

Map your own sleeping habits

Problem analysis:



When did your sleeping problems begin? (e.g. 6 months ago)

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.....

What was it related to? (e.g. too heavy workload)

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How has the sleeping problems developed over time? (e.g. in the beginning a couple of nights a week, now several nights every week, I never feel rested)

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.....

When thinking about your sleep, what feelings/thoughts do you have? (e.g. afraid that it will never get better, angry because I cannot fall asleep, I will not be able to study any more if I can't feel rested).....

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Have you had better and worse periods? (e.g. better those occasions when sleep overnight at a friend's home, worse when I sleep alone in my apartment and really bad at exam periods).....

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Functional analysis:

What do you think maintain sleeping problems? (e.g. snoring partners, unable to take control of my situation, concern for my parents)

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Unhelpful habits? (e.g. study in bed, falling asleep on the sofa, imbalance activities/rest)

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Think about your vicious circles (e.g. worry about exam - no time to sleep –can't go to bed until all study is done- sleeping anxiously-wake up very tired-I will never be able to graduate., etc.).....

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Do you have any security and avoidance behaviors? (e.g. falling asleep with the radio on, visit the toilet 3 times before can fall asleep)

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Sleeping diary – for a deeper analysis of your sleeping habits

The sleeping diary can help you gain further insight into the factors behind your sleeping problems. This might give you further understanding of what may be the cause behind your sleeping problems - and this may give you a few ideas of what you can work on to tackle your problems.

You may have said to yourself "*I have tried everything and nothing has helped me*", but this statement might not be entirely true. This diary might help you create a more accurate map of how your sleeping problems really are. It can also give you some new knowledge about whether there are special events in your life that affect your sleep - things that you might be able to change or adjust to be able to sleep better.

Print out this diary and use it for a couple of weeks, then go back and check your notes to see if there is any visible pattern in your sleeping problems.

Fill out the diary within an hour of getting out of bed. Useful tips and advice can be found under the tabs Tools and Frequently asked questions.

Week: _____

Day 1 Day 2 Day 3 Day 4 Day 5 Day 6 Day 7

How was your sleep during the past night?

1. When did you wake up this morning?
2. When did you get up this morning?
3. When did you go to bed last night?
4. When did you turn of the lights?
5. How long did it take you to fall asleep?
6. How many times did you wake up during the night?
7. For how long were you awake during the night?
8. For how long did you sleep all in all?
9. Did you take any sleeping pills?
10. How well rested do you feel today? *
11. How would you describe you quality of sleep? **

What did you do during the day yesterday?

12. Did you take a nap yesterday? If yes, for how long did you sleep combined in minutes yesterday?

13. Had anything special happened during yesterday that you thought about when you were trying to fall asleep?

14. Did you do something out of the ordinary during the evening, that you usually do not do?

15. Something else that you could remember that was different during the evening yeasterday?

16. How much alcohol did you dring last night?

17. How many cups of coffee/tea did you drink last night?

* Answer question 10 by using a number between 0 and 5, 0 = *not at all well rested* and 5 = *very well rested*.

** Answer question 10 by using a number between 0 and 5, 0 = *not at all good quality* and 5 = *very good quality*.

Below is a list of important decisions that you should take in order to improve your sleeping habits. Print the list and write down the decisions that you made as you went through the tips and tools under the tab Tools.

- I will use the following routine when going to bed:

- Decisions I have made regarding the 15 minute rule (se fact box):

- Decisions I have made regarding what to do when I feel sleepy:

- Decisions I have made regarding "naps":

- Decisions I have made regarding when to get up in the morning:

- Other decisions I have made that have affect on my sleep:

Action plan for the future:

What sleeping schedule has worked well for me: go to bed at _____ get up at _____

What evening routines have I benefited from? _____

What relaxing methods have worked best for me? _____

What can I do to help myself when I wake up in the middle of the night? _____

Things I have done in the daytime that helped me get a better sleep? _____

