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CBT FOR SLEEP ANXIETY

When you're desperate for sleep, and stuck in a cycle of anxiety about whether you'll be able to get to sleep, it can leave you feeling helpless and hopeless. It can also be tempting to reach for a sleeping pill or an over-the-counter sleep aid, both of which can form part of a CBT programme for addressing sleep disorders. However, sleep

medication can't change poor sleep hygiene or habits, or fully remove the anxiety that accompanies a chronic sleep problem.

Cognitive-behavioural therapy (CBT) can improve your sleep by changing your behaviour before bedtime (this goes beyond sleep hygiene) as well as changing the ways of thinking that keep

you from falling asleep. It can also entail teaching you relaxation skills and changing lifestyle habits that impact your sleeping patterns. The focus of this article will be on addressing sleep anxiety, which maintains the sleep problem over time. The main focus will be on insomnia, one of the most prevalent sleep disorders.

HOW DOES CBT WORK FOR SLEEP DISORDERS?

CBT addresses negative thoughts and behaviour patterns that contribute to insomnia or other sleeping problems. As suggested by its name, cognitive behavioural therapy involves two main components:

- Cognitive therapy, which teaches you to identify and modify negative thoughts and beliefs that contribute to your sleep problems.
- Behavioural therapy, which teaches you how to avoid behaviours that keep you awake at night and replace them with better sleep habits. (This includes sleep hygiene)

As mentioned, this article will focus on the cognitive part of CBT, specifically how to work with the thoughts that cause the anxiety associated with a sleep problem, and maintain it.

The first step is usually to identify the type of thoughts you have around sleep, especially those leading to anxiety. For most people these are habitual, and not always top of mind, so keeping a sleep diary for a week or two is very useful. Even for those who can pinpoint exactly when their anxiety begins, for example at dusk or after dinner, when their thoughts are turning toward bedtime, it's useful to note the exact thoughts. Often there are deeper beliefs lurking below the surface thoughts of "it's getting closer to bedtime, what if I don't sleep, I'm so worried I won't be able to get to sleep..." Think of a belief as the result of habitual thoughts, with neurons firing in the same pattern again and again until this becomes a pattern.

The beliefs are what actually drive the thoughts. A single thought of "what if... I struggle to fall asleep) can

be underpinned by beliefs such as "if I don't get eight hours I'll be non-functional, I'll lose my job and won't be able to feed my children." This strengthens the thought, leads to a catastrophising spiral, which causes more anxiety, which in turn becomes the trigger for further prediction of catastrophic outcomes. As you can imagine, a brain that is in the throes of an anxiety spiral – hours before bedtime – is going to have difficulty in calming itself enough to be able to fall asleep.

CHALLENGING ANXIETY THOUGHTS AND BELIEFS

The cognitive aspects of CBT include cognitive restructuring, which entails challenge of the negative thinking patterns that contribute to your sleep problems and replacing them with more realistic thoughts. The premise is that if you change the way you think, you can change the way you feel, and ultimately how you sleep. The three main steps are:

1. Identifying your negative thoughts

If you have a sleep disorder such as insomnia, you may be mentally maximising the obstacles preventing you from getting a good night's sleep perceiving them to be greater than they really are. For example, you may keep telling yourself that you can't fall asleep unless you take a sleeping pill. The more you tell yourself that, the more anxious you'll become if you don't take a pill and the harder you'll find it to sleep without one. Or you may be convinced that without a full eight hours of sleep every night, you'll make serious mistakes at work and be fired.

2. Challenging your negative thoughts.

In the second step, you'll learn how to evaluate the thoughts around sleep, especially those that lead to anxiety (and catastrophising). This involves fact-checking, questioning the evidence for each thought or belief, and testing out the reality of negative predictions. For example, have you ever forgotten to take the sleeping pill and still managed to sleep through? Or have you ever made a mistake at work after a night of decent sleep (even if it was some time ago) and is every single mistake a catastrophic one?

3. Replacing negative thoughts with realistic thoughts.

Once you've identified the negative distortions in your thoughts, you can replace them with new thoughts that are more accurate and positive. These would address thoughts that lead to anxiety before sleep (when anticipating that you won't sleep), as well as the negative predictions about what the consequence of poor sleep will be.

Types of negative thoughts that fuel insomnia and other sleep problems, and the realistic counter-thought:

Unrealistic expectations

- Negative thought: I should be able to sleep well every night like a normal person.
- Sleep-promoting realistic thought: Lots of people struggle with sleep from time to time. I will be able to sleep with practice.

Exaggeration

- Negative thought: It's the same every single night,

another night of sleepless misery.

- Sleep-promoting realistic thought: Not every night is the same. Some nights I do sleep better than others.

Catastrophising

- Negative thought: If I don't get some sleep, I'll mess up at work and risk losing my job.
- Sleep-promoting realistic thought: I can get through work even if I'm tired. I can still rest and relax tonight, even if I can't sleep.

Hopelessness

- Negative thought: I'm never going to be able to sleep well. It's completely out of my control.
- Sleep-promoting realistic thought: Sleep problems

can be cured (CBT has been proven to do this). I can choose what to focus on; stop worrying and focus on the positive solutions available.

Fortune telling

- Negative thought: It's going to take me at least an hour to get to sleep tonight. I just know it.
- Sleep-promoting realistic thought: I don't know what will happen tonight. Maybe I'll get to sleep quickly if I use the new strategies I've learned.

Since negative thoughts are often part of a lifelong pattern of thinking, replacing negative thoughts with more realistic ones is rarely easy. But with practice, you can break the

habit. That's why it's important to practice the techniques you learn in therapy on your own at home, for at least three weeks every day and night.

CBT is all about understanding the mechanisms that cause and maintain anxiety around sleep, and then learning how to challenge and modify them. Always remember, whatever has been learnt can be unlearned, and relearned!

References available upon request

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