does, present with any of those indicated signs.

Does, or did, your child present with any of the following:

- ☐ Open mouth posture
- ☐ Snoring
- ☐ Dummy use
- ☐ Persistent and chronic early morning rising
- ☐ Difficulties falling asleep
- ☐ Challenging sleep
- ☐ Frequent night wakes, more often than 2-4 hourly
- ☐ Long periods of awake time through the night
- ☐ Naps 30 minutes or less in length
- ☐ Colic
- ☐ Reflux
- ☐ Persistent crying
- ☐ Constant congestion, when not unwell
- ☐ Breast or bottle feeding difficulties
- ☐ Excessive vomiting
- ☐ Difficulties introducing solids
- ☐ Fussy eating or avoiding solid foods
- ☐ Emotional fragility during the day
- ☐ Requiring high level of assistance to fall asleep or resettle
- ☐ Tired in the morning or during the day
- ☐ Enuresis (bedwetting)
- ☐ Bruxism (teeth grinding)
- ☐ Recurrent ear infections
- ☐ History of antibiotic use, gastroenteritis or wind/tummy pains
- ☐ Rashes, including eczema
- ☐ Bowel issues: constipation, diarrhea or blood/mucus in stool

Please note: the above list is not exhaustive.

If you have indicated at least one of these factors, then there is a high possibility that your child's sleep difficulties are a result of an underlying issues, and their sleep is not a behavioral issue, rather the sleep presentation is a symptom and not a diagnosis.

When an underlying issue is the root trigger to difficult sleep, sleep training, nap structures, established sleep environment or sleep aids will **not** improve your child's sleep for the long-term. Improving sleep requires a multi-factorial and holistic approach to ensure you achieve the changes you're looking for with minimal emotional response.

To explore sleep, it is important that we delve into the depths of the overall sleep and awake time presentation, and track back to your pregnancy, labour and delivery.

I recommend considering a 1:1 consultation where I can screen for underlying issues and provide you with a management plan for long-term sleep improvement results.

If you are interested in one of my services, you can visit my website for package options:

www.shereennielsen.com/services

I would love to work with you to make the changes you're looking for.

In the meantime, you can follow me on the following platforms:

Facebook: @shereennielsen.sleepconsultant

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With love,

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