Nightmares vs Night Terrors

Knowing the difference helps you respond in the right way

Waking in the night frightened, crying or screaming is very common in childhood. Nightmares and night terrors can look similar, but they are **two different things** – and what helps with one can make the other worse. Most children grow out of both.

Nightmare

A frightening dream.
Your child wakes up, is upset,
and wants comfort from you.

Night Terror

A partial waking from deep sleep.
Your child seems awake and distressed,
but is actually still asleep.

Spot the difference

	Nightmare	Night Terror
When it happens	Later in the night or early morning, during dreaming (REM) sleep	Early in the night – usually within the first few hours of sleep
Age	Can happen at any age, in children and adults	Most common between ages 3 and 8
What you might see	Child wakes up crying or scared, and is clearly awake	Screaming, thrashing, sitting up or getting out of bed, eyes open – but not awake
Response to you	Knows you are there and can be comforted	May not recognise you; may push you away; comfort doesn't seem to help
How long	Child wakes quickly; may take a while to settle back to sleep	Can last up to 15 minutes, then child falls back to sleep
Next morning	Usually remembers the dream and may want to talk about it	Usually remembers nothing at all
Getting back to sleep	May be hard – child may feel scared to go back to sleep	Usually goes straight back into calm sleep

The key question to ask yourself

Is my child awake and able to be comforted? If yes, it's likely a nightmare – go in and comfort them. If they seem awake but don't respond to you and can't be comforted, it's likely a night terror – stay close, keep them safe and let it pass.

Tip: night terrors at the same time each night?

> If they happen at around the same time every night, the NHS suggests gently waking your child about 15 minutes before, every night for 2 weeks. This can interrupt the sleep cycle and stop the pattern.

What to do

During a nightmare

- Go to your child quickly and calmly
- Offer comfort – a cuddle, a familiar toy, a gentle voice
- Reassure them it was a dream and they are safe
- Use your child's preferred calming strategies – e.g. weighted blanket, low lighting, a favourite sensory item
- Help them settle back to sleep; keep lights low and the room quiet
- Talk about the dream the next day if they want to – not in the middle of the night

During a night terror

- Stay calm and stay close – wait for it to pass
- **Don't** try to wake your child – they may be confused and more upset
- **Don't** talk to them or hold them down, unless they are at risk of hurting themselves
- Keep them safe – move hard or sharp objects, consider a stair gate
- Let them settle back to sleep on their own
- **Don't** mention it the next day – it may worry them, and they won't remember

Common triggers

- Being overtired or not getting enough sleep
- Being unwell or having a high temperature
- Stress, anxiety or worry – e.g. starting school, changes to routine
- Frightening events, stories, films or games
- Being woken suddenly from deep sleep – e.g. by noise or needing the toilet
- Some medicines
- A family history of night terrors or sleepwalking (night terrors only)

Helping to prevent them

- **Keep a regular bedtime routine** – the same calm steps in the same order each night. A visual bedtime timetable can really help.
- **Make sure your child gets enough sleep** – overtiredness is a common trigger for night terrors.
- **Think about the sensory environment** – light, noise, temperature and bedding textures can all affect sleep.
- **Avoid screens and scary content before bed** – including exciting games and films.
- **Keep a sleep diary** for 2–3 weeks – noting bedtime, wake times, and anything unusual that day. This helps you spot patterns and is useful to share with a GP.
- **Help with worries during the day** – social stories or talking through upcoming changes can reduce bedtime anxiety.

When to speak to your GP

Most children grow out of nightmares and night terrors. See your GP if:

- Nightmares are still happening often after the age of 6
- Your child has frequent nightmares, or they started after an upsetting or frightening event
- Night terrors start after the age of 5, or are still happening after the age of 12
- Night terrors are happening several times a night or most nights
- Sleep problems are affecting your child's behaviour, learning or daily life – or yours

Autism and sleep

Sleep difficulties are very common in autistic children. Sensory sensitivities, anxiety, changes to routine and differences in how the body regulates sleep can all play a part. If your child's sleep is affecting the whole

family, you are not alone – please speak to your GP, health visitor or school nurse, or contact the Sycamore Trust Family Services team for support.

Sources: NHS – Night terrors and nightmares (nhs.uk); NHS 111 Wales – Night terrors and nightmares; nidirect – Night terrors. This fact sheet is for general information and does not replace advice from a health professional.