



Sleep Hygiene

Sleep difficulties disrupt natural sleep architecture, impairing cognitive function, emotional balance, and daytime focus. These challenges typically manifest as **sleep onset insomnia** (trouble falling asleep due to physiological arousal or racing thoughts) or **sleep maintenance insomnia** (frequent awakenings and difficulty returning to sleep). Integrating daily sleep hygiene—environmental and behavioral habits that promote consistent sleep—creates the necessary foundation for these interventions to work effectively.

Together, CBT Interventions and sleep hygiene aim to:

- Recalibrate physiological and mental arousal at bedtime.
- Reframe maladaptive thoughts and anxiety around sleep.
- Strengthen the brain's association between the bed and restful sleep.
- Restore a stable, natural circadian rhythm.

Universal Sleep Hygiene Rules

Consistency & Schedule

Maintain a fixed wake-up time 7 days a week, regardless of how well you slept. This anchors your circadian rhythm and builds natural sleep drive.

Environment Optimization

Keep the bedroom dark, quiet, and cool (around 65–68°F / 18–20°C). Reserve the bed strictly for sleep and intimacy.

Substance Timing

Limit caffeine intake after 12:00 PM. Avoid alcohol within 3–4 hours of bedtime (while alcohol induces drowsiness, it severely disrupts sleep architecture and causes mid-night awakenings).

Falling Asleep (*Onset*)

High mental/physical arousal and bed-related anxiety	Stimulus Control	Leave bed after ~20 minutes of wakefulness; return when genuinely sleepy.
Pre-bed cognitive rumination	Designated Worry Time	Offload stress to paper 2 hours prior to bed; postpone bedtime thoughts until tomorrow.
Active problem-solving thoughts	Cognitive Shuffling	Focus on random words or images to disrupt analytical loops and signal safety.
Parasympathetic dysregulation	Progressive Muscle Relaxation	Systematically tense (5s) and release (10s) muscles to physically discharge tension.
Melatonin suppression	Digital Sunset	Power down screens 60 minutes before bed to allow natural sleep hormones to surge.

Staying Asleep (*Maintenance*)

Alarm/stress hormone activation	Clock-Fading	Hide clock faces to prevent sleep math, panic, and adrenaline spikes.
Hypervigilance upon waking	Sensory Grounding	Use a modified 5-4-3-2-1 check-in to anchor attention in your environment.
Autonomic nervous system arousal	Diaphragmatic Breathing	Inhale for 4 seconds, exhale for 6 seconds to calm your central nervous system.
Catastrophic sleep thoughts	Cognitive Reframing	Swap panic for perspective: " <i>Awakening is normal; lying quietly still restores me</i> ".
Conditioning bed with wakefulness	Resetting Association	Step out of bed if wide awake for >20 minutes; restart sleep drive in low light.