

*A Professional's Guide to  
improving Sleep Hygiene in  
Mental Health Patients using  
Psychological Methods*

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# ***Contents***

## ***Section one***

*The Importance of sleep*

## ***Section two***

*Factors impacting on sleeping difficulties*

## ***Section three***

*Medications and sleep*

## ***Section four***

*Approaches to help with sleeping difficulties*

## ***Section five***

*Numbers and resources*

# Section one

## *The Importance of sleep*

It has been widely suggested that we spend about a third of our lives asleep. **Sleep is vital.** It is as important as eating, drinking and breathing and helps us to recover from mental and physical exertion.

Sleep and health are strongly linked. Sleep disturbances can affect mood, energy and concentration levels, our relationships, and our ability to stay awake and function during the day. **Sleep disturbances can often be an early indicator of a decline in mental health.**

Addressing sleep and sleep disorders as part of mental health treatment is very important and is often overlooked. People can often believe that having minimal sleep (3-5 hours) does not impact them. Therefore, it can be helpful to remind people of the importance of sleep.

### **Why is sleep important?**

**Sleep improves mental health and enhances mood.** Studies have found that a lack of sleep is related to mental health conditions like anxiety, bipolar disorder, and PTSD. A lack of sleep can make a person feel low, irritable and anxious, among many other things. It can also make us feel low in energy and decrease motivation to engage in daily activities, which can ultimately lead to social withdrawal and isolation.

**Sleep empowers an effective immune system.** Regular sleep boosts our body's defences and studies have found that a lack of sleep can reduce the effectiveness of some vaccines.

**Sleep can improve our physical health.** A lack of sleep can cause an increase in blood pressure and stress hormones. It can also have a negative impact on cardiovascular health as it is linked to an increased risk of strokes, diabetes and heart attacks.

**Sleep heightens brain function.** Our mind works better when we get good sleep, contributing to complex thinking, learning, memory, and decision-making.

(Adapted from The Sleep Foundation)

## Section two

### *Factors impacting on sleeping difficulties*

Sleep problems are very common and affect people in different ways. There is no “right” amount of sleep and this varies from person to person and across the life span. For example the effects of aging mean that as a person gets older, they do not sleep as deeply and may wake more frequently in the night to go to the toilet. To combat sleeping difficulties it is important to consider what factor(s) below may be contributing to disturbed sleep, finding the causes can help generate solutions. At the end of this booklet, we have included a diagram which may be helpful for individuals to complete in order to try to understand how their sleeping difficulties have developed, what keeps the difficulty going and what can help.

#### **Stress, worry and anxiety**

If someone is stressed and/or anxious, they may experience difficulties in both getting to sleep and maintaining a good night's sleep. This can cause both physiological and psychological consequences, including feeling physically tense and/or ruminating and worrying.

Worrying about not getting enough sleep can also become self-sabotaging and can often make the problem worse. The effects of worrying about sleep can lead to a cycle maintaining the initial problem, for example worry thoughts like “I'll be exhausted tomorrow” may cause someone to feel more anxious and tense, which in turn leads to more worrying.



## **Nightmares**

Nightmares are dreams with “vivid and disturbing content” and usually cause individuals to wake abruptly during sleep. This can impact the quality of one’s sleep and some people may find it difficult to go back to sleep following a nightmare. If an individual experiences frequent nightmares, they may also struggle to fall asleep due to fearing and/or expecting the nightmare. For this reason, individuals may also avoid, or put off, going to sleep. Sometimes individuals may not realise that they are doing this, so it can be helpful to gently explore this with them.

(information adapted from the Sleep Foundation)

## **Surroundings**

Our surroundings can make a big difference to how we sleep including a room that is too hot or too cold or a mattress that is too hard or too soft and whether a room is too noisy or light. All these factors may collectively or individually impact on both getting to sleep and maintaining a good night’s sleep.

## **Disturbed sleep routine**

This can be influenced by lifestyle factors such as smoking, and drinking alcohol. Having an established routine can be an effective way at reducing disturbed sleep. There may be a combination or singular cause(s) for disturbed sleep, but it is important to try and maintain a routine as much as possible and regular exercise can help tire us.

## **Over stimulation before bedtime**

Using electronic devices such as mobile phones or ipad’s can greatly impact on our ability to fall asleep, this may also be due to playing video games. Using stimulants such as **caffeine** or **nicotine** can also impact on our ability to sleep.

## **Diet**

Studies suggest that eating more saturated fat and more sugar throughout the day is linked with lighter and less restorative sleep. Other foods like lasagne, chocolate or ice cream can trigger acid reflux and contribute to difficulties in getting to sleep. There are other sleep related disorders which are linked to obesity. Excess body weight can contribute to sleep apnoea by causing increased pressure of the airways.

## **Perimenopause/ menopause/ post menopause**

More than half of premenopausal women sleep less than 7 hours a night, on average. From perimenopause to post menopause, women report the most sleeping problems. These include hot flushes, mood disorders, insomnia and sleep disordered breathing. Research has reported that as many as 61% of post-menopausal women report insomnia symptoms. Hormone replacement therapy may help relieve menopausal symptoms and this can be explored with a person's GP.

Information from: <https://www.sleepfoundation.org/articles/menopause-and-sleep>

## **Medical reasons**

There are of course, medical reasons which can contribute to finding it difficult to get to sleep or cause you to wake in the night, some of which include:

### **Sleep apnoea**

Symptoms of sleep apnoea mainly occur when a person is asleep. The signs of this include: stopping and starting breathing, making gasping, snorting or choking noises, waking a lot and loud snoring. It may be helpful for a partner or someone stay with you to check if you are displaying symptoms of sleep apnoea. If this is the case we would encourage a person to contact their GP to discuss treatment options.

### **Chronic pain**

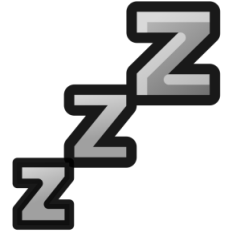
Back pain is the most common type of chronic pain and research has demonstrated that disturbed sleep will exacerbate chronic back pain and so a vicious cycle is maintained through pain disturbing sleep and then difficulty in sleep making the pain worse. It may be beneficial to seek advice from their GP about positions and ways to sleep to ease pain (other than medications), such as having pillow between legs, ensuring the mattress is appropriate and engaging in mindfulness.

Reference: Schrimpf M, Liegl G, Boeckle M, Leitner A, Geisler P, Pieh C. The effect of sleep deprivation on pain perception in healthy subjects: a meta-analysis. *Sleep Med.* 2015;16(11):1313-20.

Other medical reasons for sleep difficulties include:

- Restless leg syndrome
- Headaches and migraines
- Gastrointestinal problems, such as acid reflux, nausea or vomiting
- Neurodegenerative conditions such as Parkinson's disease and Alzheimer's disease

# Section three



## Medication and sleep

### Quick fix?

When it's the middle of the night and a client tells you that they have spent hours looking up to the ceiling and experiencing difficulties in getting to sleep and/or maintaining sleep, we are often met with medication requests. This is because there is a temptation for sleep aid or relief and it may be achieved if the medication is a 'one off' but medication should be a last resort and additional ways of coping should be explored first.

### Insomnia

*Also known as sleeplessness, insomnia is a sleep disorder in which people have trouble sleeping. They may have difficulty falling asleep, or staying asleep as long as desired. Insomnia is typically followed by daytime sleepiness, low energy, irritability and depressed mood.*

### What causes insomnia?

Anxiety, stress and depression are some of the most common causes of chronic insomnia. Sleeping difficulties can also make anxiety, stress and depression symptoms worse. Other common and psychological causes include anger, worry, grief and trauma. **Insomnia is a significant concern that has prompted substantial amounts of treatment and management strategies. When an individual has sleeping difficulties, they may have used both prescribed and over the counter medications.**

Sleep medication may help with insomnia in the short term, but it's important that all information is considered before seeking sleeping medications. Medication to aid sleep can be bought over the counter or prescribed and all medications have possible side effects.

### Common side effects from sleep medications include:

- Prolonged drowsiness the next day
- Headache
- Muscle aches
- Constipation
- Trouble concentrating
- Dizziness
- Unsteadiness
- Rebound insomnia

### Complications of taking sleep medication

#### Rebound insomnia

This occurs when the user's body becomes dependant on the medication to fall asleep. When a person stops taking them, they may find the insomnia returns, or rebounds, and can often be worse than before. It is therefore critical to consider all other possibilities before seeking medications.

## **Tolerance**

When sleeping medications, such as benzodiazepines, are commonly used they may stop working. This is because a person builds a tolerance towards the medication. This means an individual is likely to require higher doses to get the same sleep induced-effect. However, the risks associated with higher doses include depressed breathing while a person sleeps, which may also be due to other medical disorders such as sleep apnoea.

## **Abuse of intended purpose**

Sleeping medications are sedative in nature and for this very reason, a person may choose to abuse sleeping medications. An example is taking this medication when they face something in life that makes them feel particularly anxious. It may start with a plane journey but eventually be used just to go to the shops and so creates a dependency to take the sedative medications to get through.

## **Dependency**

Many people assume they won't become addicted to sleeping medications and can use them regularly. But as tolerance increases, as does the dosage and many people don't realise they have become dependent or possibly addicted to taking these sleeping medications until they are taken away. Once this happens, they may experience withdrawal symptoms. These include:

- Delirium and hallucination
- Cravings
- Irritability
- Increased heart rate
- Rebound insomnia
- Nausea and vomiting
- Tremors

## **Impaired activities like driving**

People may have enough medication in their bodies the next morning to impact on activities like driving.



# ***Section four***

## ***Approaches to help with sleeping difficulties***

Most sleep difficulties can be put into two categories; difficulties with falling asleep and difficulties staying asleep.

It is important to explore with clients what it is that is stopping them from falling or staying asleep. Is it the environment? Are they experiencing racing thoughts? Have they had difficulties with this before and, if so, has anything helped in the past (other than medication)?

### **Difficulties falling asleep**

#### **Take time to wind down**

A regular bedtime routine allows our bodies and minds time to slow down and recognise that it is time for sleep. Try to encourage individuals to take at least half an hour to play quiet music, take a bath/shower, or read a book before bed. Encourage them to avoid checking their phone or watching TV.

#### **Avoid stimulants such as caffeine and nicotine close to bedtime**

This includes alcohol as it can disrupt sleep as our bodies begin to process it.

#### **Avoid food that can be disruptive right before sleep**

Heavy or rich foods, spicy dishes, citrus fruits, and carbonated drinks can cause indigestion for some people. When this occurs close to bedtime, it can lead to painful heartburn that disrupts sleep.

#### **Make sure that the sleeping environment is pleasant**

Mattress and pillows should be comfortable and the bedroom should be cool. Have they considered using blackout curtains, eye masks, ear plugs, "white noise" machines and other devices that can make the bedroom more relaxing?

#### **Limit day time naps to 30 minutes**

If individuals have had a bad night's sleep, it makes sense that they might want to sleep during the day. However, sleeping during the day can make sleeping at night even more difficult. So individuals should try not to sleep during the day, however, if they need to then short 20-30 minute naps can help.

#### **Add exercise to the day**

Regular exercisers fall asleep faster and sleep more soundly. In fact, even a brisk walk can improve sleep among people with chronic insomnia. As little as 10 minutes of walking can improve sleep quality. You could try to prompt individuals to go for a 10 minute walk during the day and see how it impacts their sleep.

### **Be exposed to natural light**

This is particularly important to those who spend most of their time indoors. Going outside, if they can, or opening the curtains to natural sunlight helps the body recognise that it is daytime. This can help promote an effective sleep-wake cycle.

### **Try meditation**

Learning to quiet our minds can be a helpful skill for falling asleep at night. Encourage individuals to take deep breaths and quietly focus on their inhale and exhale. There are also free apps that will help guide them, such as Headspace and Pzizz. These apps are free to download via the App store.

### **Put your to-dos or worries on paper**

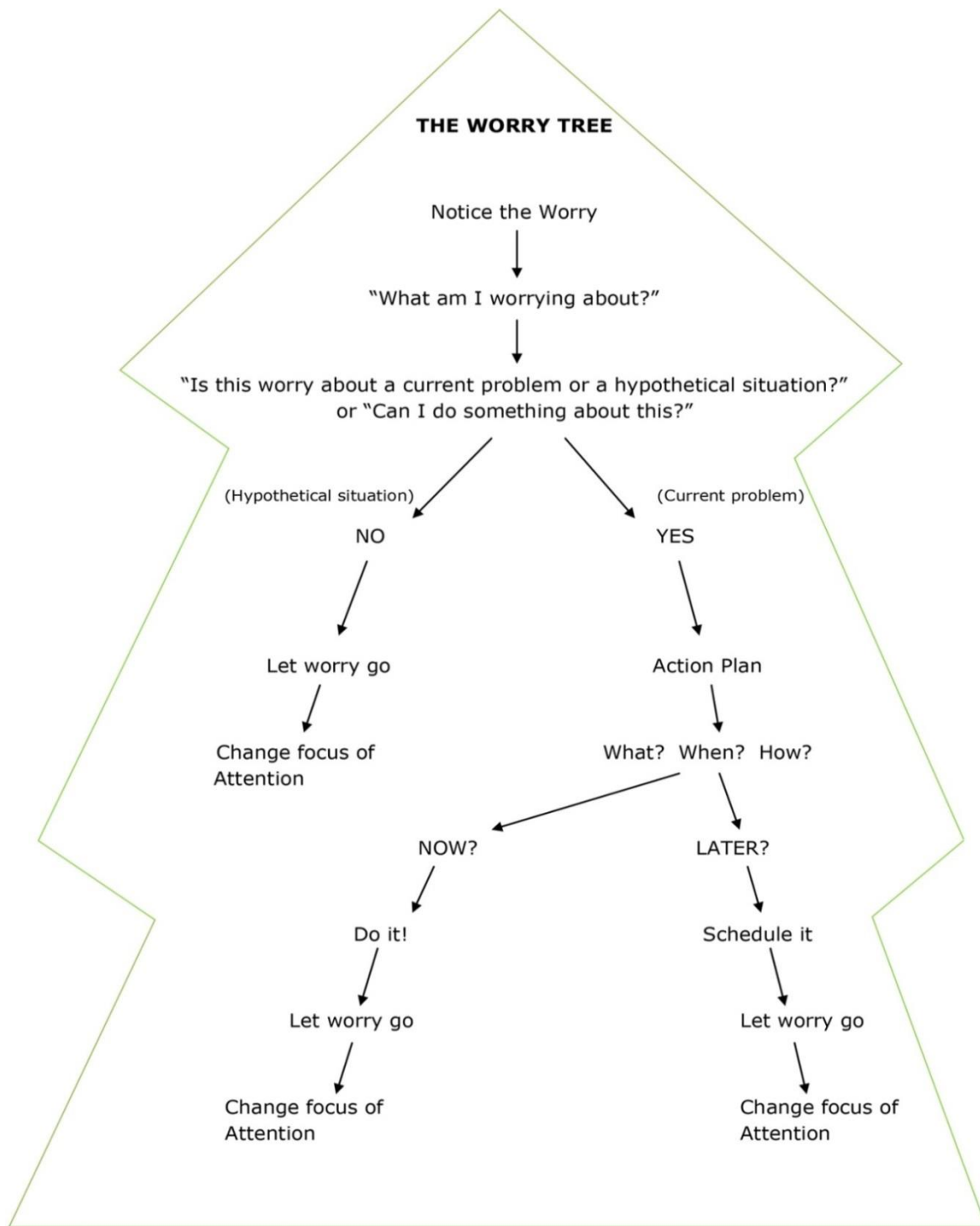
Instead of letting our minds race with all the things that we don't want to forget to do, write them down so your brain can relax and let go.

It may be helpful for individuals to try a "worry tree". This is technique which enables them to name their worry and judge whether it is a hypothetical or practical concern. Hypothetical worries are often start with "What if..." and can cause a great deal of anxiety when there is usually not much that can be done about it. Practical worries are concerns that relate to circumstances that individuals are experiencing. These are situations where something can usually be done about it. Constructing a plan of what to do, when and how can help ease anxiety around this worry.

Please see the Worry Tree diagram below. It can be helpful to send individuals a copy of this to work through until they are able to do this from memory. Start from the top of the tree, by noticing the worry, and work your way down.

**Techniques to change focus of attention can include methods such as distraction, mindfulness and relaxation.**

## The Worry Tree



[www.getselfhelp.co.uk](http://www.getselfhelp.co.uk)

*Adapted from Butler & Hope 2007*

[www.get.gg](http://www.get.gg)

## Formulation

There is also a formulation guide within section 5 to help explore what factors might be contributing to someone's sleep difficulties. This guide aims to help you and the client consider what the most appropriate intervention(s) may be.

## **Tense and relax**

Muscle relaxation can be very effective in soothing our minds and relaxing our bodies before sleep. It can help move our attention from our thoughts to our bodies which can provide some relief from rumination.

You could encourage individuals to try this relaxation exercise in bed. It may be helpful to send them a copy of the instructions.

## **Progressive Muscle Relaxation**

It may be helpful to record yourself reading these instructions out loud.

Lie down, get comfortable, close your eyes. Concentrate on your breathing for a few minutes, breathing slowly and calmly: in two-three and out two-three. Say the words “calm” or “relax” to yourself as you breathe out. The relaxation exercise takes you through different muscle groups, teaching you firstly to tense, then relax.

Starting with your hands, clench one fist tightly. Think about the tension this produces in the muscles of your hand and forearm. Now do the same with the other hand.

Study the tension for a few seconds and then relax your hand. Notice the difference between the tension and the relaxation. You might feel a slight tingling, this is the relaxation beginning to develop. Now do the same with the other hand.

Each time you relax a group of muscles think how they feel when they're relaxed. Don't try too hard to relax, just let go of the tension. Allow your muscles to relax as much as you can. Think about the difference in the way they feel when they're relaxed and when they're tense. Now do the same for the other muscles of your body. Each time tense them for a few seconds and then relax. Study the way they feel and then let go of the tension in them.

It is useful to stick to the same order as you work through the muscle groups:

**Hands** – clench fist, then relax.

**Arms** – bend your elbows and tense your arms. Feel the tension, especially in your upper arms. Remember, do this for a few seconds and then relax.

**Neck**- press your head back and roll it from side to side slowly. Feel how the tension moves. Then bring your head forward into a comfortable position.

**Face**- there are several muscles here, but it is enough to think about your forehead and jaw. First lower your eyebrows in a frown. Relax your forehead. You can also raise your eyebrows, and then relax. Now, clench your jaw, notice the difference when you relax.

**Chest**- take a deep breath, hold it for a few seconds, notice the tension, then relax. Let your breathing return to normal.

**Stomach**- tense your stomach muscles as tight as you can and relax.

**Buttocks**- squeeze your buttocks together, and relax.

**Legs** – straighten your legs and bend your feet towards your face. Finish by wiggling your toes.

Remember relaxation is a skill like any other and takes time to learn.

## **Tips if individuals wake up in the night and struggle to get back to sleep**

If they wake during the night, it is important to not turn the light on (light = daytime as far as the brain is concerned).

Individuals should not get up and do active things. They should try to remain as inactive and unstimulated as possible.

If they are worrying about things, encourage them to try to write their concerns down on a piece of paper. The act of writing them down can help soothe our minds as we have “transferred” our concerns to paper.

If an individual wakes due to a nightmare, encourage them to try to use the relaxation exercise mentioned above and remind themselves that it was a dream. Writing about the nightmare and changing the ending so that it is no longer threatening can also help. Sometimes, people may find it helpful to talk about their nightmare. If they live alone, or feel unable to talk about it with a loved one, the helplines for Mental Health Matters and the Samaritans may be useful. These can be found in section 5 of this document.

They should try to not to look at their clock and count how many hours they have left before they need to wake up. We all have probably done this! This can be unproductive as it can lead us to feeling anxious, frustrated or even angry which can further prevent us from falling back to sleep.

### **Don't lie in bed awake**

If individuals can't fall asleep for more than 20 minutes, encourage them to get up, keeping the lights low, and do something relaxing, but avoid screens. Screen lights can signal to our brains that it is time to wake up.

Above all, if individuals do wake in the night and find themselves getting frustrated, try to remind them of the importance of self-compassion. This happens to everyone sometimes!

### **A note about the Coronavirus:**

Recently, we have all found ourselves in unprecedented times. With the “lockdown” and current restrictions imposed on us, we are in a period of uncertainty which can, understandably, increase feelings of anxiety. This can impact various areas of our wellbeing, including sleep.

We have been asked to stay indoors so we haven't been able to get as much exercise and exposure to light, which are two very important factors in sleep. While it is important that we follow the guidelines that have been outlined by the government, we can try to reduce the impact of coronavirus on our sleep using the techniques listed above and in the following ways:

- Restrict time spent watching or listening to the news.

- Utilise the time we are allowed outside and going for a walk if individuals can. If this feels overwhelming for individuals, then sitting in the garden or on a bench somewhere could also be helpful
- Try to keep in contact with family or friends via the telephone or other virtual means

For more information on Coronavirus and anxiety, please see the booklet: [Managing anxiety around the Covid-19 Pandemic](#)

# ***Section five***

## ***Numbers and resources***

### **Sleep Matters Insomnia Helpline**

Tel: 02089949874 (Monday- Friday, 6pm-8pm)

Webpage: [www.medicaladvisoryservice.org.uk](http://www.medicaladvisoryservice.org.uk)

### **The Sleep Council**

Free phone leaflet line (non-medical) 08000187923

Webpage: [www.sleepcouncil.org.uk](http://www.sleepcouncil.org.uk)

### **NHS webpage: Every Mind Matters- Dealing With Sleep Disorders**

Webpage: [https://www.nhs.uk/oneyou/every-mind-matters/sleep/?WT.tsrc=Search&WT.mc\\_id=Sleep&qclid=EAlaIQobChMI6rmu4pfZ6QIVie3tCh1\\_uQxwEAAYASAAEgK0O\\_D\\_BwE](https://www.nhs.uk/oneyou/every-mind-matters/sleep/?WT.tsrc=Search&WT.mc_id=Sleep&qclid=EAlaIQobChMI6rmu4pfZ6QIVie3tCh1_uQxwEAAYASAAEgK0O_D_BwE)

### **Mental Health Matters**

Helpline available 5pm-9am on weekdays; 24 hours over weekends and bank holidays. **0300 323 0101**

This phone number could be helpful for individuals who struggle with their thoughts at night and need someone to talk to.

### **Samaritans**

Helpline available 24/7. **01752 116 123**

This number could be helpful if individuals want someone to talk to, especially at night

## How did “the problem” develop?

*What made me vulnerable to developing disturbed sleep?*

*(e.g. does my mental health impact on sleep?)*

*Triggers for the most recent episode*

*The identified sleep “problem”*

*(Difficulties in getting to sleep and/or difficulties in maintaining sleep)*

*Factors that keep this “problem” going*

*What helps? What have I tried to limit this “problem”*

