

Sleep Well

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On March 11, most of the US will reset their clocks for Daylight Savings Time. Changing the clock often means changing your sleep, too. For this reason, **March 11-17** is promoted by the National Sleep Foundation as **Sleep Awareness Week**.



You can find lots of information about sleep at the National Sleep Foundation websites www.sleep.org and www.sleepfoundation.org

Sleep Awareness Week is meant to raise awareness about the importance of sleep for health and safety. Too little sleep or poor quality sleep can impact physical, social, and emotional wellness. We will explore this in this month's WoW, along with wellness ideas for restful sleep.

Sleep

Sleep Patterns and Routines

Most adults need 7 to 9 hours of sleep each night. Infants need the most sleep (14-17 hours), with sleep requirements decreasing over time. Habits that can help you get a good night's sleep include a regular meal schedule, pleasant social interactions, having a relaxing evening routine, and—going to sleep and waking up at the same time.

As the seasons change, many of our habits and routines also change, including sleep. As the days lengthen in the spring and early summer, many people find they have more energy later in the day and may be able to get by on less sleep. This can be a natural result of changes in natural light and daily activity. It may not be a problem if you continue to feel rested and alert all day.

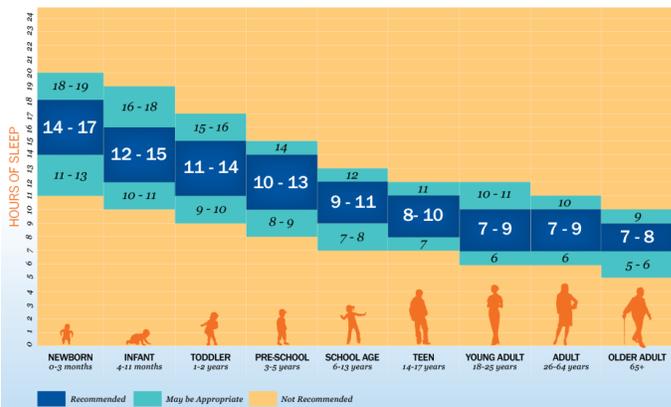
People who travel across time zones or work rotating shifts find their sleep patterns and routines are disrupted. The clocks shifting into and out of Daylight Savings Time has a similar effect. Disrupted sleep also occurs during

times of stress and changes in life situation, such as starting a job, changing where you live, adding a roommate, or having a baby. Sleep issues spill over into other areas of our lives such as physical wellness (it's easier to work out and exercise if we are not tired), emotional wellness (it's often easier to deal with difficult emotions if we are well rested), and occupational wellness (it's easier to focus at work school or to fulfill other roles if we have slept well). When you sleep, your brain and body are not "off"—they actually continue to be busy. While you sleep, your body heals, your day's experiences and learning are filed away in your memory, and your brain's "clean up" system goes to work to remove harmful proteins that accumulate during the day.¹

Each person cycles through different stages² of sleep during the night, and each sleep stage has a different brain wave pattern and, probably, a different function. Stage 1 and 2 involve lighter sleep, where your body and brain slow down. Stage 3 (sometimes divided into Stages 3 and 4) is called restorative sleep, when your body heals. Rapid Eye Movement, or REM sleep, is the stage when people dream and, experts believe, when your brain stores memories and consolidates learning.



SLEEP DURATION RECOMMENDATIONS



SLEEPFOUNDATION.ORG | SLEEP.ORG

Hirshkowitz M. The National Sleep Foundation's sleep time duration recommendations: methodology and results summary. Sleep Health (2015). <http://dx.doi.org/10.1016/j.sleh.2014.12.010>

Sleep Challenges

Many people we know report that they lay awake for long periods of time, and have difficulty staying asleep. Many also report that they stay up most of the night and, when they wake up, they feel like they haven't slept at all.

These problems can cause daytime sleepiness and lead to difficulties in relationships and trouble focusing in school or at work. Daytime sleepiness increases risks for accidents while driving and during other activities.

Not enough good quality sleep also contributes to obesity,³ pain disorders, headaches, mood disorders,⁴ addiction relapse,⁵ and difficulty managing PTSD.⁶

Mental health conditions also can *cause* sleep disturbances, which may result in a downward spiral of worsening symptoms and greater sleep problems.

Sleep Apnea

Sleep apnea means you stop breathing periodically during the night. Obesity is a major risk factor. Untreated sleep apnea can have serious consequences, including daytime sleepiness, worsening psychiatric symptoms, diabetes, high blood pressure, heart disease, and stroke. If you think you're sleeping enough but still feel exhausted and have trouble staying awake during the day, ask your doctor if you may have sleep apnea.



To learn more, visit <https://www.sleepapnea.org>

Insomnia

Insomnia is more than just a sleepless night; it is frequently having trouble falling asleep, having trouble staying asleep, or, sometimes, trouble both falling asleep and staying asleep. Signs of insomnia include lying awake for long periods of time, having difficulty staying asleep, staying up most of the night, waking up and feeling like you haven't slept at all, and waking up too early. Stress, such as adapting to the loss of a loved one or starting a new job can cause insomnia.⁷ Some medications and herbal products can contribute to insomnia, along with use of or withdrawal from some psychoactive substances. The caffeine in soda or coffee may make it difficult to sleep. Adjusting when you consume these beverages can help you sleep better.

Sleep and Substance Use

Most people know that caffeine can interfere with sleep by making it harder to fall asleep and/or stay asleep. While some people find alcoholic drinks relaxing, this is not a good choice for sleep issues, since alcohol affects sleep patterns and interferes with the REM sleep⁸ you need for memory storage. Marijuana also decreases REM sleep and can cause extended sleep disruption⁸ for up to a week after use. Cigarette smoking⁹ can decrease restorative sleep and increase your risk for sleep apnea.

Sleep Tips

Getting a good night's sleep does wonders for the body and the mind! Without it, you will find it difficult to keep up with your daily obligations, or even to stand up straight. The body needs adequate sleep to function at its best. "Sleep hygiene" is what you do to ensure a good night's sleep—not medical treatments, but how you prepare for sleep, your sleep environment, and activities during the day that promote good sleep. Be proactive in managing your sleep and give yourself the sleep that you deserve.

Factors that affect sleep

Factors that affect sleep vary from person to person. Some people find keeping a sleep diary useful. See the last page of this issue for more information about what goes in a sleep diary and where to find one.

Consider these factors

- ✓ *How much sleep is best for you?*
- ✓ *What are the signs that you are (or are not) well rested?*
- ✓ *What activities usually help you get to sleep?*
- ✓ *What environmental factors help you get to sleep?*
- ✓ *Does napping during the day improve or worsen your sleep?*
- ✓ *What foods affect your sleep?*

Preparing for sleep

People may find that some sleep-promoting activities work better for them than others. The activities that work for you are the ones to continue. A relaxing bedtime routine can help you get to sleep more easily. You may find that listening to soothing music before bed or an evening meditation may help in your routine, or there may be other activities that you do to relax.

Many people use sounds to fall asleep. Sound generators that create soothing sounds of waterfalls or breezes can make it easier to relax and fall asleep and are now available on many smart phone apps. Soothing music can do the trick as well. Even so, quiet sleep environments are ideal for most people, so using a timer on any “get to sleep” sounds may be a good idea.

Daily habits and activities

Exercising is good for us in many ways and can promote good sleep. Many people find that they need to avoid exercise at least 5 to 6 hours before bedtime, as exercise helps you be alert and energetic. Similarly, caffeine can boost energy levels, and may interfere with sleep, especially late in the day. Watch your intake of coffee, energy drinks, tea, soda, chocolate, and some over-the-counter medications.



To learn how much caffeine is in your favorite drink or snack, see <https://cspinet.org/eating-healthy/ingredients-of-concern/caffeine-chart>

Sometimes it isn't as simple as cutting out caffeine to improve our sleep habits. Other methods that might help deal with insomnia include reserving our bed for sleeping and structuring our sleep schedule by going to bed and waking up at the same or similar times every day (even on weekends).

Rest

Rest refers to taking a break from the day's physical and mental activity, through quiet and effortless actions.¹⁰

By slowing down, shifting your focus, and interrupting a busy or stressful day, rest and relaxation can provide a few calm moments that restore your energy, interest, and motivation.



Your sleep environment

Creating a sleep-friendly environment¹¹ is a great way to get a restful sleep and improve the quality of your sleep.

Light is one of the most commanding regulators of the biological clock, which influences an individual's alertness and sleepiness throughout the day. Exposure to bright lights during evening hours and at nighttime stimulates the brain to stay awake, while less exposure makes it easier to fall asleep. A bedroom or sleeping area should be kept dimly lit at bedtime and dark while sleeping. Curtains, blinds, and eye masks can also block out morning light, and can prevent a person from waking up too early.

Watching the television or using electronic devices can make it difficult for your brain to wind down and fall asleep, as the light from those devices can affect your biological clock.¹² It is best to keep electronics out of the bedroom and not use them for a half-hour to an hour before bedtime. A sleep-friendly environment should not contain things that are loud or over-stimulating. It may be helpful to read a book (the old-fashioned printed kind), write in a journal, or practice breathing exercises before sleeping.

Create Your Ideal Sleep Environment

- ✓ Dim the lights
- ✓ Turn off electronics
- ✓ Lower the temperature
- ✓ Block noises

Temperature strongly affects one's ability to maintain sleep. Many scientists believe that a *slightly cool temperature* is best for sleeping. While there is no ideal temperature for sleep, the temperatures that are generally conducive for sleep are between 54 and 75 degrees. Hot sleeping environments make it more likely that a person will experience lighter sleep cycles and several awakenings during the night, which you probably already know, if you have ever tried to sleep on a hot and sticky summer night with no air conditioning! Your type of bedding, as well as what you wear for sleeping, may affect your body's temperature.

Your sleep environment, continued from page 3

Noises can be a problem. Consider wearing ear plugs or headphones if you can't eliminate the noises that get in the way of falling asleep, such as the neighbor's barking dog, traffic sounds, or a snoring partner.

When considering all the different dimensions of the sleep environment, it is important to know your own level of comfort and tolerance. Once you are conscious of your *sleep environment preferences*, it is important to build long-term wellness habits for restful sleep. This can help prevent sleep problems from happening in the first place.

What We're Reading

From time to time, we'll report on books that we find helpful for our own wellness. This month, we hear from Mark Duffy, Chief Operating Officer at CSPNJ.

Achieving Your Personal Health Goals: A Patient's Guide by James W. Mold, MD, MPH

Imagine going to a doctor's appointment and, before giving you a diagnosis or deciding on a treatment approach, the doctor began by discussing your desired outcomes, then using your wishes to direct your care. In this book, the author, Dr. James Mold emphasizes that this shift "is not only possible and desirable but necessary, even critical."

This past year has been a challenging one for me, with several health issues sending me to different healthcare providers. My experience, which may be similar to yours, is that the medical community was good at pinpointing my problems, but not as good at getting to know me, my goals, what I like to do, and my daily habits. I got very little help in working toward health and activity goals, and nobody discussed my quality of life. Dr Mold believes agreed-upon desired goals are pivotal to good medical care and patient health.

Unfortunately, although medical schools teach about disease diagnosis and treatment, they give short shrift to assessing the whole person and learn nothing at all about exploring a patient's goals. None of the providers

bothered to find out that I want to be able to enjoy my grandchildren, bike ride several times a week, and sail during the warm weather months. They didn't ask about my other goals, like being able to travel, support others, and volunteer in some purposeful activity. I never got to explain that I'm in the process of joining our local First Aid squad and need to be fit enough to be useful.

That is, until I was referred to physical therapy for my shoulder and arm pain by my orthopedic physician. Quite different from traditional medicine, physical therapy is goal directed. From the beginning, the therapist asked what I wanted out of the treatment (my personal health goals), what hobbies I enjoyed, and what the injury was keeping me from doing. This led to suggestions about ways to avoid making the pain worse and ideas of how I can adapt when my mobility is limited.

How can we get more goal-oriented care for ourselves, given that healthcare is provided within a problem-oriented system? Dr. Mold offers these suggestions:

- Carefully consider your health-oriented goals
- Think about the activities, relationships and passions that, for you, make life worth living. Consider what you can do now to preserve or enhance your ability to continue to enjoy those things for as long as possible.
- Develop a long-term relationship with a primary care physician.
- Encourage all of your health care providers to consider your personal healthcare goals whenever you seek their advice and assistance.
- Understand and embrace your capacity as a human being to continue to grow and develop throughout life physically, emotionally and spiritually. Learn to view obstacles as opportunities.
- Take good care of yourself so that you don't have to seek healthcare very often. This includes staying physically active, eating a healthy diet, getting enough sleep, avoiding tobacco products, and either avoiding alcohol or using it in moderation.

Dr. Mold also recommends that you be extremely cautious about taking medications. Understand the

What We're Reading, continued from page 4

purpose and potential hazards of each medication, and, if medications are essential, keep the total number of medications you take to the absolute minimum necessary to support your goals. Similarly, he suggests that you only agree to tests and treatments that have a reasonable chance of helping you achieve your health goals.

This book, and my recent experience, are guiding me to begin each doctor's appointment by sharing how my desired outcomes fit with my personal goals and my quality of life. If I say what's important to me, then healthcare providers will know how to best collaborate with me.

Advocacy: Sleep and Rest

Contributed by Heather Simms, CSPNJ Deputy Director of Peer Advocacy and Community Initiatives

When asked to relate the topic of advocacy to sleep, I was challenged in coming up with an approach. After some thought, I realized that a key component for a good night's sleep is having a home. Without a safe, affordable, and decent place to call home, it is difficult to get the recommended amount of sleep. Safety is the first priority—warmth and comfort are a luxury.

Advocacy for people who are homeless, like other areas that are a focus of advocacy efforts, can occur at multiple levels. We can work to make changes at the systems level to shift policy and funding priorities—this is what most people associate with the word "advocacy."

Advocacy on behalf of others involves gathering information, supporting someone in accessing services, and seeking changes in services for a person or group of people to ensure their needs are met. As described in this issue by Mark Duffy. Self-advocacy means speaking up for yourself and taking charge of your own life, including the care you receive. This is not always easy!

Systems-level advocacy for people who are homeless might involve contacting government officials and legislators to be sure they understand the problem at a human level. Emphasize just one specific issue and tell a moving real life story to get their attention.

Consider becoming active on local committees or the boards of reputable organizations to have ongoing input into systems-level decisions.



Check out "Lobbying 101" in the "Taking Action" section of website for the National Coalition for the Homeless: <http://nationalhomeless.org>

Advocating for others is working to gain something specific for an individual or a group of individuals. One example is supporting a person in getting and keeping housing. Information about your local community is important. Learn about resources in your area, such as free legal services. Some communities have a "single point of entry" or "coordinated entry" program that helps people find, access, and use resources they need. Online resources and directories can be helpful, such as the interactive map of homelessness resources on the federal Housing and Urban Development website.



Go to <https://www.hudexchange.info/> and search for "homelessness assistance" then click on your state on the map.

If you are advocating for yourself, it is also important to learn about local resources. Become informed of your rights as a citizen and, once you have a place to live, as a tenant. Rental laws and regulations can be complicated, so you may need help. Your state Attorney General may have a publication or an information line to provide you basic information.

Self-advocacy also means speaking up about your needs and preferences with your service providers.



Find the booklet "Raising Difficult Issues with Your Service Provider" at www.center4healthandsdc.org/ (it's located in the Solutions Suite section on self-directed-recovery)

**Be informed, be active,
share the knowledge,
and make your voice heard!**

How well do you sleep?

One way of answering this question is to take a careful look at how sleepy you are during the day. The *Epworth Sleepiness Scale* asks you to rate how likely are to doze off or fall asleep in different situations, such as watching TV, reading, or riding in a car as a passenger. The more likely you are to fall asleep when you are sitting still during the day, the more likely it is that you are not getting enough sleep at night.

You can find this scale and a set of “sleep-wake” questions on the *Sleep Questionnaire* available from the University of South Carolina School of Medicine, using this link: <http://internalmedicine.med.sc.edu/forms/Sleep%20questionnaire2.pdf>

Using a Sleep Diary

If you think you are not getting the right amount of good quality sleep, and you plan to get help from your primary care provider, you may want to do some homework while you wait for your appointment. You will want to be able to tell your primary care provider exactly what is going on by using a sleep diary or sleep journal. This allows you to keep track of when you went to bed and got up, how you felt the next day, and what things you do each day that might help you sleep or cause you to have sleep problems.

You can create your own sleep diary or use one of the many examples available online. One simple form is available from Medline Plus, which has educational handouts and useful tools:

<https://medlineplus.gov/magazine/issues/pdf/SleepDiary.pdf>



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Sleep well!

¹ Some of the proteins that are “cleaned up” during sleep are related to the development of Alzheimer’s Disease. For more on this, see <https://www.nih.gov/news-events/nih-research-matters/how-sleep-clears-brain>

² You can find more detail and a graph of sleep stages through the night at <http://www.merckmanuals.com/home/brain,-spinal-cord,-and-nerve-disorders/sleep-disorders/overview-of-sleep>

³ St-Onge, M.-P. (2017). Sleep-obesity relation: Underlying mechanisms and consequences for treatment. *Obesity Reviews*, 18(Suppl. 1), 34-39.

⁴ O’Keefe, K. (2016). Sleep loss linked to mood disorders. *Kai Tiaki Nursing New Zealand*, 22(8), 33.

⁵ Lydon-Staley et al. (2017). Daily sleep quality affects drug craving, partially through indirect associations with positive affect, in patients in treatment for nonmedical use of prescription drugs. *Addictive Behaviors*, 65, 275-282.

⁶ van Liempt, S. (2012). Sleep disturbances and PTSD: A perpetual cycle? *European Journal of Psychotraumatology*, 3, 19142.

⁷ *Insomnia*. National Heart, Lung, and Blood Institute. http://www.nhlbi.nih.gov/health/dci/Diseases/inso/inso_all.html.

⁸ See infographics at <https://adcaps.wsu.edu/substance-use-sleep/>

⁹ See Zhang et al. (2006). Cigarette smoking and nocturnal sleep architecture. *American Journal of Epidemiology*, 164(6), 529-537. AND Krishnan et al. (2014). Where there is smoke...there is sleep apnea. *Chest*, 146(6), 1673-1680.

¹⁰ Adapted from the AOTA Practice Framework

¹¹ National Sleep Foundation. <https://sleepfoundation.org/bedroom/>

¹² Not only do “blue light” devices make it harder to fall sleep, using them before bed also decreases REM sleep and alertness the next day, according to one study: Chang et al. (2015). Evening use of light-emitting eReaders negatively affects sleep, circadian timing, and next morning alertness. *Proceedings of the National Academy of Sciences of the USA*, 112(4), 1232-1237.



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