

Regular Bedtime and Mealtime

Headline

Young children from low income families are much less likely than those from high income families to have a regular bedtime and a regular mealtime. In 2000, 47 percent of those with annual family incomes at or below \$17,500 had both the same bedtime and the same mealtime every day, compared with 70 percent for those with family incomes exceeding \$60,000. ([See Figure 4](#))

Importance

Regular routines, such as consistent bedtimes and mealtimes, can provide a sense of security, comfort, and control to children and can help them develop self-confidence.¹ Routines can decrease behavioral conflicts by allowing young children to anticipate what will happen next and can help ease transitions between different activities and different caretakers. Routine interactions are an opportunity for parents to teach children social behaviors such as sharing and waiting and for children to develop communication skills and self-control.²

Regular bedtimes help to make sure children are getting adequate rest.³ Establishing a bedtime reinforces a child's internal biological clock, helping them to fall asleep more easily.⁴ Research shows that a regular bedtime can reduce sleep problems,⁵ which are associated with lower academic achievement during elementary school.⁶ Consistent mealtimes help ensure that children will become hungry at regular times.⁷ In addition, regular bedtimes and mealtimes may positively affect school readiness.⁸

Trends

In 2000, 73 percent of children ages 4 months to 35 months had the same bedtime every day and 75 percent had the same mealtime every day. Fifty-eight percent of children at this age had both the same bedtime and mealtime every day. ([See Figure 1](#)) No trend data are available.

Differences by Race and Ethnicity

Among the racial and ethnic groups reporting, non-Hispanic white children are the most likely to have both a regular mealtime and a regular bedtime. In 2000, 63 percent of non-Hispanic white children had both a regular bedtime and a regular mealtime, compared with 53 percent of Hispanic children and 47 percent of non-Hispanic black children. ([See Figure 2](#))

Differences by Mother's Education

Children of mothers with less than a high school education are less likely than children of mothers with a high school diploma and mothers with more than a high school diploma to have a regular bedtime and regular mealtime (42 percent versus 59 percent and 65 percent, respectively, in 2000). ([See Figure 3](#))

Differences by Mother's Marital Status

Children of mothers who are never married are less likely than children of married mothers to have a regular bedtime and mealtime. Forty-five percent children with mothers who have never married had the same bedtime and mealtime everyday, compared with 62 percent of children with mothers who are married. ([See Table 1](#))

Differences by Family Income

Children living in families with low incomes are less likely than children living in families with higher incomes to have the same bedtime and mealtime every day. Forty-seven percent of children in families with annual incomes up to \$17,500 had both a regular bedtime and a regular mealtime, compared with 56 percent of children in families with incomes from \$17,501 to \$35,000, 64 percent of children in families with incomes from \$35,001 to \$60,000, and 70 percent of children living in families with income more than \$60,000. ([See Figure 4](#))

State and Local Estimates

None available

International Estimates

None available

National Goals

None available

Definition

In the context of this indicator, a child has a regular bedtime if his or her parent reported that the child's bedtime is usually the same everyday. Similarly, a child has a regular mealtime if his or her parent reported that the child's mealtime is usually the same everyday.

Data Source

Child Trends' original analyses of data from the National Survey of Early Childhood Health.

Raw Data Source

National Survey of Early Childhood Health
<http://www.cdc.gov/nchs/about/major/slaits/nsech.htm>

Next Update

Unknown

¹ K.T. Young K. Davis, and C. Schoen, *The Commonwealth Fund Survey of Parents with Young Children* (The Commonwealth Fund, August 1996). Available at http://www.cmwf.org/usr_doc/172_parents_survey.pdf.

² Zero to Three, *Routines and Rituals*. Available at www.zerotothree.org/ztt_parents.html.

³ M.J. Coiro, N.Zill, and B. Bloom, "Health of Our Nation's Children," *Vital Health Statistics* 10 (1994). Available at http://www.cdc.gov/nchs/data/series/sr_10/sr10_191.pdf.

⁴ National Institutes of Health, News Release. (September 17, 2002). Nine Hours of Sleep Key to "Back to School Success." Available at <http://www.nhlbi.nih.gov/new/press/02-09-19.htm>.

⁵ Ramchandani, Paul, Wiggs, Luci, Webb, Vicky, and Gregory Stores, "A systematic review of treatments for settling problems and night waking in young children." (2000). *British Medical Journal* BMJ. 2000 January 22; 320(7229): 209–213. Available at

<http://www.pubmedcentral.nih.gov/articlerender.fcgi?artid=27265>.

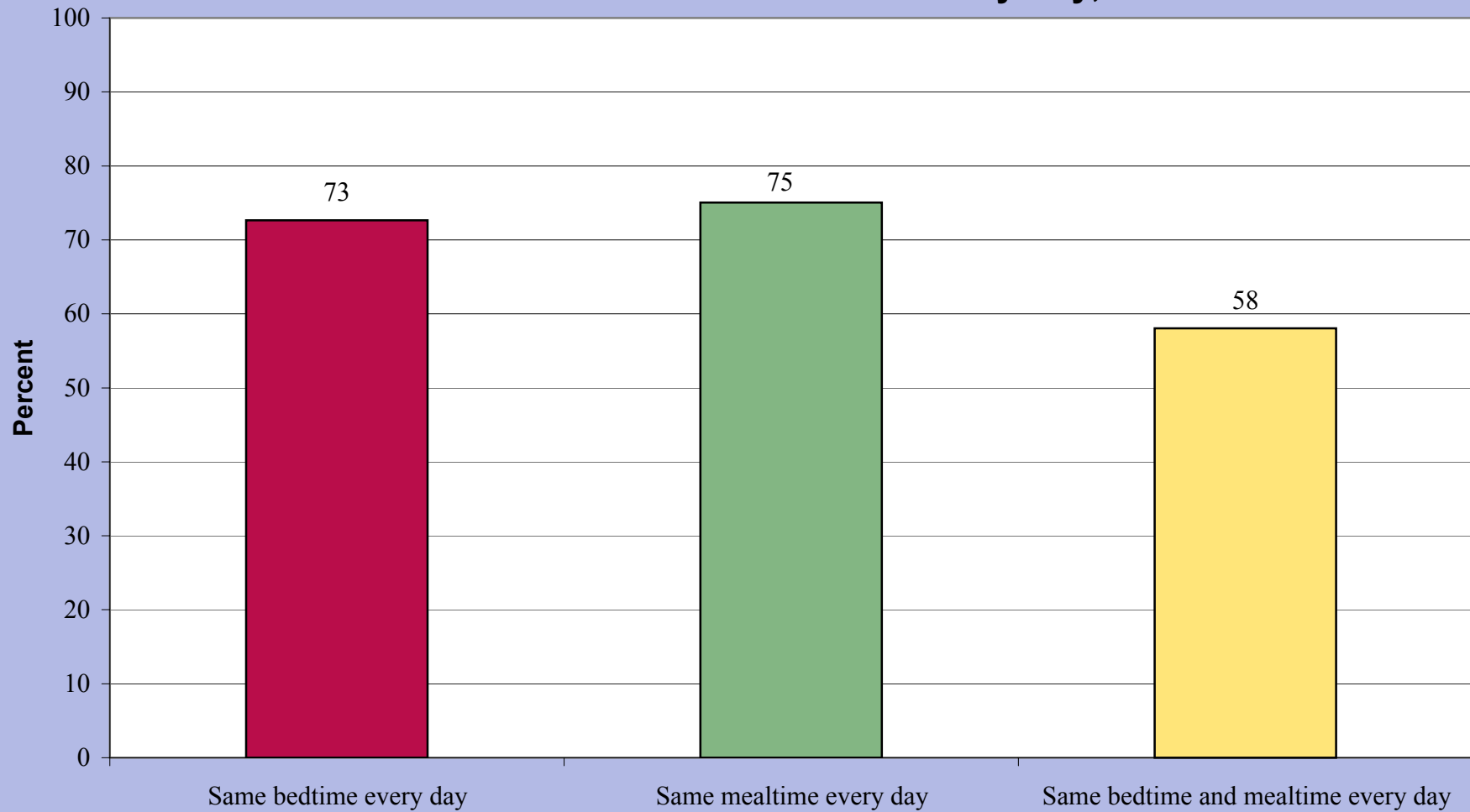
⁶ A. Kahn, C. Van de Merckt, E. Rebuffat, M.J. Mozin, M. Sottiaux, D. Blum, and P. Hennart, "Sleep Problems in Healthy Preadolescents," *Pediatrics* 84 (3,1989):542-546.

⁷ Centers for Disease Control and Prevention, *Healthy Children, Healthy Choices*. Available at http://www.cdc.gov/nccdphp/dnpa/tips/healthy_children.htm

⁸ N. Halfon, L. Olsen, M. Inkelas et. al, "Summary Statistics From the National Survey of Early Childhood Health," *Vital Health Statistics* 15 (2002). Available at www.cdc.gov/nchs/data/series/sr_15/sr15_003.pdf.

Figure 1

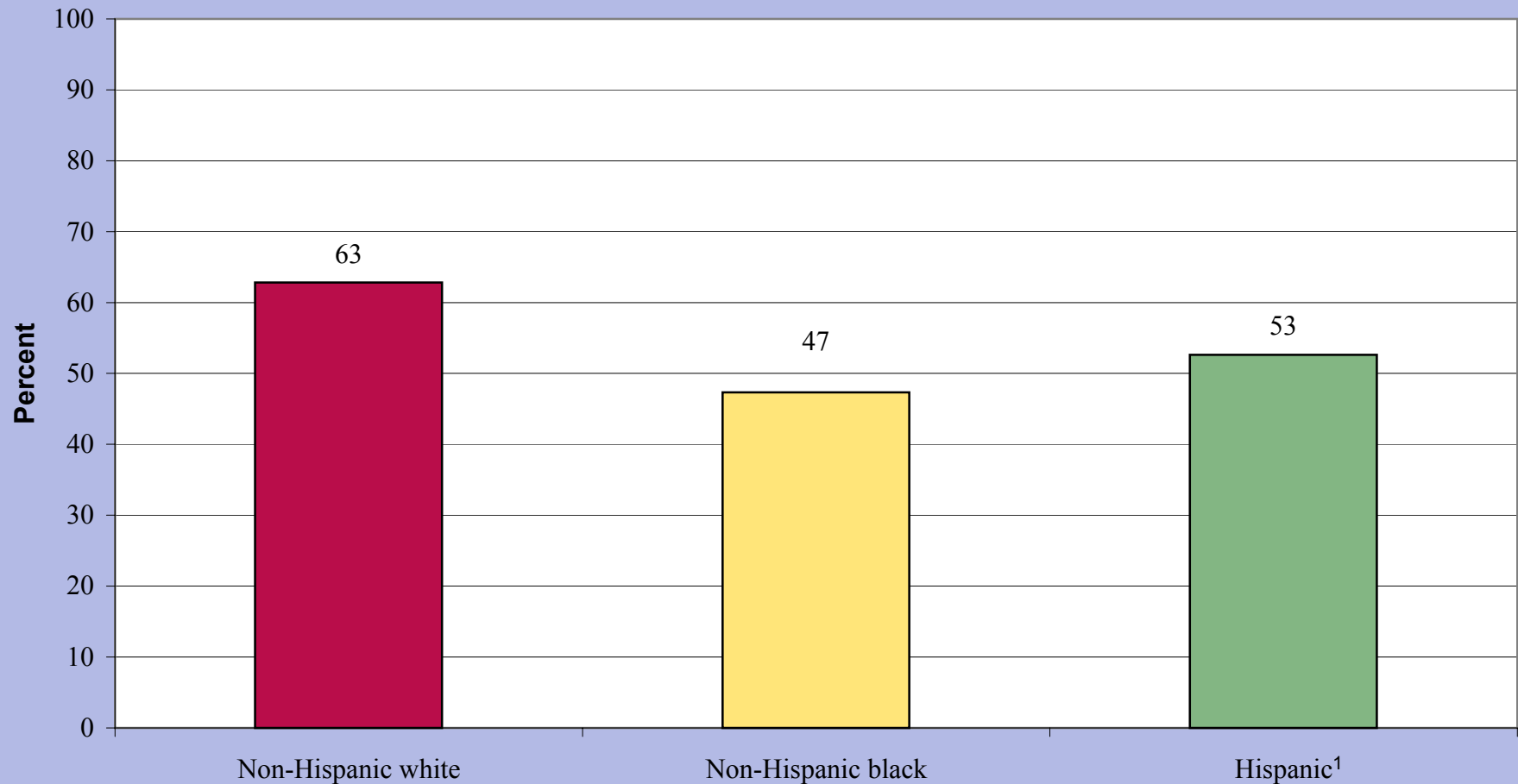
Percentage of Children Ages 4 Months to 35 Months With the Same Bedtime and the Same Mealtime Every Day, 2000



Source: Original analysis by Child Trends using data from the National Survey of Early Childhood Health, 2000.

Figure 2

Percentage of Children Ages 4 Months to 35 months With the Both Same Bedtime and the Same Mealtime Every Day, By Race and Hispanic Origin, 2000

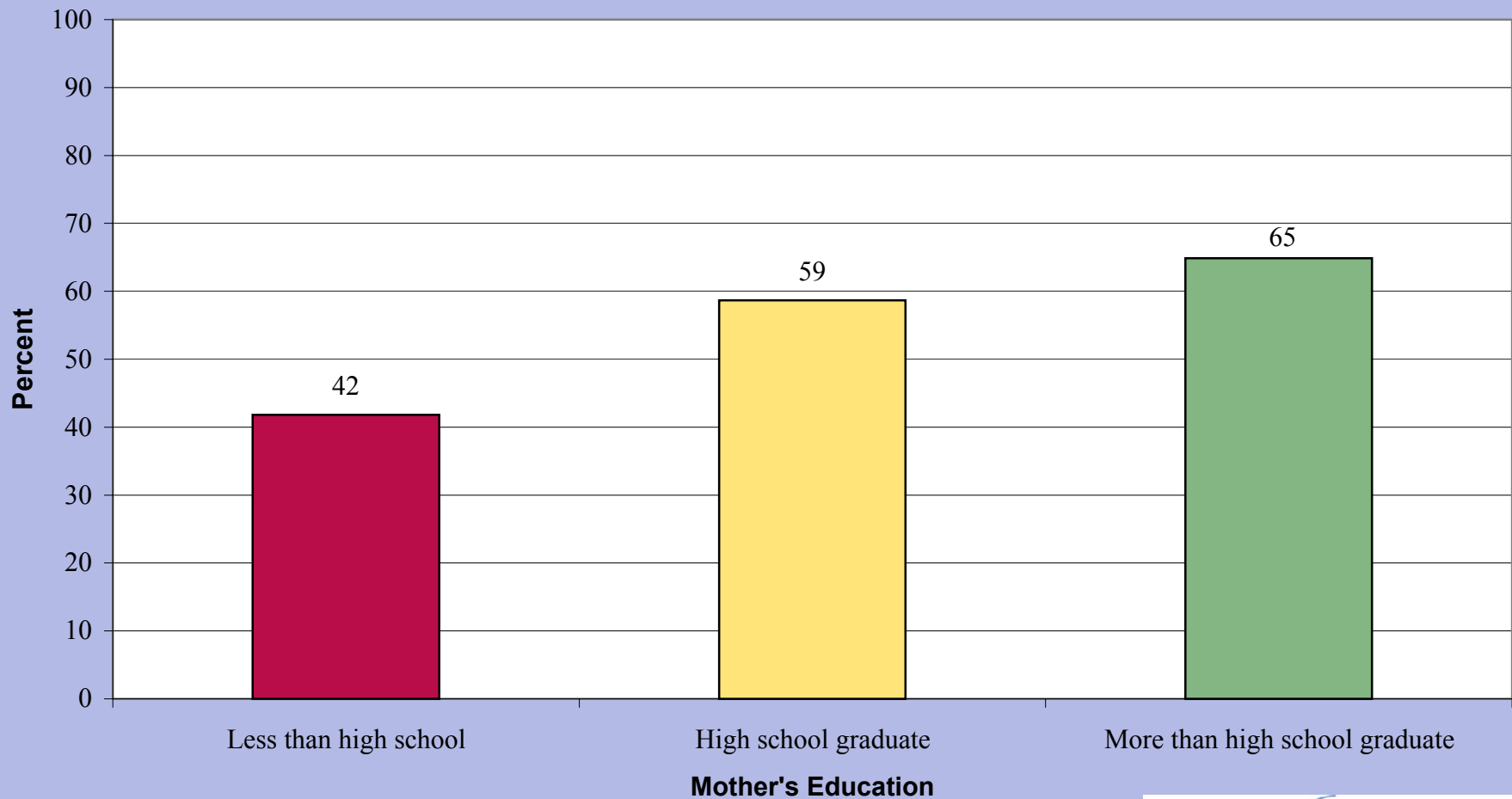


¹Persons of Hispanic origin may be of any race.

Source: Original analysis by Child Trends using data from the National Survey of Early Childhood Health, 2000.

Figure 3

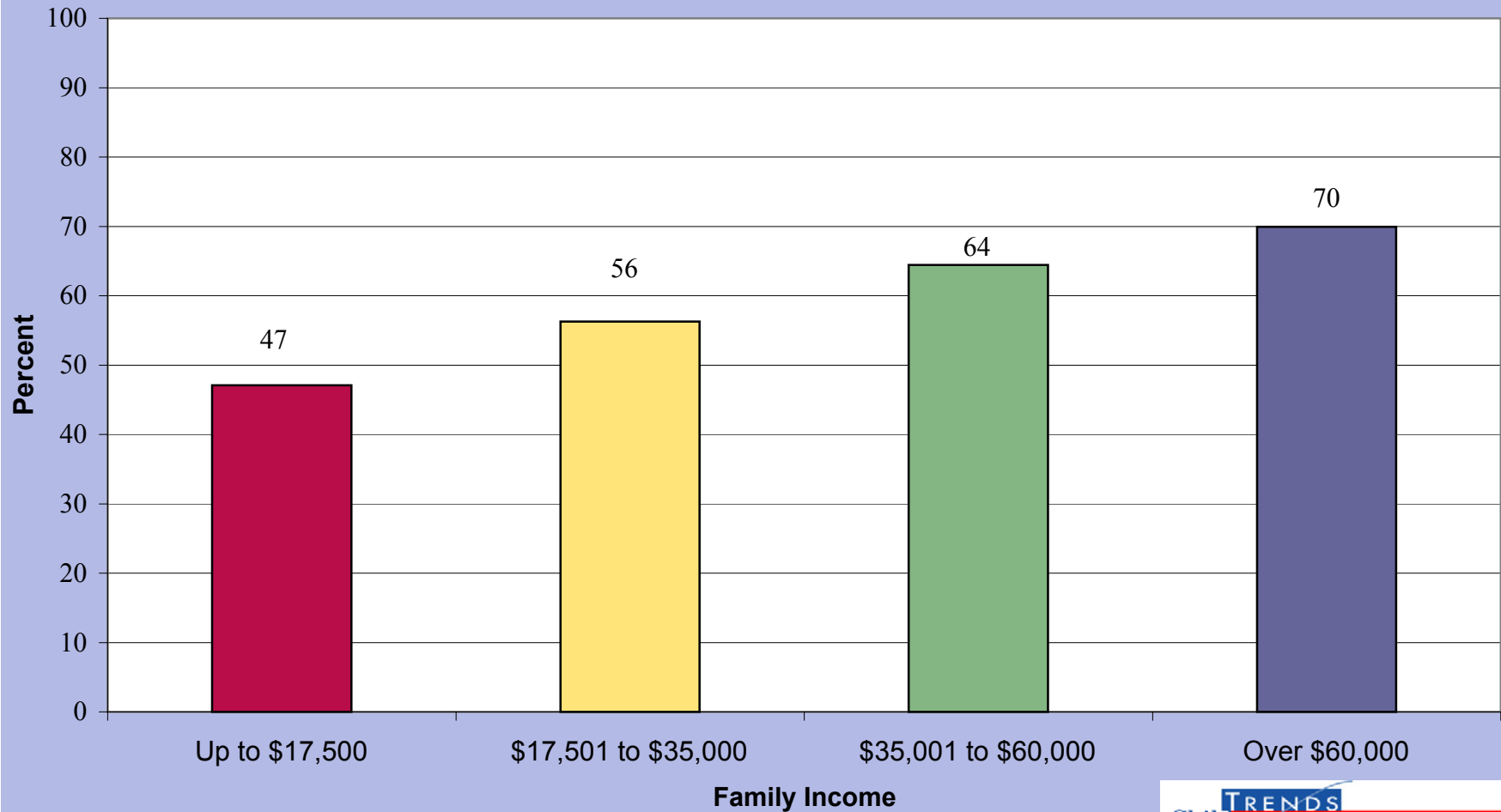
Percentage of Children Ages 4 Months to 35 Months With Both the Same Bedtime and the Same Mealtime Every Day, By Mother's Education, 2000



Source: Original analysis by Child Trends using data from the National Survey of Early Childhood Health, 2000.

Figure 4

Percentage of Children Ages 4 Months to 35 Months With the Both Same Bedtime and the Same Mealtime Every Day, By Family Income, 2000



Source: Original analysis by Child Trends using data from the National Survey of Early Childhood Health, 2000.



Table 1

**Percentage of Children Ages 4 Months to 35 Months with the Same Bedtime and
the Same Mealtime Every Day, 2000**

	Same bedtime every day	Same mealtime every day	Same bedtime and mealtime every day
Total	72.6	75.0	58.0
Age			
4 to 9 months	78.7	68.5	57.8
10 to 18 months	77.7	75.9	61.2
19 to 35 months	67.8	76.9	56.5
Gender			
Male	72.8	76.8	58.8
Female	72.5	73.1	57.2
Race and Hispanic Origin			
White non-Hispanic	76.3	79.0	62.8
Black non-Hispanic	65.2	65.0	47.3
Hispanic ¹	68.8	70.8	52.6
Mother's Marital Status			
Married	75.7	78.1	62.1
Divorced/Widowed/Separated	70.2	74.2	57.1
Never Married	63.7	65.6	45.2
Mother's Education			
Less than high school	58.7	63.5	41.8
High school graduate	72.7	76.8	58.7
More than high school graduate	78.9	78.9	64.9
Family Income			
Up to \$17,500	63.7	67.6	47.1
\$17,501 to \$35,000	69.7	75.7	56.3
\$35,001 to \$60,000	77.4	79.0	64.4
Over \$60,000	82.2	82.1	70.0
WIC Receipt			
Receive WIC benefits	69.0	68.6	49.9
Did not receive WIC benefits	63.4	70.2	48.9
Health Insurance Coverage			
Not insured	67.2	70.0	47.2
Insured	73.2	75.5	59.1
Private insurance	77.0	78.0	63.4
Public	66.2	70.9	51.2
Region			
Northeast	74.0	76.5	60.1
Midwest	74.5	77.7	62.3
South	70.6	72.7	54.5
West	73.3	75.3	58.3
Discuss Bedtime Routine with Doctor			
Discussed Bedtime	72.4	-	-
Did not discuss bedtime	63.5	-	-

¹Persons of Hispanic origin may be of any race.

Source: Original analysis by Child Trends using data from the National Survey of Early Childhood Health, 2000.

