

# Nightmares: Helping Children and Youth with Problem Nightmares



Image credit: Adobe Stock

**Summary:** A nightmare is a very distressing dream. It usually causes us to wake up feeling upset and afraid. Most people have had nightmares, though they don't happen often. The good news, is that most of the time they go away on their own. If they do not, there are many things that you can do to support your child/youth with nightmares.

## What is a Nightmare?

A nightmare is a very distressing dream. It usually causes us to wake up feeling upset and afraid. Most people have had nightmares, though they don't happen often. Nightmares are not real, but they can feel very real.

## When Can Nightmares Become a Problem?

Nightmares are never fun. But when they are severe and happen often, they can cause a lot of problems. Children and youth can become fearful, anxious or depressed. Parents, caregivers and family members can lose sleep when a child or teen wakes from a nightmare. This can leave everyone tired all day.

## What Causes Nightmares?

Researchers believe that nightmares are a complex mix of:

- Our memories;
- Information we have come across recently;
- Visual expressions of our feelings;
- Other random information.

The reason for a nightmare is different for each person. Sometimes, nightmares happen for no reason at all. But there are some things that may contribute to nightmares, like:

- Stressful things that happen during the day (for example an important change or a relationship problem);
- Watching scary movies or reading scary books before bedtime;
- High fevers;

- Certain medications;
- Painful or frightening memories;
- Anxiety or depression;
- Difficulty falling asleep or staying asleep;
- Being very tired (exhaustion).

Remember that nightmares:

- Cannot predict the future. Scary nightmares about bad things happening are caused by our fear of bad things happening. Nightmares are not telling us that something bad is about to happen.
- Can't hurt us. While they can be very scary, they can't harm us.
- Aren't all bad. Some people find that nightmares can be exciting, and give them interesting ideas. For example, some writers and painters have been inspired by nightmares (Stephen King or Salvador Dali, for example).

## Can We Prevent Nightmares?

You can't stop every nightmare. But there are many things that can help, so that nightmares are not such a problem for your child or teen.

- Make sure your child or teen is comfortable (bed, mattress, pillows, blankets).
- Keep the room slightly cool (as opposed to too warm).
- Keep a cup of water close by for children and youth who may need it.
- Make sure your child or teen gets help for problems with anxiety and depression (see resource list at the end).
- Reduce their stress by setting realistic expectations for children and youth, based on their age and abilities.
- Help children and youth learn to handle stress in a positive way, and learn ways to calm themselves and relax (for children 4-8 years, see the MindMasters 2 resource in the resources section).
- Limit recreational screen time. Too much screen time overloads the mind and senses, making it harder to relax and sleep well. Aim for more time spent outside, or with electronic-free activities.
- Make sure your child or teen is getting enough physical activity (60 minutes of moderate activity every day).
- Have regular bed and wake up times, even on weekends.
- Make sure your child or teen is getting enough sleep. For more information, view our eMentalHealth.ca handout on [Sleep in Youth: Information for Parents and Caregivers](#)

## How Much Sleep Should My Kids Be Getting?

According to the Canadian Pediatric Society...

Age	Recommended amount of sleep
Toddlers (1-3 years)	10-13 hours (naps included)
Preschoolers (3-5 years)	10-12 hours (naps included)

School aged children (5-10 years)	10-12 hours
Teens	9-11 hrs

## How Can I Help With My Child's Nightmares?

Help your child or teen to feel emotionally safe. A warm, close bond with your child or teen is the best place to start. Children and youth who feel safe will be generally content and happy, will talk to parents about how they feel, and will go to parents with problems or difficult feelings.

Help children and youth feel emotionally safe by:

- Treating them with warmth, affection and age appropriate limits.
- Having reasonable and age appropriate expectations.
- Showing children and teens you understand their feelings (for example, saying things like “that sounds very scary” instead of “How can you let a dream upset you so much? You’re making such a big deal out of nothing!”)
- Avoiding telling children they are ‘good’ or ‘bad’. Everyone needs to feel loved all the time, not just when they’re behaving well. To positively reinforce things, express gratitude. For example: “I saw you sharing your cookie. That made your sister very happy. Thank you for doing that!” “That is a very tall building you made!” “I really appreciate your help with the dishes!” Deal with misbehaviour in a calm voice, without yelling. Focus on the behaviour, instead of telling your child she is ‘being bad’. Try to ‘connect’ before ‘correcting’. For example, “You don’t usually hit-were you feeling frustrated? What happened? Next time that happens, what can you do instead of hitting? What can you say to your sister if she takes your toy again? Can you tell me you’re upset, instead of hitting?”

If your child or teen isn’t able to turn to you when she is worried, upset or afraid, it will help to find out how to improve this.

## Other Ways To Help

- Decrease ‘blue’ light in the bedroom. Regular light bulbs and computer screens give off light that includes ‘blue light’ (although we don’t really notice the blue colour). Blue light affects the brain, making it harder to fall asleep. Try orange or red light bulbs for the bedside lamp.
- Security objects. Let your child sleep with a favourite blanket or stuffed toy to feel safe.
- Pets. Your child or teen might feel better with the family dog or cat close by. Take care, though, sleeping with pets in the same bed can get in the way of a good night’s sleep.
- Respond quickly to comfort your child or teen when he wakes up from a nightmare. Let your child or teen know that she can come to your room if needed. Some parents find it helps to let their child come in to their bed when after a nightmare, until the child feels safer.
- Co-sleeping in the same room. Young children can feel safer and be comforted more easily with parents in the same room. Some families share a family bed. But this doesn’t work for everyone. Sharing a family bed can disrupt everyone’s sleep.
- The Public Health Agency of Canada (PHAC) recommends that babies sleep in a crib with only a fitted sheet next to the adult’s bed for the first 6 months. The Canadian Pediatric Society reminds parents that babies under 1 year are safest in their own crib. [http://www.caringforkids.cps.ca/handouts/safe\\_sleep\\_for\\_babies](http://www.caringforkids.cps.ca/handouts/safe_sleep_for_babies)

- Avoid or limit scary or violent books, stories, movies or games.
- Discuss nightmares openly during the day. When your child or teen is calm, you may wish to ask about the nightmares and the feelings they cause (for example, fear or loneliness).
- Re-write the nightmare. The day after a nightmare, have your child tell you about the nightmare, while you write it down. Then together, come up with a new ending that isn't scary. Older children and youth can do the writing themselves, if they wish.
- For older children and youth, help them prepare a wall poster they can look at when a nightmare wakes them. The poster can list and illustrate things they can do when they wake from a nightmare. For example:

When I have a nightmare, I can:

- Turn on the light.
- Tell a parent or caregiver.
- Remind myself that I am in a safe place.
- Practice grounding strategies:
  - What are 5 things that I can see? (for example: my bed, the wall, posters on my wall, stuffed animals, books...).
  - What are 4 things that I can touch and feel? (for example: the wall, the bed, the pillows, rubbing my hands, stomping my feet).
  - What are 3 things that I can hear? (for example: soothing music, or my voice saying, "I've just had a dream", "None of it was real", "I'm just going to just chill").
  - What are 2 things that I can smell? (for example: the dog, scented oils, dried lavender, scented lotion).
  - What is 1 thing that I am grateful for? (for example, "I am grateful for...").
- Practice calming strategies:
  - Physical exercise (this uses up adrenaline, a body chemical released when we are afraid).
  - Gentle rocking movement (like in a rocking chair).
  - Fidgeting with stress balls.
  - Listening to soothing, relaxing music .

## When Should We See a Professional?

---

Speak to your health care provider if the nightmares are causing problems with sleep, or any other distress.

## Are There Any Treatments For Nightmares?

---

Professionals may use some of the following for nightmares:

- Counselling / 'Talking' Therapy which helps the child/youth:
  - Figure out some of the underlying causes of the nightmares;
  - Work through thoughts and feelings.
- Stress management. Children and youth can learn ways to manage stress and calm themselves. This can help them relax and fall asleep, and to fall back to sleep after a nightmare. Relaxation and mindfulness exercises can be very helpful.

More intensive counselling may be needed if the nightmares are caused by a traumatic event. For example:

- Image Rehearsal Therapy (IRT). This therapy was developed by Dr. Krakow in the 1990's for survivors of sexual assault. Most people who use this strategy for nightmares find it makes the nightmares less intense. IRT involves:
  - Writing down the nightmares in detail;

- Changing the story to include positive images and endings;
- Practice reading and rehearsing the 'new' dream each day for several weeks. Children too young to write can dictate the nightmare to a parent. Parent and child can then work together to come up with a more positive ending, and write the new dream down. Aim for a peaceful theme, that reinforces that the world is a safe place. For example, if the child was dreaming about being chased by a dragon, avoid a 'new' ending where the child kills the dragon. Instead, perhaps the dragon was hungry, or lonely? Then your child could make friends with the dragon.
- Systematic desensitization: With this strategy, a therapist helps a child or teen to face the upsetting nightmare very gradually. With time, the strong emotional response to the nightmare gets weaker. This works best when frequent nightmares follow a traumatic event.

---

## Helpful Websites

The American Academy of Sleep Medicine has an excellent website with more information about nightmares.  
<http://www.sleepeducation.org/sleep-disorders-by-category/parasomnias/nightmares/overview>

Canadian Pediatric Society

[http://www.caringforkids.cps.ca/handouts/safe\\_sleep\\_for\\_babies](http://www.caringforkids.cps.ca/handouts/safe_sleep_for_babies)

[http://www.caringforkids.cps.ca/handouts/healthy\\_sleep\\_for\\_your\\_baby\\_and\\_child](http://www.caringforkids.cps.ca/handouts/healthy_sleep_for_your_baby_and_child)

Sleep for youth: Information for parents (CHEO fact sheet)

<http://www.cheo.on.ca/en/Sleep-Youth>

MindMasters 2: Skills that last a lifetime, available free:

<http://www.cyhneo.ca/mindmasters-2-dha2r>

---

## References

Sandman N et al. Nightmares: Risk factors among the Finnish general population. *Sleep*, 38(4), 2015.  
<http://dx.doi.org/10.5665/sleep.4560>.

American Academy of Sleep Medicine. *International Classification of Sleep Disorders: Diagnostic and Coding Manual*. 2nd ed. Westchester, Ill: American Academy of Sleep Medicine; 2005.

American Psychiatric Association. *Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition*. 5th ed. Washington, DC: American Psychiatric Association; 2013.

The Joint Statement on Safe Sleep: Preventing Sudden Infant Deaths in Canada

[http://www.phac-aspc.gc.ca/hp-ps/dca-dea/stages-etapes/childhood-enfance\\_0-2/sids/jsss-ecss-eng.php](http://www.phac-aspc.gc.ca/hp-ps/dca-dea/stages-etapes/childhood-enfance_0-2/sids/jsss-ecss-eng.php)

---

## About This Document

Written by members of the Mental Health Information Committee of the Children's Hospital of Eastern Ontario (CHEO), an interdisciplinary group that includes psychiatry, psychology, child/youth care, social work, nursing, and occupational therapy. Thanks to Dr. Marjorie Robb for comments and suggestions.

---

## License

Under a Creative Commons License. You are free to share, copy and distribute this work as in its entirety, with no alterations. This work may not be used for commercial purposes. View full license at  
<http://creativecommons.org/licenses/by-nc-nd/2.5/ca/>

---

## Disclaimer

Information in this fact sheet may or may not apply to your child. Your health care provider is the best source of

information about your child's health.