

The Sleep Programme



PROMOTING POSITIVE SLEEP HABITS WITH YOUNG PEOPLE



Authors

Ruth Comerford, Acting Sports Promotion Officer, Bray Sports Promotion Unit. I started working with Youth groups 12 years ago starting with Tallaght Partnership. The role involved linking with after school programmes to emphasise the importance of PA (Physical Activity) and also trying to promote a healthy lifestyle. I then moved onto Dublin VEC to work as a Sports Attendant linking in with different community programmes and schools. I have since then moved onto the KWETB Sports Promotion Unit and I am going into my 6th year here. I was part of the PA (physical activity) side of the sleep programme. I designed a very easy fitness programme to follow at home or out with friends with very basic but effective methods of getting the correct amount of daily exercise. I also ran a pilot programme with different students in Arklow as part of the preparation for the sleep programme final draft.

Fiona Creedon, Youth Outreach Drug Education, Crosscare/East Wicklow Youth Service. I am a youth worker with Crosscare/East Wicklow Youth Service funded by the East Coast Regional Drugs and Alcohol Task force to carry out drug education and prevention programmes for young people in the East Wicklow Area. My role on this project was to coordinate the development of the sleep programme from beginning to end. This involved the writing and, with the interagency group, the development of activities throughout the manual; co-facilitating pilot programmes and taking feedback from young people and finally, managing all related administration. Having been a youth worker for 12 years and a drug education worker for 7 of those, I felt it was important to involve young people at a core level, so that this resource would be youth-friendly, interactive and practical.

Dr Patrick Loughran, Senior Child and Adolescent Clinical Psychologist, Wicklow HSE Primary Care. I have been working in Wicklow Primary Care since 2007 with children and young people. I have had a longstanding interest in the effect poor sleep can have on our emotional wellbeing going back to my training and years working in the NHS in North Wales. Clinically I work with a range of emotional and behavioural difficulties that often have poor sleep as a causal factor. Sleep management can often be the first area I address in an individual before other difficulties can be resolved. I have been fortunate to be able to develop a specialist interest in sleep management, and have thoroughly enjoyed working on this project.

Laura Murphy, Family Worker with Arklow Springboard, Daughters of Charity Child and Family Service. I have been working in Arklow Springboard Family Support Services since 2009. My professional qualification is a BA Honors in Social Care. In 2016 I successfully obtained a MA in Child Youth and Family Studies. I am employed as a family worker in Arklow Springboard Daughters of Charity Child and Family Services. My work consists of implementing various programmes with children and parents that are Therapeutic and evidence based. I am part of the interagency group that developed this Sleep Programme. In my role I co-facilitated the Sleep Pilot Programme and have been involved in writing and developing the activities for the sleep manual.

Joanne O'Halloran, School Completion Programme. In 1995 I began my career as a teacher of Art and Design in north London. From there I moved to Ireland in 2003 to raise my family and started working with the School Completion Programme (SCP) and teaching Art to adults on a part time

basis with Wicklow Fetac. In 2010 I was employed as the Coordinator of the Arklow Dunlavin Rathdrum SCP and have had the good fortune to work with a variety of agencies; this inter-agency project being one of the most exciting to date. From the conception of the Sleep Programme I have facilitated it at each stage of its development; the initial pilot programme, a TY group, 1st years during SPHE and finally with a group from Arklow's Youth Reach. Listening to the young people's feedback at each developmental stage of the programme to reflect and make the necessary changes was an integral part of what is now the final draft of the Sleep Programme.

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- The Way Project Pilot Group – Josh Hubbard, Adam Synnott and Aaron Hill and their youth leader, Siobhan Quinn.
- The TY3 group from Avondale Community College Pilot group, Rathdrum.
- Bray Youth Service in Newtownmountkennedy – Katelyn Dunleavy, Cora Heffernan, Danisha Healy, Amy Shannon Hogg and their youth leaders, Martina Keating and Linda White.

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Background

The initial idea for The Sleep Programme was sparked by one young person in particular; he would arrive to school or the youth centre looking pale, hardly able to speak and generally in bad form. When concerned teachers and youth workers broached the matter with him, he revealed that he had not been sleeping. Instead, he had developed a regular habit of watching documentaries throughout the night, usually until about 6am. At weekends his sleep was better, but mostly alcohol induced.

Just fifteen years of age, he was an obvious leader among his peers who, when in good form, was resourceful, convivial and endearingly funny. Also, he was notably bright with great potential; however, he dropped out of school before completing his Leaving Certificate.

All circumstances considered, it was apparent that his under-achievement educationally was a consequence of a lack of regular sleep. The concern for this young person instigated conversations between the Youth Service and the School Completion Programme (SCP) staff, throughout these discussions it transpired that many other youths from the area were similarly affected by sleep deprivation and often those young people were reliant on cannabis use as a sleep aid.

In order to assess the situation formally, in 2014 Crosscare's East Wicklow Youth Service and the School Completion Programme drew up a questionnaire which asked young people in all the local schools about their sleep habits and patterns. In total, 208 young people were surveyed and of those, 80 responded that they found it difficult to get enough sleep. Of those 80 young people, 77.5% went to sleep after 10.30pm and up to 3am, 76% reported having electronic equipment in their bedroom and 91% said they had incessant thoughts which prevented them from going to sleep at a reasonable hour.

The results of this survey provided an impetus for the development of a programme to raise awareness of the importance of sleep among young people and their parents. Links were made with other agencies in the area including - Arklow Springboard Family Support Service (Daughters of Charity); Inbhear Mor Sports Promotion Unit/Bray Sports Promotion

Unit and the HSE. With the expertise on board an eight week programme was assembled. Fifteen questionnaire respondents agreed to take part in this first pilot programme. This programme included some of the information in this resource however many changes were made to the format, structure and methodologies based on the feedback from evaluations.

The next step in the development of the programme was a successful application to the National Youth Council of Ireland for a Connected Communities Grant. The programme was developed further and a number of Sleep Programmes were run in the area. These groups included a group of 13-15 year olds who met after school in the Vault Youth Centre, a fifth and sixth year group in Arklow Community College, a group of 12 year olds with Wicklow Way Project, a Transition Year Group in Avondale Community College, Rathdrum, a group of 14 year old girls with Bray Youth Service and a group of 15-18 year olds in Arklow Youthreach. Every young person involved in these Programmes has made contributions to the development of the final version published in this manual.

The Sleep Programme was initiated as an attempt to address the issue of young people presenting at school and at the youth service with low levels of school participation, with difficulty maintaining healthy relationships at home and with peers, and with low mood and self-esteem, all caused by sleep deprivation.



Evaluation of the Effectiveness of 'The Sleep Programme'

Summary of Research Report Completed in Partial Fulfilment of Requirements for Ph.D. in Clinical Psychology. University of Limerick.

Aisling Mc Grath.

Research Aim

As part of the development of the Sleep Programme, research was carried out by a doctoral student in Clinical Psychology from the University of Limerick, evaluating one of the pilot groups of the programme. The purpose of the research was to evaluate the effectiveness of the programme in improving adolescents' knowledge of sleep hygiene and sleep habits. The study also aimed to explore the adolescents' experience of attending the group, by reflecting on what they learnt and establishing any improvements they may have made to their sleep habits.



Method

The programme was run over five weeks with a group of 12 young people (7 females, 5 males), aged between 15 and 18 years, in Arklow Youthreach; it was facilitated by two of the co-authors of the programme. Each group session consisted of an educational component about a specific topic; the session consisted of feedback on weekly challenges given to participants, and some relaxation techniques and practical exercises.

To evaluate the effectiveness of the Sleep Programme, both quantitative and qualitative research was conducted. Quantitative data was collected by administering the Adolescent Sleep Hygiene Scale (ASHS) and the Sleep Programme questionnaire to participants in the first group session and in the final group session. Ten students attended the full five sessions and completed pre and post-group measures which were included in the quantitative analysis. Qualitative interviews were then conducted with five of the students (4

females, 1 male) who had attended the programme. Participants were asked about their experience of attending the group, what they enjoyed about the programme and whether they noticed any changes in their sleep habits afterwards.

Results

Quantitative

Examination of the pre and post-group scores on the eight domains of the Adolescent Sleep Hygiene Scale revealed that adolescents' scores improved in four areas: physiological, sleep environment, daytime sleep and reliance on substances which affect energy levels. Two of the domains, behavioural/arousal and bedtime routine, showed no change in scores while cognitive/emotional and sleep stability actually showed a slight decrease from the beginning to the end of the programme. None of these differences were, however, found to be statistically significant. Overall, the adolescents' total sleep hygiene score showed a slight decrease after having attended the group, although this was also not found to be significant.

Scores on the Sleep Programme questionnaire were then examined to look at the difference in participants' ratings of their sleep knowledge, sleep habits and quality of sleep before and after attending the Sleep Programme. Participants showed a significantly higher rating of their sleep knowledge following the Sleep Programme. Participants' ratings of their sleep habits and sleep quality also showed an increase from the beginning to the end of the programme; however, neither of these differences was found to be statistically significant.

The Sleep Programme questionnaire also asked participants whether they felt that they needed to make changes to their sleep habits and if they needed to get more sleep. Before attending the Sleep Programme, only one out of the ten participants reported needing to make changes to their sleep habits. Three participants reported feeling that they needed to get more sleep before

they had attended the group. Following completion of the Sleep Programme, the participants were asked the same questions on the Sleep Programme questionnaire. In the second instance, four participants reported needing to make changes to their sleep habits with four also reporting they felt that they needed more sleep. Participants who attended the group were also asked if they had made any changes as a result of the programme; six confirmed they had.

Qualitative

The results from analysis of the interview transcripts revealed four overarching themes related to the experience of attending the Sleep Programme. Participants discussed the *experience of a group* and engaging in group work. There were positive aspects to engaging with a group including the support from their peers, having fun and getting other people's perspectives and ideas. The adolescents spoke about *attending the programme*, detailing their initial interest and the overall benefits of having attended. *Sleep routine* was frequently discussed, focusing on sleep habits and sleep disturbances with some making changes to their routine and others finding it difficult to overcome obstacles. Significantly, all the participants discussed their use of technology before bed and the impact this has on their sleep quality and duration.

Discussion

Overall, the findings of the present study are quite consistent with previous literature. In their review of 12 sleep education studies, Blunden et al (2016) found that sleep education programmes were effective in improving sleep knowledge, but were less effective in improving outcomes such as sleep duration and sleep hygiene. Similarly, in the Arklow Youthreach Sleep Programme, participants reported significantly greater levels of sleep knowledge having attended the programme but did not report statistically significant improvements in their sleep hygiene and sleep habits.

Although the sleep hygiene scores did not show a significant increase in this study, there were small improvements on many of the ASHS domain scores and on the sleep habits and sleep quality sections of the Sleep Programme questionnaire. Interestingly, when looking at the categorical yes/no questions of the questionnaire, more participants reported needing to get more sleep and needing to improve their sleep habits after having attended the Sleep Programme. This suggests that the programme is effective as an educational tool, its aims being to enhance participants' understanding of sleep architecture and sleep hygiene, and to prevent sleep disturbances worsening over time.

Note: *Dependent on funding, further research will be carried out when a larger data base is accumulated.*

Rationale

Given the link between good sleep hygiene and positive mental health, the goal of this programme is to inform young people about this relationship and to provide tools to either get their sleep back on track or to prevent sleep routines deteriorating in the first place.

Logic Model

This logic model was used as a tool for the planning, implementation and evaluation of The Sleep Programme resource during the process of its development.

INPUTS	OUTPUTS		OUTCOMES		
	Activities	Participation	Short Term	Medium Term	Long Term
Staff. Time. Money. The Initial Draft Sleep Resource. Materials – Facilities (schools, youth centres). Equipment – fit bit, white light, laptop, and projector. Refreshments. Inter-agency Committee & Partners.	1 Workshop & leaflets for parents. Deliver 6 complete sessions with 4 groups (approx. 60 young people) in a variety of settings. Each group engaged in a feedback session. Evaluations with young people who took part in the programme. Interagency steering committee meetings each month throughout the year.	Youth participants. Parents. Other agencies when relevant.	Participants describe their own sleep habits and patterns, emotions and well-being. Participants have identified the effects of poor sleep on their behaviour. Participants have learned skills to improve the quality of their sleep. Participants have a greater understanding of the benefits of sleep. Participants are motivated to make positive changes to improve their sleep habits.	Participants apply modifications to their bedtime routine, so as to improve their sleep quality. Participants are equipped with tools to prevent negative sleep habits. Parents and community have increased awareness of the importance of sleep for young people.	Participants have demonstrated improved attendance, participation and retention at school. Participants have achieved their full potential in all areas of learning and development. Both young people and communities have greater awareness of the benefits of sleep. Wider youth sector has the evidence informed resource to increase young people’s awareness of the importance of sleep.

Links to National Reports

In the last five years the Department of Children and Youth Affairs and the Department of Health produced a number of research-based reports relevant to the lives of young people and those who work with them. It is within the framework of these documents that the Sleep Programme was developed. A summary of how the reports are relevant to The Sleep Programme is as follows;

Healthy Ireland; a Framework for Improved Health and Wellbeing 2013-2025

The vision for this framework is as follows:

'A Healthy Ireland, [is] where everyone can enjoy physical and mental health and wellbeing to their full potential, where wellbeing is valued and supported at every level of society and is everyone's responsibility.' (Department of Health, 2013:8)

It follows that sleep is an intrinsic element of health and wellbeing. As a resource, The Sleep Programme addresses sleep-related issues in a way that is accessible to all young people, encouraging them and their extended families to value the benefits of sleep in their lives.

The National Youth Strategy 2015 – 2020

The aim of the National Youth Strategy is 'to enable all young people to realise their maximum potential by respecting their rights and hearing their voices, while protecting and supporting them as they transition from childhood to adulthood.' (Department of Children and Youth Affairs, 2015:2)

The Sleep Programme directly supports the aim of the National Youth Strategy. Evidence indicates that sleep is of particular importance in the transition from childhood to adulthood; it is a time of radical physical and emotional change which needs to be safeguarded by sufficient sleep. If sleep deprivation is an issue for young people, then realising their maximum potential becomes secondary.

Better Outcomes Brighter Futures. The National Policy Framework for Children & Young People 2014 – 2020

This national report identifies five outcomes necessary to fulfil the vision for children and young people. These are:

- Active and healthy, physical and mental wellbeing
- Achieving full potential in all areas of learning and development
- Safe and protected from harm
- Economic security and opportunity
- Connected, respected and contributing to their world.

Under outcome 1, The Sleep Programme is aligned with the following aims:

- 1.1 physically healthy and make positive health choices, and
- 1.2 good mental health

Under outcome 2, The Sleep Programme is contributes to the following aims:

- 2.2 social and emotional wellbeing
- 2.3 engaged in learning

'A key part of achieving this (outcome 1) is to recognise the role of children and young people themselves as active agents in shaping and protecting their own health and wellbeing and that they should be supported and encouraged to take action to improve their own health.' (Department of Children and Youth Affairs, 2014:51)

Similarly, The Sleep Programme has been written in a way that gives young people ownership of their learning and facilitating them to make positive changes to their health.

Value for Money and Policy Review of Youth Programmes

Based on the review of evidence this report identified 7 'proximal' outcomes which should yield improvements across the range of needs' domains covered by the youth programmes.

These seven potent mechanisms for delivering improvements for targeted youth programmes are:

1. Communication skills
2. Confidence and agency
3. Planning and problem solving
4. Relationships
5. Creativity and imagination
6. Resilience and determination
7. Emotional intelligence

By giving the young people tools to make positive changes to their lives, The Sleep Programme contributes towards many of these mechanisms, most especially 'confidence and agency' and 'planning and problem solving'.

#Little Things Campaign

The HSE website www.yourmentalhealth.ie launched the #*littletings* campaign in 2016. This is comprised of a series of posters, one of which is directly related to The Sleep Programme. Posters and postcards are available for download on www.healthpromotion.ie

Facilitators' Notes

The Sleep Programme is recommended for young people aged 12 – 14 as an education and prevention programme outlining ways to prevent sleep becoming a problem. It is not a clinical programme for young people who are already seriously affected by sleep deprivation; therefore, we recommend that young people in this situation seek assistance from their GP or from mental health services. It is important to point this out to participants.

The programme aims to provide practical information for young people, which they can then implement in their day to day lives. In the pilot phase of this programme we have found that older participants were more open to receiving and retaining the information. However, their feedback suggested that they would have benefitted from having this information at a younger age. Consequently, we recommend the programme for younger ages, before unhelpful habits become established. Our programme aims to be interactive and reflective to hold the attention of the younger age group.

Parent/Guardian Involvement

We consider the participation of parents and guardians as paramount in this programme. Each week the participants are asked to undertake challenges and it is important, where possible, that this is supported by a responsible adult in the home place. Changing habits is difficult for anyone at the best of times, so positive reinforcement in every setting should yield a better outcome. For that purpose, we encourage communication between the facilitator and the parent/guardian during the programme. A programme plan for a parent session is also included in the appendices (Appendix 2).

Session Structure

Each session begins and ends with the following structure:

Session Beginning

- Icebreaker of your choice or meditation
5/10 minutes
- Feedback from challenges set week before
5/10 minutes

Session Ending

- Relaxation activity 5 minutes
- Set challenges for next week 5 minutes
- Closing check-in 5 minutes

(Duration time of each activity is only a guideline)

In between these activities we recommend that you choose which activities fit into your allotted time frame for each session. We have found that different settings e.g. a school or a youth centre require different time frames and methods. We have tried to make the programme as flexible as possible; however, we recommend you cover all the core modules and suggest you add from the additional activities where relevant to the group.

Meditation

There are meditation and relaxation activities included in each session.

We have found that the more often a group takes part in meditation or relaxation

activities, the more comfortable they become with them and the more they benefit overall. Meditation is a vital tool for addressing sleep deprivation affected by stress or rumination, so we would encourage facilitators to persist through the giggles and the awkwardness at the start. The facilitators should keep calm and encourage the group by telling them that it is completely natural and normal to feel like this at the start, but to give it a chance and experience the benefits.

We have included two meditations in the appendix; one is a visualising exercise and the other is a progressive muscular relaxation exercise. It is our hope that the participants will become very familiar with them and feel comfortable using them at home. We have recorded the meditations included in this resource and they are accessible on <https://soundcloud.com/the-sleep-programme>. However, if you have other relaxation scripts that you have found helpful, use them by all means.

Online recordings of the Meditation Relaxation Exercise:

Male Voice: <https://soundcloud.com/the-sleep-programme/visualisation-exercise-for-relaxation-male-voice>



Female Voice: <https://soundcloud.com/the-sleep-programme/visualising-exercise-for-relaxation-female-voice>

Online links to recordings of the Progressive Muscular Relaxation exercise:

Progressive Muscular Relaxation Exercise -

Male Voice: <https://soundcloud.com/the-sleep-programme/progressive-muscular-relaxation-exercise-male-voice>

Progressive Muscular Relaxation Exercise -

Female Voice: <https://soundcloud.com/the-sleep-programme/progressive-muscular-relaxation-exercise-female-voice>

Icebreakers

The following are a selection of icebreakers taken from our favourites:

Fruit Salad

Taken from <http://www.greatgroupgames.com/fruit-salad.htm>

Have everyone sit in chairs, arranged in a circle facing inwards. Select one person to stand in the middle and remove his or her chair from the circle. The person in the middle names everyone in the circle, including themselves, as one of the following fruit: apple, orange, banana. Then the middle person shouts out one fruit and everyone with that name has to move seats. (Alternatively – the person in the middle needs to say something that applies to at least 2 people in the circle. For example, “Anyone who has a pet”, “Anyone who is wearing jeans”, “Anyone who has a brother or sister”, “Anyone wearing the colour purple”. If the person’s statement applies to someone sitting in the circle, that person has to move from his or her seat and sit in a vacant chair). If the person says, ‘fruit salad’, then everyone needs to move to a different chair. The person in the middle tries to sit down. There’ll be one person left without a chair and s/he will then have to stand in the middle of the circle. The standing person starts a new round by beginning the above process again.

Note: People cannot move to seats on their immediate left or right.

Shark Island

Taken from http://www.ecyc.org/sites/default/files/ecyc_game_book.pdf

The facilitator places large sheets of newspaper randomly on the ground around the room. The facilitator then explains to the group that the sheets are islands and that they are little fish swimming around these islands. When the facilitator calls 'SHARK', the fish have to jump onto the islands; anyone not on an island is out. The fish are then asked to go swimming again while the facilitator reduces the size of the islands by tearing up the paper and removing some and again calls 'SHARK'. This keeps continuing in the same way until the islands are reduced to one very small piece of newspaper and only one person is left to win the game.

Flamingos and Penguins

Taken from http://www.ecyc.org/sites/default/files/ecyc_game_book.pdf

The players are told that they are all penguins, except for one player who is chosen to be the flamingo. Penguins move with their heels together, toes pointing outwards and their hands down by their sides. The flamingo moves slowly taking very big steps and waving his/her arms in unison with his/her feet.

The flamingo chases the penguins. If a penguin is caught, it becomes a flamingo and starts to chase the other penguins. The game continues until everyone has become a flamingo.

Free to download book of games available at: http://www.ecyc.org/sites/default/files/ecyc_game_book.pdf

Between Session Challenges

The challenges assigned to be done at home are very important for reinforcing the session learning.

To encourage full participation, we suggest running a simple raffle whereby tickets are given to those who bring in a completed weekly diary. A ticket is drawn at the end and the winner receives a small prize. The diary will document progress, sleep patterns and meditation practice (Appendix 11). We suggest you keep the same challenges going throughout the programme and add others as relevant the modules each week. For a full list of challenges see Appendix 3.

Supplementary Resources

In order to help participants sleep better and wake up fully in the morning, we suggest (if your budget allows) that you purchase a Fitbit or similar alternative, and also, a white light lamp. The Fitbit will keep track of participants' sleep patterns and physical activity and the white light will assist with the stimulation of cortisone production in the mornings. The ideal way of using these within a programme is to ask each participant to use them for a week and provide feedback before passing them on to the next participant.

Also, at the end of some modules we have included links to interesting talks or websites, some of which are suitable for showing to the group you are working with; others are for your benefit as a facilitator, for example, the following talk entitled 'Sleep Deprivation & Disparities in Health, Economic, Social Wellbeing' by Lauren Hale:

<https://www.youtube.com/watch?v=eV6MUcxw-Is>
or 'Why School Should Start Later for Teens' by Wendy Troxel:

https://www.ted.com/talks/wendy_troxel_why_school_should_start_later_for_teens?utm_campaign=social&utm_medium=referral&utm_source=facebook.com&utm_content=talk&utm_term=education

Evaluation

As an evaluation tool, we recommend the use of some specific pre and post questionnaires. These are The Adolescent Sleep Hygiene Scale, The Sleep Knowledge Assessment Tool and, if the facilitator feels it is useful, the Paediatric Daytime Sleepiness Scale. These questionnaires are available in the appendix section at the back of this sleep programme.

The Sleep Programme is available for download on the following websites:

- www.crosscare.ie
- www.kwetb.ie
- SCP Portal
- www.hse.ie
- www.docchildandfamily.ie





Module One

Introduction

Module One

Introduction

• Icebreaker	10 minutes
• Creating Group Contract	10 minutes
• Overview of Programme	10 minutes
• Pre Programme Evaluation/Assessment	15 minutes
• Expectations and Concerns	10 minutes
• Statement of Commitment	5 minutes
• Meditation/Relaxation	5 minutes
• Set Challenges for Coming Week	10 minutes
• Closing	5 minutes

(Approximate duration 1 hour 20 minutes)

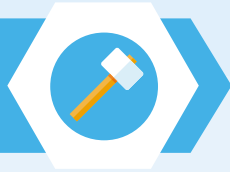
INTRODUCTION

This session gives the participants an opportunity to learn what the programme entails, to speak about their own sleep patterns and to commit to engaging in the programme. Ultimately, the aim here is to encourage active participation in a safe setting from the outset.

MODULE OUTCOMES

- Participants will have an understanding of the content/format of the programme and the level of participation required
- Participants will be more aware of how sleep deprivation affects their lives
- Participants will develop an understanding of the benefits of sleep through sharing personal experiences in a safe space

ACTIVITY 01



ICEBREAKER

- Time:** 10 minutes.
- Materials:** Depends on facilitator's choice of icebreaker.
- Purpose:** To encourage connection among participants and the facilitator so that group feels more comfortable sharing experiences throughout the programme.
- Method:** See facilitator's notes.

ACTIVITY 02



CREATING GROUP CONTRACT

- Time:** 10 minutes.
- Materials:** Flipchart paper and markers; a box for suggestions and comments.
- Purpose:** To agree on a code of behaviour for the group so that each participant feels safe and able to rely on others.
- Method:** Explain to the participants that because they might be discussing personal issues, the group should agree on some ground rules. Ask them to come up with their own ground rules, ones by which they will all agree to abide. List those ground rules on flipchart. Further to recommendations made by participants, suggest any of the additional ground rules as these are important for establishing a safe space.

Keep your list of ground rules clearly displayed for all the activity sessions. Refer to these rules if someone is not adhering to them and remind everyone of their initial agreement. Hopefully,

as the programme progresses, the participants will begin to remind each other of the rules.

Facilitator's Notes:

Recommended Ground Rules

Taken from A Lesson Plan from *Creating Safe Space for GLBTQ Youth: A Toolkit*, <http://www.advocatesforyouth.org/for-professionals/lesson-plans-professionals/221?task=view>

Respect

- Give undivided attention to the person who has the floor (permission to speak)
- Alert the facilitator if you are unable to attend
- Commit to punctuality

Confidentiality

- What we share in this group will remain in this group

Openness

- We will be as open and honest as possible without disclosing others' (family, neighbours, or friends) personal or private issues. It is okay to discuss situations, but we won't use names or other forms of ID, for example, we won't say, "My older brother ..." Instead we will say, "I know someone who ..."

Right to pass

- It is always okay to pass, meaning, "I'd rather not" or "I don't want to answer"

Non-judgmental approach

- We can disagree with another person's point of view without putting that person down

Taking care to claim our opinions

- We will speak our opinions using the first person and avoid using 'you'. For example, "I think that kindness is important, not, "You are just mean."

Acceptance

- It is okay to feel uncomfortable; adults feel uncomfortable, too, when they talk about sensitive and personal topics

Have a good time

- It is okay to have a good time. Creating a safe space is about coming together as a community, being mutually supportive, and enjoying each other's qualities

ACTIVITY 03



OVERVIEW OF THE PROGRAMME

Time: 10 minutes.

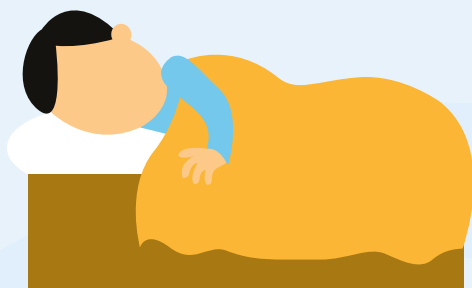
Materials: Handout of programme outlines (Appendix 4).

Purpose: To familiarise participants with the programme; to provide clarity about the programme content so that the group can be comfortable about committing.

Method: Give each participant a handout of the programme's outline and discuss each session briefly, inviting questions and elaborating some of the sessions e.g. sleep hygiene or sleep architecture.

Facilitator's Notes: Sleep Hygiene Definition: Sleep hygiene is a variety of different practices that are necessary to have normal, quality night-time sleep and full daytime alertness. sleepfoundation.org/sleep-topics/sleep-hygiene

Sleep Architecture Definition: The term refers to the basic structure of your sleeping patterns. *Sleep stages* represent the different kinds of sleep you undergo (there are 4), while *sleep cycles* refer to the cyclical patterns of sleep that compose your sleep architecture. www.sleepresolutions.com/blog/what-is-sleep-architecture-stages-and-cycles



ACTIVITY 04



PRE PROGRAMME EVALUATIONS & GROUP DISCUSSION OF OWN SLEEP EXPERIENCE

Time: 15 minutes.

Materials: Questionnaires (Appendices 5, 6, 7).

Purpose: To allow space for participants to explore their own sleep patterns and habits and the effect these have on their day to day lives.

To provide an assessment tool for the facilitator.

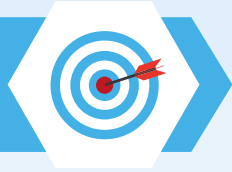
Method: Explain to the group that you are asking them to fill in a number of questionnaires, so that both you as facilitator, and they as participants can establish a starting point for the programme. Before handing out the questionnaires, use the following questions to prompt discussion:

- What role does sleep play?
- How many hours sleep do you get every night?
- Are you tired or unable to function in school?
- Do you sleep through the night?
- What keeps you awake?

When filling in the questionnaires ask the group to use the previous night/week as a typical example of their sleeping habits.


Facilitator's Notes: We recommend that the facilitator reads through the completed questionnaires after the session to establish any trends for discussion in future sessions.


ACTIVITY 05




EXPECTATIONS AND CONCERNS

 **Time:** 10 minutes.

 **Materials:** Flip chart paper and markers.

 **Purpose:** To provide participants with the space to outline their expectations and possible anxieties about the programme.

 **Method:** Write the following headings at the top of some flipchart pages:

GET GIVE CONCERNS

Discuss these heading with the participants and invite their feedback focusing on the following:

- What do you want to get out of this programme?
- What are you prepared to contribute to the programme?
- Have you any worries about taking part in the programme?





ACTIVITY 06




STATEMENT OF COMMITMENT

 **Time:** 5 minutes.

 **Materials:** Statement of commitment (Appendix 8).

 **Purpose:** To encourage participants to commit to the programme to the best of their ability.


 **Method:** Give each participant a copy of the commitment statement and ask them to sign it; then invite them to read the commitment aloud. Finally, as the facilitator of the group, complete the process by co-signing each statement.


ACTIVITY 07




RELAXATION

 **Time:** 5 minutes.

 **Materials:** Relaxation script (Appendix 9 or 10).


 **Purpose:** To create familiarity with relaxation and meditation techniques, so participants can access them with ease at home when having difficulty sleeping.


 **Method:** Ask the participants to sit in a comfortable position, feet on the ground, hands on their laps with palms upturned with one palm resting in the other. If they are comfortable enough they can close their eyes; otherwise, ask them to focus on a point in the room. Explain that you are going to read through a relaxation script and encourage participants to relax into the sound of your voice. Tell them that if thoughts come into their minds, they can acknowledge them and let them go, and to bring


themselves back to the sound of the facilitator's voice. Alternatively, play the recorded version of the relaxations, giving the same instructions. See links to relaxations in facilitators notes at the beginning of this resource.


ACTIVITY 08

SET CHALLENGES

-  **Time:** 10 minutes.

-  **Materials:** Diary Sheets (Appendix 11); Challenge List (Appendix 3).

-  **Purpose:** To empower participants to make meaningful changes in relation to their sleeping habits, and explore the effects of these changes.

-  **Method:** Ask participants to commit to meditation before sleep each night. If using their phones to access the meditation online, remind them to make sure that phones are on silent, so that calls can't be received. After the meditation, ask them to switch off their phones. Discuss why you are asking them to do this (see Sleep Hygiene YouTube clip); similarly, ask them to switch off the TV and games' consoles.


Also, ask them to make a list of drinks which hinder natural sleep cycles and to refrain from consuming these. Give each young person a copy of the weekly diary sheet (Appendix 11) and explain what information needs to be recorded in it; add that completed entries will be required for the next session. Finally, encourage participants to let their parents/guardians know what their challenges are for the week.


Challenges for this week:


- Practise meditation each evening this week before going to sleep
- Come up with a playlist of relaxing songs
- No energy drinks for the duration of the programme
- Use Diary Sheet to keep track of challenges and sleep patterns


ACTIVITY 09

CLOSING

-  **Time:** 5 minutes.

-  **Materials:** None.

-  **Purpose:** To give space to the participants to express their views on the programme and what they have committed to; to assess the level of engagement of participants in the process.

-  **Method:** Ask each participant to take turns saying one word about how they feel about the programme.

Additional Resources

- Mark Williams – 8 minute relaxation.
<https://www.youtube.com/watch?v=kk7IBwuhXWM>



Module Two

Sleep Architecture & Sleep Hygiene

Module Two

Sleep Architecture & Sleep Hygiene

• Icebreaker	10 minutes
• Creating Group Contract	10 minutes
• Overview of Programme	10 minutes
• Pre Programme Evaluation/Assessment	15 minutes
• Expectations and Concerns	10 minutes
• Statement of Commitment	5 minutes
• Meditation/Relaxation	5 minutes
• Set Challenges for Coming Week	10 minutes
• Closing	5 minutes

(Approximate duration 1 hour 20 minutes)

INTRODUCTION

This session gives the participants an opportunity to learn what the programme entails, to speak about their own sleep patterns and to commit to engaging in the programme. Ultimately, the aim here is to encourage active participation in a safe setting from the outset.

MODULE OUTCOMES

- Participants will have an understanding of the content/format of the programme and the level of participation required
- Participants will be more aware of how sleep deprivation affects their lives
- Participants will develop an understanding of the benefits of sleep through sharing personal experiences in a safe space

ACTIVITY 01



GAME OR MEDITATION/ RELAXATION EXERCISE

The choice of a game or meditation should be made depending on the energy levels of the group.

Time: 10 minutes.

Materials: Depends on facilitator's choice

Purpose: In the case of a game, the purpose is to elevate the energy of the group; in the case of a relaxation the purpose is to focus the group and to encourage familiarity and comfortable use of meditation.

Method: See facilitator's notes/appendices.

ACTIVITY 02



FEEDBACK FROM CHALLENGES

Time: 10 minutes (Depending on group size).

Materials: Weekly diaries completed by young people during the previous week.

Purpose: To check in with participants in relation to the completion of their challenges.

Method: Encourage each participant to give feedback, group size permitting.

ACTIVITY 03



GROUP DISCUSSION ON PARTICIPANT'S SLEEP HABITS

Time: 10 minutes.

Materials: Notes from questionnaires filled in by participants during the previous week; handout on consequences of lack of sleep (Appendix 15).

Purpose: To explore where positive changes can be made regarding sleep habits.

Method: Discuss questions 1 and 2 below, making a note of the feedback on a flipchart. Then display the handout as an overhead drawing their attention to any points they may have missed. Develop the discussion by asking questions 3 and 4.

1. How does lack of sleep affect you in the morning? At school? At home?
2. How do you feel emotionally when you don't get enough sleep?
3. Do you think this list of consequences is accurate?
4. Do you feel that lack of sleep affects you in any of these ways?



ACTIVITY 04



INTRODUCTION TO SLEEP ARCHITECTURE

Time: 10 minutes.

Materials: Sleep Architecture clip; laptop; projector; hypnogram (Appendix 16); transcript of clip for facilitator's notes (Appendix 17).

Link to Sleep Architecture clip: <https://www.youtube.com/watch?v=H7jh1xrvvCY&t=15s>

Purpose: To explain to participants how sleep works.

Method: Introduce the clip; explain that this is an introduction to the mechanics of sleep i.e. what happens when we fall asleep. Jane Dare, the speaker, is a public health nurse and an expert on the subject of young people and sleep. Show the clip and discuss the main points to ensure the group understands the information provided. Use the transcript provided in the appendices to aid discussion.

ACTIVITY 05



SLEEP AND EMOTIONAL HEALTH

Time: 15 minutes.

Materials: Character cards (Appendix 18); statements as below.

Purpose: This is an experiential activity to encourage participants to explore the role sleep plays on mental wellbeing, moods and emotions.

Method: Divide the group into pairs or small teams, giving each team a character card.

Ask them to imagine who this person could be and using the prompts provided, to write a character profile on the back of the card.

Once they have completed their character profile, ask for one representative from their team to stand in a line at one end of the room, representing the character they have created. Explain that you are going to read a number of statements and each time a one of these statements applies to their character, they are to take one step forward. Once all statements have been read, ask the participants to stay where they are. Then, ask them to read their character profile aloud for the group and to explain why they think their character is standing where s/he is.

Statements

Take one step forward if.....

- You are a morning person
- You are able to wake up and give yourself time to have breakfast and plan the day ahead
- You do not feel the need to go straight back to bed
- You have energy to deal with your family in the morning
- You feel ready for the day ahead
- You have energy to walk to school/work and be on time
- Your first thoughts are usually positive ones
- You have the energy to chat to friends/ listen to teachers/colleagues.
- You are looking forward to that class with your favourite teacher in the afternoon
- You feel okay about the future



Processing Questions


Why is your character standing where s/he is? Do you think s/he would like to be in a different place? What could your character do to be in a different place now? Do you think that the lack of sleep affected the mood of your character? Do you think sleep deprivation affected how your character experienced his/her day?


ACTIVITY 06




SLEEP MYTHS MOVING DEBATE

 **Time:** 15 minutes.

 **Materials:** True and False pages; blutack; sleep myth statements (see below).

 **Purpose:** To discuss participants' knowledge on the effects of sleep.

 **Method:** Place the 'true' card on one side of the room and the 'false' card on the opposite side.

Explain to participants that you will read out a number of statements and ask them to go to the 'true' side if they agree, and the 'false' side if they disagree. Encourage them to honour their own views and opinions instead of following others.

Read out each debate statement and allow participants enough time to move to their chosen side. Between each statement given, ask the participants to explain why they have moved to their chosen location.

Alternatively, if in a classroom situation and unable to rearrange furniture, give each participant smaller versions of the true/false cards, and ask them to hold them up to represent their opinion each time you read out a statement.

Sleep Myth Statements:

Information taken from www.spunout.ie

1. Adolescents only need a few hours of sleep at night.

False - most adolescents need over 9 ¼ hours of sleep; show and discuss The Children's Sleep Needs' Chart (Appendix 18).

2. Having trouble falling asleep is not a problem.

False - if you have trouble falling asleep every night, it is a problem and can be bad for your health, but it may seem normal as so many people have issues falling asleep.

3. If you missed sleep during the week you can catch up at the weekend.

False - when you miss sleep you build up a sleep debt. The best way to make it up is simply to get into a healthy sleep routine when you go to bed at the same time every night and arise at the same time every morning.

4. Watching TV/iPad/computer screens does not affect sleep.

False - Keep your room dark; the light from the screen tells the receptors in the eyes to send a message to your brain to create cortisone, a hormone which keeps you awake.

5. Naps are a good way to boost your energy levels.


True - naps are a good way to recharge, but naps should be no longer than thirty minutes and should not be taken late in the evening; otherwise, they interfere with night-time sleep cycles.

ACTIVITY 07





INTRODUCTION TO SLEEP HYGIENE

 **Time:** 20 minutes.

 **Materials:** Sleep Hygiene clip; laptop; projector; handout of sleep hygiene tips (Appendix 20); sleep hygiene caricature (Appendix 21); flipchart paper and pen; transcript of YouTube clip for facilitator's notes (Appendix 22).

Link to Sleep Hygiene clip: <https://www.youtube.com/watch?v=6pcxLvRefvs>

 **Purpose:** To explain to participants what sleep hygiene is and to recognise poor sleeping habits.

 **Method:** Introduce the clip; explain that it is an overview of sleep habits that can affect how you sleep. After the film, discuss the main points to ensure that the group understands the

information. The sleep hygiene caricature can be used to aid this discussion. Show the picture of the caricature to the group and ask ‘what is wrong with it in relation to sleep hygiene?’


Give the participants a laminated copy of Sleep Hygiene Tips to take home.


ACTIVITY 08




RELAXATION

 **Time:** 5 minutes.

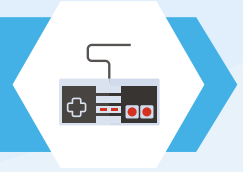
 **Materials:** Meditation script (Appendix 9 or 10).

 **Purpose:** To encourage meditation practice.

 **Method:** Ask the participants to sit in a comfortable position, feet on the ground, hands on their laps with palms upturned with one palm resting in the other. If they are comfortable enough they can close their eyes; otherwise, ask them to focus on a point in the room. Explain that you are going to read through a relaxation script and encourage participants to relax into the sound of your voice. Tell them that if thoughts come into their minds, they can acknowledge them and let them go, and to bring themselves back to the sound of the facilitator’s voice. Alternatively, play the recorded version of the relaxations, giving the same instructions. See links to relaxations in facilitators notes at the beginning of this resource.





ACTIVITY 09




SET CHALLENGES

 **Time:** 10 minutes.

 **Materials:** Diary Sheets (Appendix 11).

 **Purpose:** To empower participants to make meaningful changes in relation to their sleeping habits, and explore the effects of these changes.

 **Method:** Ask participants to commit to mediation before sleep each night. If using their phones to access the meditation online, remind them to make sure that phones are on silent, so that calls can’t be received. After the meditation, ask them to switch off their phones. Discuss why you are asking them to do this (see Sleep Hygiene YouTube clip); similarly, ask them to switch off the TV and games’ consoles. Give each young person a copy of a new diary sheet for the coming week (Appendix 11). Explain that completed entries will be required for the next session. Finally, encourage participants to let their parents/guardians know what their challenges are for the next week.

Challenges for this week:

- Practise meditation every evening this week before going to sleep
- No energy drinks for the duration of the programme
- Switch off phones at 10.00pm for two nights this week
- No games/TV after 10.00pm three nights this week
- Use your diary sheet to keep track of challenges and sleep patterns



ACTIVITY


10




CLOSING

 **Time:** 5 minutes.

 **Materials:** None.

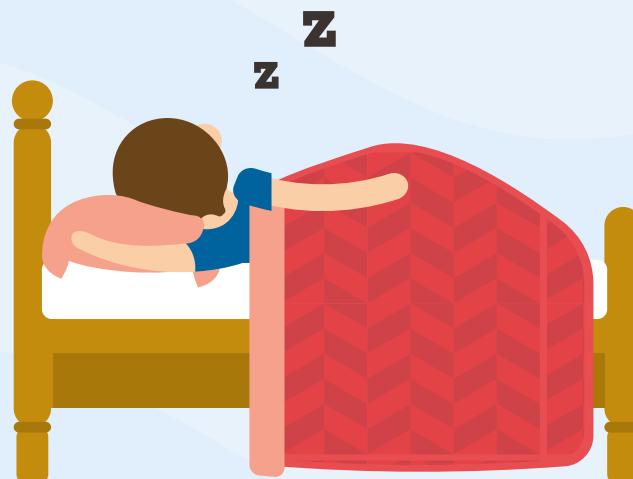
 **Purpose:** To give space to the participants to express their views on the programme and what they have committed to; to assess the level of engagement of participants in the process.

 **Method:** Ask each participant to take turns saying one thing they have learned from today's session.

Additional Resources for this Module:



- Sleep Deprivation in Teens by Brian Engelbrecht:
<https://www.youtube.com/watch?v=FG9mLXLdHU>
- One More Reason to get a Good Night's Sleep – TED talk by Jeff Iliff:
https://www.ted.com/talks/jeff_iliff_one_more_reason_to_get_a_good_night_s_sleep
- Sleep Deprivation and its Weird Effects on the Mind and Body – Health Triage:
<https://www.youtube.com/watch?v=Ld9RIIVN57M>





Module Three

Stress & Sleep

Module Three

Stress & Sleep

• Game/Meditation	10 minutes
• Feedback from Challenges	10 minutes
• What is Stress?	15 minutes
• Balancing Demands and Resources	20 minutes
• The Effect of Stress on the Body	15 minutes
• Signs of Stress	20 minutes
• Rumination	20 minutes
• Set Challenges	10 minutes
• Relaxation	5 minutes
• Closing	5 minutes
• Supplementary activities for older age groups: the impact of cigarettes, drugs and alcohol on sleep.	30 minutes

(Approximate time 2 hours 10 minutes not including supplementary activities)

INTRODUCTION

This session focuses on how sleep can be disrupted by thoughts which generate worry or anxiety. Also, it raises awareness about what happens to us physically and emotionally when we are feeling under stress. The session offers practical steps for the alleviation of distress.

MODULE OUTCOMES

- Participants will learn positive practical ways to manage personal stress
- Participants will gain a greater understanding of the strong link between thoughts, emotions and behaviours
- Participants will be encouraged to continue the practical exercises after the session and to share their experience

FACILITATOR'S NOTES

Discussions of stress may bring up personal issues for participants, so checking-in on an individual basis is very important at close of this session

Please ensure the group is age-appropriate if you are including the supplementary activities on cigarettes, drugs and alcohol, in this module.

ACTIVITY 01



GAME OR MEDITATION/ RELAXATION EXERCISE

The choice of a game or meditation should be made depending on the energy levels of the group.

Time: 10 minutes.

Materials: Depends on facilitator's choice

Purpose: In the case of a game, the purpose is to elevate the energy of the group; in the case of a relaxation the purpose is to focus the group and to encourage familiarity and comfortable use of meditation.

Method: See facilitator's notes/appendices.

ACTIVITY 02



FEEDBACK FROM CHALLENGES

Time: 10 minutes (Depending on group size).

Materials: Weekly diaries completed by young people during the previous week.

Purpose: To check in with participants in relation to the completion of their challenges.

Method: Encourage each participant to give feedback, group size permitting.

ACTIVITY 03



WHAT IS STRESS?

Time: 15 minutes.

Materials: Flip chart paper and markers.

Purpose: To encourage peer discussion about what they feel causes stress in their lives.

Method: Discussion with group – What is Stress?

Write the definitions below on a flip-chart page and ask the group to tell you what they understand by each statement, and whether or not they think the statements are accurate.

1. Stress is 'the reaction people have to excessive pressures or other types of demands placed upon them'.

(Health & Safety Executive: Tackling Work-related Stress: A managers' guide to improving and maintaining employee health and well-being. 2001 HSE Books)

2. Stress 'arises when people perceive that they cannot adequately cope with the demands being made on them or with threats to their well-being'.

(Dr. Lee Senior & Dr. Michael Reddy. Stress: Managing the Business Risk. 2002 ICAS)

3. Stress is a response to a situation that puts demands or pressures on us that we think we cannot cope with well enough either because we are viewing situations to be worse than they are or we are going through a number of difficult situations at one time.'

(Collins Donnelly, K. 2013. Starving the Stress Gremlin: A Cognitive Behavioural Therapy Workbook on Stress Management for Young People. Gremlin and Thief CBT Workbooks. Jessica Kingsley Publishers.)

Divide the participants into small groups giving each group a sheet of paper and markers; ask them to draw a spider diagram with stress at the centre and to add things that make them stressed, branching out from it. Allow five minutes for this exercise before getting feedback from each group.

If the groups have difficulties coming up with their own stressors, here are some suggestions from other groups of young people:

“Homework; siblings (particularly babies); teachers; fighting with someone; getting injections; meeting new people; exams; lack of money; keeping secrets; going to the dentist; being nagged; listening to stuff I’m not interested in; not being treated fairly, and a sick family member or death.”

- Facilitator’s Notes:** Be mindful that this activity may bring up emotional issues for the participants; check in with the group at the end of the session to make sure they are okay, making them aware that you are available if they need support.

ACTIVITY 04

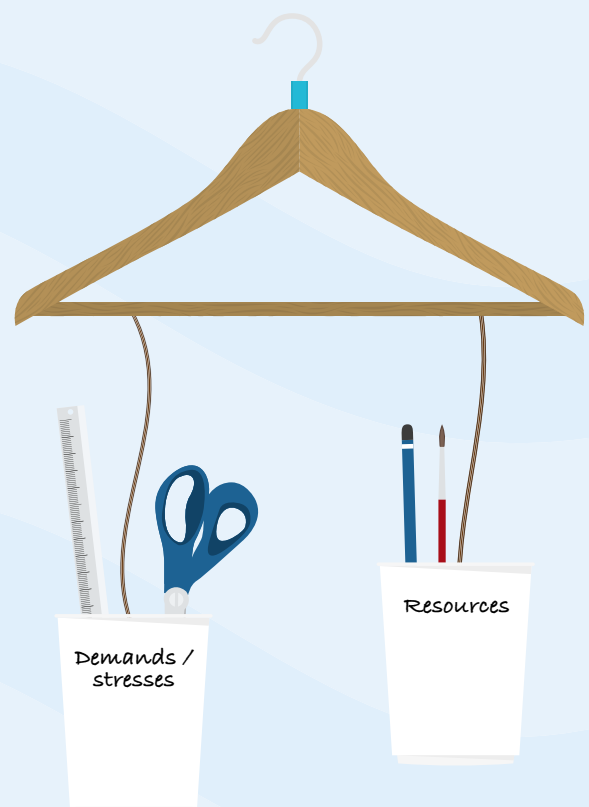


BALANCING DEMANDS AND RESOURCES

- Time:** 20 minutes.
- Materials:** Clothes-hangers; paper cups; string; marbles; sellotape; markers.
- Purpose:** To help young people understand that they have resources within themselves that they can access to manage stress ensuring improved quality of sleep.
- Method:** Divide the group into smaller groups of 4 participants. Give each group a hanger, 2 paper cups, 2 lengths of string, sellotape and markers. Ask each group to make a balancing scale (like a weighing scale) as per diagram below. Once the scales are made, ask them to write ‘demands /stresses’ on one cup and ‘resources’ on the other. Explain that the demands can include the stressors they talked about in the previous activity. Ask them to put a marble to represent each stress they

are experiencing today. Ask participants to imagine that the cup represents them and to identify how they feel when they are weighed down with stresses like the cup. Participants might say – no sleep, feeling sick and anxious, etc. Now ask the group what they might do to counteract these effects - what they do to feel better when they are stressed. For each resource they identify, they can add a marble to the resources’ cup. Examples of resources may include the following: meditation; talking to parents/guardians or friends; physical activity; sleep; eating properly; being positive; laughing/ sense of humour; good decision making.

Often, the participants will try to balance out the cups; this will provide an opportunity to ask them if ‘the cups’ balance out in their lives, and if they actually tap into their resources when they are stressed.



ACTIVITY 05



EFFECT OF STRESS ON THE BODY

Time: 15 minutes.

Materials: Animation clip on the effect of stress: <https://youtu.be/ZZOXMp9DMrk> (for transcript, see Appendix 22); Laptop and projector.

Purpose: To raise awareness about how the body is affected by stress.

Method: Introduce the short animation; explain that this might represent a typical situation for a young person and that it explores how the body reacts when it perceives stress. After watching the clip, use the following processing questions:

- What is your understanding of perceived stress?
- Can you name a time when perceived stresses have affected you?
- What self-talk do you engage in when you are experiencing perceived stress?
- Can you think of ways of managing perceived stress so that its effects are not ongoing?

ACTIVITY 06



SIGNS OF STRESS

Time: 20 minutes.

Materials: Depending on chosen activity (see below).

Purpose: The aim is to take the participants out of their comfort zone, and to assist them in becoming aware of how/where they feel stress in their body.

Method: Explain to the group that this activity is about starting the stress response in their bodies so they can identify where they feel the physical symptoms of stress.

The facilitator can decide which stress-inducing activity best suits the group. Examples of activities that might take participants out of their comfort zone are as follows: ask participants to stand up and sing a song; place a fake spider in a box, pretending it is real, and ask participants to close their eyes and put their hand into the box; ask them to prepare a one minute speech for delivery in front of the group, etc. Having decided which task is most suitable for the group you are working with, ask participants to stand around in a circle; then one by one invite them to complete the task you have assigned.

At the end of your chosen activity, ask participants how and where in their bodies are they are feeling stress? Encourage them to take four deep breaths and then see if they feel differently?

Processing Questions:

How did you know you were stressed?

Where did you feel it in your body?

How could you manage stress at night time when you are trying to go to sleep?

Facilitator's Notes: If your group is having difficulty naming where or how they are feeling the stress in their body, use the skeleton outline (Appendix 23) and ask them to colour in the boxes with 'stress consequences' that related to them.

Preferably after the discussion, invite the group to do the seated relaxation meditation. Upon completion establish if they have been able to feel their bodies rebalancing and relaxing.

ACTIVITY 07



RUMINATION

Time: 20 minutes.

Materials: Role-play scenarios (see below).

Purpose: To facilitate the participants' understanding of rumination and its effects.

Facilitator's Notes: What is rumination?

In the normal run of things, worry is the body's normal 'warning system'; it reminds us that we are facing a particular challenge and that we need to be ready to react. For example, a history project is due in a day's time; a friend's birthday party is at the weekend and you have not been invited yet; all your friends have sorted part-time jobs for the summer, except you. The 'worry-thoughts' are telling us that we need to take some action. However, a lot of the time we can allow worry to take over our thinking, and instead of making plans to address the worry, our minds fill up with negative possibilities of all the things that might go wrong in the future. We get drawn into a nightmare where we feel compelled to keep thinking about all that could go wrong. This type of thought cycle is often described as 'catastrophising'.

The brain is geared to protect us against danger, but very often it can also cause us to worry about dangers which are very unlikely to occur. In fact, ruminating causes us to consider too many threats and prevents us from solving the problem.

Worry and ruminating can be exhausting and can lead to all the usual signs of stress. Night time is a particular time for worrying because with darkness and quietness, our minds are much less distracted. As a result, the worry thoughts become more noticeable and less easy to avoid.

Method: Seek out a volunteer to sit in the centre of the room and request that the other group members sit in pairs, in a circle around him/her. Get the volunteer to read out a scenario (see below), that you will give them. Explain to the volunteer that s/he will assume the identity of the character in that scenario. If there is no volunteer, the facilitator may take the place at the centre of the circle.

Give the group members 5 minutes to imagine themselves in this scenario and to write down the self-talk that they think may be going through the character's mind.

When everyone is ready tell the group they are going to represent the character's thoughts, and to read their notes in turn at high speed, similar to how thoughts rush through our minds. Ask the volunteer if s/he had any additional thoughts.

Scenarios:

1. Everyone is buzzing about the party at Joe's house at the weekend, but you have not been invited.
2. You walked into a room earlier that day and the group you hang around with stopped talking the minute you walked in.
3. You are wearing new shoes and are feeling a little self-conscious when you hear someone snigger as you walk past.

Processing Questions:

Ask the volunteer, 'How did it feel to have all those thoughts going through your head?'

Ask the rest of the group the following questions:

- Despite the self-talk, what might the reality of the situation be?
- How do you think this spiral of self-talk might affect your sleep?
- What could you do to manage these thoughts, especially at night?

Facilitator's Notes: The average person has about 48.6 thoughts per minute, according to the Laboratory of Neuro Imaging at the University of Southern California. That adds up to a total of 70,000 thoughts per day (www.reference.com/world-view/many-thoughts-per-minute-cb7fcf22ebbf8466)

ACTIVITY 08



RELAXATION

- Time:** 5 minutes.
- Materials:** Meditation script (Appendix 9 or 10).
- Purpose:** To encourage meditation practice.
- Method:** Ask the participants to sit in a comfortable position, feet on the ground, hands on their laps with palms upturned with one palm resting in the other. If they are comfortable enough they can close their eyes; otherwise, ask them to focus on a point in the room. Explain that you are going to read through a relaxation script and encourage participants to relax into the sound of your voice. Tell them that if thoughts come into their minds, they can acknowledge them and let them go, and to bring themselves back to the sound of the facilitator's voice. Alternatively, play the recorded version of the relaxations, giving the same instructions. See links to relaxations in facilitators notes at the beginning of this resource.

ACTIVITY 09



SET CHALLENGES

- Time:** 10 minutes.
- Materials:** Diary Sheets (Appendix 12).
- Purpose:** To empower participants to make meaningful changes in relation to their sleeping habits, and explore the effects of these changes.
- Method:** Ask participants to commit to meditation before sleep each night. If using their phones to access the meditation online, remind them to make sure that phones are on silent, so that calls can't be received. After the meditation, ask them to switch off their phones. Discuss why you are asking them to do this (see

Sleep Hygiene YouTube clip); similarly, ask them to switch off the TV and games' consoles. Give each young person a copy of a new diary sheet for the coming week (Appendix 12). Explain that completed entries will be required for the next session. Finally, encourage participants to let their parents/guardians know what their challenges are for the next week.

Challenges for this week:

- Practise meditation each evening before going to sleep
- No energy drinks for the duration of the programme
- Switch off phones at 10.00pm for two nights this week
- No games/TV after 10.00pm three nights this week
- Use your diary Sheet to keep track of challenges and sleep patterns
- Use your diary sheet to write down 1-2 examples of when you were stressed during the week and say how it felt in your body

ACTIVITY 10



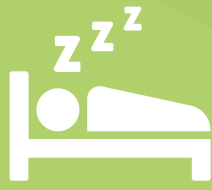
CLOSING

- Time:** 5 minutes.
- Materials:** None.
- Purpose:** To give space to the participants to express their views on the programme and what they have committed to; to assess the level of engagement of participants in the process.
- Method:** Ask each participant to take turns saying one thing they have learned from today's session.

Additional Resources



- Why Humans Experience Anxiety – Gozen online
https://www.youtube.com/watch?v=7W_rlrwH-BE



Supplementary Activities

Supplementary Activities

Cigarettes, Drugs and Alcohol and their Effects on Sleep



Facilitator's Note: the following information can be used as a discussion tool if relevant and if age appropriate. We have included some information on cigarettes, alcohol and drugs in this module as they are often used as a stress coping mechanism and misguidedly, as a sleep aid.

ACTIVITY

01



DEBUNKING MYTHS – MOVING DEBATE

Time: 15 minutes.

Materials: Agree/disagree cards (depending on size of group), and statements (see below).

Purpose: To explore the facts around cigarette, cannabis and alcohol use, in relation to sleep.

Method: Place the 'true' card on one side of the room and the 'false' card on the opposite side.

Explain to participants that you will read out a number of statements and ask them to go to the 'true' side if they agree, and the 'false' side if they disagree. Encourage them to honour their own views and opinions instead of following others.

Read out each debate statement and allow participants enough time to move to their chosen side. Between each statement given, ask the participants to explain why they have moved to their chosen location.

Alternatively, if in a classroom situation and unable to rearrange furniture, give each participant smaller versions of the true/false cards, and ask them to hold them up to represent their opinion each time you read out a statement.

Statements:

- **Cigarettes are a relaxant**
False - Cigarettes are in fact a stimulant; nicotine speeds up the heart rate and stimulates the nervous system. The feeling of relaxation is derived from the time out, along with the deep breaths and the satisfaction that comes from feeding a craving.
- **You do not suffer cravings or withdrawal symptoms when you are asleep**
False – When consumed, nicotine enters the bloodstream and reaches the brain within seconds. Within only a couple of hours of consumption, half the nicotine has left the body and smokers begin to feel the need for more. Consequently, they experience withdrawal symptoms throughout the night. Night time cravings may even cause the smoker to awaken.
- **Alcohol is a depressant**
True – alcohol's effects on the brain are similar to those of other sedative drugs like barbiturates or benzodiazepines. After drinking, production of adenosine (a sleep-inducing chemical in the brain) is increased, allowing for a fast onset of sleep. But this subsides as quickly as it arises, making the drinker more likely to wake up before s/he is properly rested.
- **Cannabis helps you sleep**
Trueish - People's experience of cannabis varies widely and depends on its potency. In general, cannabis use first relaxes a person and elevates his/her mood; these effects are usually felt within a few minutes and are followed about 30 minutes later by drowsiness and sedation. So, while cannabis helps you fall asleep, its impact on sleep is similar to that of cigarettes. Like cigarette smoking, using cannabis increases the heart rate and causes sleep disturbance, and an

increase in sleep disordered breathing e.g. snoring or sleep apnoea. In essence, both cigarettes and cannabis prevent a person from having restorative deep sleep.


- **You are only tired after a night on the booze because you have danced all night**

False - After drinking, production of adenosine (a sleep-inducing chemical in the brain) is increased, allowing for a fast onset of sleep. But it subsides as quickly as it arises, making the drinker more likely to wake up before they are properly rested.

Alcohol blocks REM sleep (restorative type of sleep). It can also aggravate breathing problems by causing the whole body to relax, including the muscles in the throat; this can lead to snoring and sleep apnoea.

Additionally, your body has learned to put the bladder into hibernation for the night; however, alcohol being a diuretic, increases the need to go to the toilet and this further interrupts sleep.

References: www.quitsmokingcommunity.org, www.ncbi.nlm.nih.gov/pubmed/8078854, www.sleepfoundation.org, Buzed; Kuhn, Swartzwelder and Wilson; Norton 4th Ed., 2014.


 **Method:** Ask the group to say what they have learned from this activity; write their responses on the flip chart and use these to assist with the next activity.


ACTIVITY 02




TOP TIPS FOR MANAGING CIGARETTES, ALCOHOL AND CANNABIS USE FOR IMPROVED SLEEP

 **Time:** 15 minutes.

 **Materials:** Flip chart, paper and markers for each group; notes from previous exercise.

 **Purpose:** To encourage young people to explore changes that need to be made regarding cigarette, cannabis and alcohol use, in order to improve sleep quality.

 **Method:** Divide the participants into smaller groups. Reflecting on what they have learnt from the previous exercise, ask each group to discuss what would benefit cigarette/cannabis' users in relation to improving their sleep quality. Following on from this discussion, invite each group to write down their top three practical tips; record these on a flipchart. Repeat the above process in relation to people who drink alcohol.

 **Facilitator's Notes:** Suggested tips for managing cigarette and cannabis use for improved sleep:

- Do not smoke for at least one hour before going to sleep, even longer in relation to cannabis
- Cut back on the amount smoked during the day
- Practise relaxation techniques to help you sleep
- Practise the three 'D's if you are craving a cigarette/joint – Delay, Distract, Drink water. (For further information see Quit4Youth, HSE Tallaght)
- Distract yourself by taking a shower, reading a book, listening to gentle music or writing a journal

Top tips for managing alcohol use for improved sleep

- Give your body time to process the alcohol before going to sleep. It takes one hour to process one unit of alcohol (one unit is half a pint of beer, one single measure of spirits or one small glass of wine)
- Drink a glass of water between each alcoholic beverage
- Do not mix alcohol with other drugs, especially other depressants
- Keep to your sleep routine as much as possible, waking at the same time in the morning, and take a 30 minute nap later in the day if you need to make up for any lost sleep
- Practise relaxation techniques to help you sleep



Module Four

Physical Activity

Module Four

Physical Activity

• Ice breaker – Build-up Chasing	10 minutes
• Feedback from challenges	10 minutes
• Discussion – What activities are you engaging in?	10 minutes
• Exercise routines for morning and evenings	30 minutes
• Physical activity and food diary	15 minutes
• Heart rate check activity	30 minutes
• Meditation/Relaxation	5 minutes
• Set challenges	10 minutes
• Closing	5 minutes

(Approximate duration – 2 hours)

INTRODUCTION

In this module, participants will learn how physical activity can have a positive effect on their sleep, along with other aspects of their lives, for example, having greater mental and physical alertness, and a better capacity to focus and concentrate. Also, this module will encourage participants to develop a daily physical exercise routine, as physical activity can strengthen circadian rhythms, promote daytime alertness and help bring on sleepiness at night (www.psychologytoday.com)

LEARNING OUTCOMES

On completion of this session, participants will be able to:

- Identify what sport and exercise they are currently engaging in and say how it affects their sleep
- Identify changes they can make to improve their participation in sports and exercise
- Check pulse rates and measure raised pulse rates after exercise sessions
- Evaluate their own diet and explore the effect of food on their sleep and general energy levels

ACTIVITY 01



ICE-BREAKER – BUILD-UP CHASING

- Time:** 10 minutes.

- Materials:** Cones Bibs.

- Purpose:** To energise the group.

- Method:** Use cones to mark out the space the game is to be played in i.e. a large square. The facilitator chooses one person to be the 'catcher'; the catcher must attempt to tag the other participants in order to make them become catchers too. Each person who is tagged must put a bib on so they can be identified as a catcher. The game can last up to five minutes or longer. The leader can play a few different games by selecting different catchers each time. The purpose this exercise is solely to get the participants up and moving.

ACTIVITY 02



FEEDBACK FROM CHALLENGES

- Time:** 10 minutes.

- Materials:** Weekly diaries completed by participants during the previous week.

- Purpose:** To check in with participants to see how they managed their challenges.

- Method:** Encourage each young person to give feedback one at a time (depending on your group size).

ACTIVITY 03



DISCUSSION – WHAT ACTIVITIES ARE YOU ENGAGING IN?

- Time:** 10 minutes.

- Materials:** None.

- Purpose:** To explore what participants understand is meant by the term, physical activity.

- Method:** Using the questions below, encourage group discussion and record the main points on a flipchart.
 - What is sport and physical exercise?
 - What sporting/exercise activities do you engage in, if any?
 - How much time do you spend engaging in physical activity each day?
 - How do you think physical exercise can help or hinder your sleep?

ACTIVITY 04



EXERCISE ROUTINES

- Time:** 30 minutes.

- Materials:** Pen and paper (Appendix 25).

- Purpose:** To enable the participants to partake in the recommended daily amount of exercise.

- Method:** Explain the benefits of exercise as an aid to good sleep.

- Facilitator's Notes:** Please explain to the participants that regular physical activity can help to reduce stress; also, that it tires

you out, consequently reducing the amount of time required to fall asleep and increasing the duration of sleep. Exercise in the morning or afternoon may help to reset the sleep-wake cycle by raising the body temperature slightly and then allowing it to drop later in the evening; this process helps to trigger sleep.

Below, you will find a list of exercises for the participants to do. During the session, practise these exercise routines with the group to ensure they are able to do them properly and effectively at home. Overall, it is recommended that they engage in a minimum of 30 minutes of physical aerobic exercise per day.

You will need to copy (Appendix 25) for each participant to take home.

Morning routine – 15 minutes: each exercise should be done for two minutes.

Toe taps	Knee raises
Jumping jacks	Jogging on the spot
Step ups (using steps on stairs or small chair)	
Forward lunges	
Last few minutes light jog on the spot.	

Evening routine – 15 minutes: each exercise should be done for two minutes.


Skipping	Shadow boxing
Push-ups	Squats
Lunges	Mountain climbs
Jogging on the spot	
After each 15 minute activity, light stretching is recommended.	


ACTIVITY 05




PHYSICAL ACTIVITY DIARY AND FOOD DIARY


 **Time:** 15 Minutes.

 **Materials:** Sample Diary (Appendix 13 and 14).

 **Purpose:** To allow the participants to monitor how much sport and exercise they are engaging in and to establish any improvements in their sleep; to get them to critically evaluate their diet.

 **Method:** Participants will be asked to complete a diary for a week and bring it to the next session.

Use the completed sample diary (Appendix 13) to facilitate a discussion with the group regarding what constitutes a good/bad diet. Ask the participants to imagine how the person who filled in the diary sample would have felt at the end of each day (because of the food consumed, exercise taken and amount of sleep achieved).

 **Facilitator's Note:** Healthy food is an essential factor in maintaining energy levels. When these levels are not achieved/maintained, people can suffer an energy crisis, and may turn to processed foods, refined carbohydrates and sugar, for a quick-fix. These foods raise blood sugar levels fast, giving the immediate, sought-after energy boost. However, the body has an efficient and highly responsive system in place to deal with such 'sugar spikes'. The hormone insulin kicks in, telling our bodies' cells to absorb the sugar rapidly, in order to keep blood glucose at safe levels. The overall result is an energy slump/dip shortly after the spike. Therefore, processed foods and sugar should be kept to a minimum, especially in the hours before sleep.

That said, for some people a light snack before bed can help to promote sleep. When you pair tryptophan-containing foods with

carbohydrates, it may help calm the brain and allow you to sleep better. Experiment with your food habits to determine your optimum evening meals and snacks. If you need a bedtime snack, try:

Half a turkey sandwich, a banana or a small bowl of whole-grain, low-sugar cereal with low-fat milk or yogurt

Additional Resources



<http://www.youthhealth.ie/sites/youthhealth.ie/files/u5/HealthyActive-march10.pdf>

<http://www.safefood.eu/SafeFood/media/SafeFoodLibrary/Documents/Publications/Consumer/NI-Teen-Sports-Leaflet-for-Web.pdf>

ACTIVITY 06



HEART RATE CHECK

Time: 30 Minutes.

Materials: Heart rate chart – a clock with a second hand; different colour cones; relaxation script (or use this link to a 1 minute breathing exercise to promote relaxation: <https://www.youtube.com/watch?v=u9Q8D6n-3qw>)

Purpose: To show participants how to measure their heart-rate.

Method: The facilitator will explain the heart-rate chart (Appendix 26), and demonstrate to participants how they can take their pulse – The recommended normal heart rate is between 60-100 heartbeats per minute. This short clip may be used as an aid: <https://www.youtube.com/watch?v=8gbVAHcYpzi>

Participants can take their pulse very easily by placing their fingers on the carotid artery that runs down the front side of the neck or

the radial artery on the inside of the wrist, and counting how many times they feel their heart beat in 30 seconds (multiplying the result by 2).

The exercise needs to be done twice, once when participants are relaxed and later when they completed the following exercise:

Step 1: Place 3 differently coloured cones around the hall. The facilitator will then shout out a colour of a cone. Participants must try to get to that cone as quickly as they can. Keep this game going for 2-3 minutes; then redo the heart rate check noting the changes.

Step 2: Ask the participants to engage in a short relaxation activity (see materials' list above). After this, get them to check their heart rate again. Compare the changes with earlier heart rate checks.

Facilitator's Notes: If a young person has a particularly high or low heart rate, advise them to visit a doctor.

ACTIVITY 07



RELAXATION

Time: 5 minutes.

Materials: Meditation script (Appendix 9 or 10).

Purpose: To encourage meditation practice.

Method: Ask the participants to sit in a comfortable position, feet on the ground, hands on their laps with palms upturned with one palm resting in the other. If they are comfortable enough they can close their eyes; otherwise, ask them to focus on a point in the room. Explain that you are going to read through a relaxation script and encourage participants to relax into the sound of your voice. Tell them that if thoughts come into their minds, they can acknowledge them and let them go, and to bring themselves back to the sound of the facilitator's voice.


Alternatively, play the recorded version of the relaxations, giving the same instructions. See links to relaxations in facilitators notes at the beginning of this resource.


ACTIVITY 08



SET CHALLENGES

 **Time:** 10 Minutes.

 **Materials:** Diary Sheets (Appendix 14).

 **Method:** Ask participants to commit to meditation before sleep each night. If using their phones to access the meditation online, remind them to make sure that phones are on silent, so that calls can't be received. After the meditation, ask them to switch off their phones. Discuss why you are asking them to do this (see Sleep Hygiene YouTube clip); similarly, ask them to switch off the TV and games' consoles. Give each young person a copy of a new diary sheet for the coming week (Appendix 14). Explain that completed entries will be required for the next session. Finally, encourage participants to let their parents/guardians know what their challenges are for the next week.

Challenges for this week:

- Practise meditation each evening before going to sleep
- No energy drinks for the duration of the programme
- Switch off phones at 10.00pm for two nights this week
- No games/TV after 10.00pm three nights this week
- Use your diary Sheet to keep track of challenges and sleep patterns


ACTIVITY 09




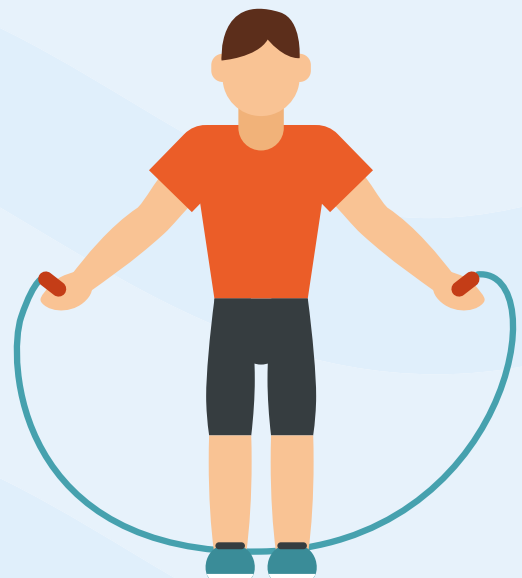
CLOSING

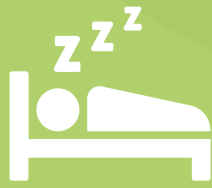
 **Time:** 5 Minutes.

 **Materials:** None.

 **Purpose:** To give space to the participants to express their views on the programme and what they have committed to; to assess the level of engagement of participants in the process.

 **Method:** Ask each participant to take turns saying one word about how they feel about the programme.





Module Five

Closing & Evaluation

Module Five

Closing & Evaluation

• Game /Meditation	10 minutes
• Feedback from challenges	10 minutes
• Post Programme Evaluation	20 minutes
• Meditation/relaxation	5 minutes
• Closing & Certificate of Completion	15 minutes

(Approximate duration, 1 hour)

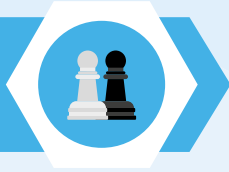
INTRODUCTION

The final session is an opportunity for the facilitator and the participants to assess the learning throughout the programme and to establish if the initial outcomes were achieved.

MODULE OUTCOMES

- To establish what participants have learnt
- To give participants to express their thoughts about the programme

ACTIVITY 01



GAME OR MEDITATION/ RELAXATION EXERCISE

- Time:** 10 minutes.
- Materials:** This will depend on the facilitator's choice of game/exercise.
- Purpose:** In the case of a game, the purpose is to elevate the energy of the group; in the case of a relaxation the purpose is to focus the group and to encourage familiarity and comfortable use of meditation.
- Method:** See facilitator's notes/appendices.

ACTIVITY 02



FEEDBACK FROM CHALLENGES

- Time:** 10 minutes.
- Materials:** Diary sheets completed by young people during the previous week
- Purpose:** To check in with participants to see how they managed their challenges
- Method:** Encourage each participant to give feedback one at a time (depending on group size)

ACTIVITY 03



WHAT HAVE YOU LEARNED & EVALUATION QUIZ

- Time:** 15 minutes.
- Materials:** Questionnaires (Appendices 5, 6, 7)
- Purpose:** To establish what participants have learnt throughout the programme and to assess the outcomes of the programme.
- Method:** Ask the participants to complete the three questionnaires (these are the same questionnaires they completed at the beginning of the programme).

ACTIVITY 04







PROGRAMME EVALUATION DISCUSSION

- Time:** 10 minutes.
- Materials:** Flip chart pages and markers.
- Method:** To evaluate the programme.
- Method:** Write one of the following questions on each of the flipchart pages and stick these pages at various locations in the room. Give each participant a marker and ask them to jot down their answers on the flip chart pages
 - Was the information you were given throughout the programme presented clearly?
 - Was the information relevant? Please explain.
 - What did you like about the programme?
 - What would you do differently?
 - Would you recommend this programme to others?

ACTIVITY 05







MEDITATION/RELAXATION

-  **Time:** 5 minutes.
-  **Materials:** Relaxation script (Appendix 10).
-  **Purpose:** To help the participants to relax and to make them more comfortable with using meditation techniques.
-  **Method:** Ask the participants to sit in a comfortable position, feet on the ground, hands on their laps with palms upturned if possible. If they are comfortable enough they can close their eyes; otherwise, ask them to focus on a point in the room. Explain that you are going to read through a relaxation script and tell them to follow the sound of your voice; tell them that it is natural for their mind to wander but when it does to bring the attention back to the voice each time (this might happen tens of times).

ACTIVITY 06



CLOSING & CERTIFICATE OF COMPLETION

-  **Time:** 15 minutes.
-  **Materials:** Certificates (Appendix 27)
-  **Purpose:** To give space to the participants to express their views on how they are at that moment, to celebrate their attendance and participation in the programme.
-  **Method:** Ask each participant to take turns saying one thing about how they are feeling now that the programme is finished.

If possible invite each participant up individually to accept their certificate of completion.

Once everyone has received their certificate invite the group to stand in a circle, to turn to the right so that they are facing the back of the person on their right and using their right hand give that person a pat on the back and tell them well done for their involvement and achievement.





Appendices

PARENT CONSENT AND FLYER

Why is good sleep essential?

Sleep is as essential to good health as diet and exercise and as necessary for survival as food and water. Research shows that sleep is essential to helping maintain mood, memory and cognitive performance. It also plays a pivotal role in the normal function of the endocrine and immune systems. Studies also show a growing link between sleep duration and a variety of serious health problems including obesity, diabetes, hypertension and depression.

For young people it is particularly important. Sleep is the time when the body secretes many important hormones that affect childhood growth. Growth hormones also play a role in preventing obesity. It boosts the immune system which is already under pressure during adolescence. Also, and we know from our own experience, sleep loss can adversely affect mood. In fact research shows that sleep deprivation is linked with anger, anxiety and sadness.



The young people will be asked to do any of the following challenges at home while on the programme:

Each week the participants in the programme are set challenges to help them make improvements to their sleep.

Examples of the challenges are as follows:

- Practice the relaxation / meditation activities
- Find short relaxation / meditations on youtube
- Come up with a playlist of relaxing music
- Switch off phones before going to bed
- Reduce sugar and caffeine intake before sleep
- Practice the physical activity routine in the morning and in the evening
- Switch off TV / gaming devices / other screens an hour before sleep
- Maintain sleep routine at the weekend – don't sleep in too late
- Eat breakfast and avoid heavy meals late at night

How to support your young person to get the most out of the programme

Inform yourself about the importance of sleep for your young person. Contact the facilitators of the programme or check out the following websites:

- www.spunout.ie
- www.reachout.ie
- www.thesleepfoundation.org

Each week ask your young person to tell you what was discussed during the programme on that day and ask them what the homework challenge for this week is.

As we all know it can be difficult to change habits; however, with positive encouragement and support from you your young person might find it easier to complete some of the challenges.

Encourage them to take responsibility for the challenges themselves rather than trying to enforce it for them.

The aim of the programme is to give the participants the tools for making change when the time is right for them.

Tips for Parents—helping your children get better sleep

Create a sleep schedule—if your child has to be up by 8am they should be ASLEEP by 11pm at the latest

Create a bedtime routine—if your child needs to be asleep by 11pm they should start preparing for sleep at 10pm e.g. showering, teeth brushing, changing into pyjamas

Use of screens such as phones, TVs, gaming devices need to be avoided where possible for two hours before sleep and should be turned off so there are no text alerts during the night

If stress and worrying thoughts are causing sleepless nights encourage your child to try stress management activities such as meditation or writing down the thoughts before going to bed

No caffeine, alcohol, smoking or eating of sugary food for at least two hours before sleep.

Make sure the room is as dark as possible and make sure its not too warm.

If none of these tips work, contact your local GP.



Young People & Sleep Parent Information Leaflet & Consent

___ week programme working with young people around the importance of good sleep and tips for how to improve sleep quality



Programme covers the following topics

- What happens when you sleep
- Tips for getting better sleep
- How sleep is affected by stress
- The benefits of physical activity and stress
- Other - nutrition and sleep, tobacco, alcohol, cannabis and sleep

DATES & TIME _____

VENUE _____

CONTACT _____

TEL. NO. _____

CONSENT FORM

My son/daughter (young person's name)

_____ has my permission to attend the sleep programme starting _____

Parent/Guardian Name: _____

Address: _____

Contact Number _____


Does your son/daughter have any medical issues/allergies we need to be aware of? YES / NO

If yes, please give details _____


Photos may be taken for promotional purposes.

Parent Information Session Programme Plan

Welcome and Introduction

 5 minutes


Why are we talking about sleep to your young person?

 5 minutes

Given the link between good sleep hygiene and positive mental health the goal of this programme is to inform young people about this relationship and to provide tools to either get their sleep back on track or to prevent sleep routines deteriorating.

- The consequences of lack of sleep handout (Appendix 15)


What happens when we sleep? – Sleep Architecture Short Film

 10 minutes

Introduce the short film; explain that this is an introduction to the mechanics of sleep – what happens when we fall asleep. The person speaking is a public health nurse, Jane; she is an expert on the subject of young people and sleep.

- Clarifying discussion using 'hypnogram' (Appendix 16)


Sleep Hygiene Short Film

 10 minutes

Introduce short film; explain that it is an overview of sleep habits which affect sleep.


- Handout on Sleep Hygiene Tips (Appendix 20)

How stress affects sleep and management techniques

 10 minutes


Describe the activities in this session for young people – what is stress; demands and resources; signs of stress; rumination. Choose one activity to run with parents

Physical Activity and Diet affecting Sleep

 5 minutes

Discuss how physical activity and diet affects sleep – ask parents to fill in one day of the diary which includes physical activity and food.


Supporting your young person to maximise benefit of the programme

 5 minutes

Discuss challenges with parents, explain that each week the young person will be asked to undertake a challenge that will assist them to improve their sleep hygiene or manage their stress. Suggest to parents that they discuss these challenges with their children each week and support them to engage, encouraging their child to complete the weekly diaries.

- Challenges List (Appendix 3)

Questions and Answers

 10 minutes

Challenges

THE UNDERLINED CHALLENGES ARE TO BE INCLUDED EACH WEEK.

- Practise meditation/relaxation each evening before going to sleep this week.
- Come up with a list of relaxing songs.
- No energy drinks for the duration of the programme
- Switch off phones at 10.00pm for two nights before going to sleep this week.
- Switch off any gaming console or TVs before 10.00pm for three nights before going to sleep this week.
- Practise the sleep hygiene tips each evening this week, e.g. showering, putting on pyjamas, making sure the room is not too warm, read a book or put on quiet music etc.
- Using the diary sheet, write down 1-2 examples of when you were stress during the week and say how it felt in your body.
- Try out the morning exercise routine three mornings this week.
- Try out the evening exercise routine three evenings at least two hours before sleep this week.
- Cut out all caffeinated drinks including tea and coffee in the hour before sleep each night this week.
- Ensure all food is eaten at least one hour before sleep this week.
- Use diary sheet to note moments of stress and how you managed it.
- Use diary sheet to keep track of your physical activity and food intake.
- Use diary sheets to keep track of your sleep patterns and challenges every day this week.



Programme Outline

INTRODUCTION

- Contract
- How is Your Sleep?
- Expectations and Concerns
- Statement of Commitment
- Challenges (every week)

SLEEP HYGIENE & SLEEP ARCHITECTURE

- Feedback from Challenges (every week)
- What is Sleep Architecture?
- Sleep and Emotional Health
- What is Sleep Hygiene?
- Meditation/Relaxation (every week)

SLEEP AND STRESS

- What is Stress?
- Balancing Demands and Resources
- Effects and Signs of Stress
- Rumination

PHYSICAL ACTIVITY AND DIET

- Daily Exercise Routines
- Checking Your Heart Rate
- Diet and Sleep

CLOSING

- Retesting
- Certificate of Completion
- Evaluation

Adolescent Sleep Hygiene Scale

Directions: Using the choices above, circle how often the above things have happened during the past month

Never – has not happened

Once in a while – happened 20% of the time

Sometimes – happened 40% of the time

Quite Often – happened 60% of the time

Frequently, if not always – happened 80% of the time

Always – happened 100% of the time

Scoring of the Adolescent Sleep Hygiene Scale (ASHS)

- Higher scores indicate better success on each of these dimensions of sleep hygiene.
- Response options are scored as follows: Never (6 points), Once in a while (5 points), Sometimes (4 points), Quite Often (3 points), Frequently, if not Always (2 points), Always (1 points)
- All items are reverse-coded except those with a * (item 27)

		Never (0%)	Once in a While (20%)	Sometimes (40%)	Quite Often (60%)	Frequently, if not Always (80%)	Always (100%)
DURING THE DAY...							
1.	...I take a nap that lasts more than 1 hour.	N	O	S	Q	F	A
2.	...I play or exercise for more than 20 minutes.	N	O	S	Q	F	A
AFTER 6:00 IN THE EVENING...							
3.	...I have drinks with caffeine (for example: cola, root beer, iced tea, coffee).	N	O	S	Q	F	A
4.	...I take a nap.	N	O	S	Q	F	A
5.	...I do some kind of physical activity (for example: exercise, play sports).	N	O	S	Q	F	A
6.	...I smoke or chew tobacco.	N	O	S	Q	F	A
7.	...I drink beer (or some other drinks with alcohol).	N	O	S	Q	F	A
DURING THE 1 HOUR BEFORE BEDTIME...							
8.	...I do things that make me feel calm or relaxed (for example: taking a hot bath/shower, listening to soft music, and reading).	N	O	S	Q	F	A
9.	...things happen that make me feel strong emotions (sadness, anger, excitement).	N	O	S	Q	F	A
10.	...I am very active (for example: playing outside, running, wrestling).	N	O	S	Q	F	A
11.	...I do things that make me feel very awake (for example: playing video games, watching TV, talking on the telephone).	N	O	S	Q	F	A
12.	...I drink more than 4 glasses of water (or some other liquid).	N	O	S	Q	F	A

Appendix 5

		Never (0%)	Once in a While (20%)	Sometimes (40%)	Quite Often (60%)	Frequently, if not Always (80%)	Always (100%)
I GO TO BED...							
13.	...and do things in my bed that keep me awake (for example: watching TV, reading).	N	O	S	Q	F	A
14.	...and think about things I need to do.	N	O	S	Q	F	A
15.	...feeling upset.	N	O	S	Q	F	A
16.	...and replay the day's events over and over in my mind.	N	O	S	Q	F	A
17.	...and worry about things happening at home or at school.	N	O	S	Q	F	A
18.	...with a stomach-ache.	N	O	S	Q	F	A
19.	...feeling hungry.	N	O	S	Q	F	A
I FALL ASLEEP...							
20.	...while listening to loud music.	N	O	S	Q	F	A
21.	...while watching TV.	N	O	S	Q	F	A
22.	...in a brightly lit room (for example: the overhead light is on).	N	O	S	Q	F	A
23.	...in one place and then move to another place during the night.	N	O	S	Q	F	A
24.	...in a room that feels too hot or too cold .	N	O	S	Q	F	A
I SLEEP...							
25.	...in a home where someone smokes cigarettes, cigars, or a pipe.	N	O	S	Q	F	A
I...							
26.	...get too little sleep.	N	O	S	Q	F	A
27.	...use a bedtime routine (for example: bathing, brushing teeth, and reading).	N	O	S	Q	F	A
28.	...use my bed for things other than sleep (for example: talking on the telephone, watching TV, playing video games, doing homework).	N	O	S	Q	F	A
29.	...check my clock several times during the night.	N	O	S	Q	F	A
DURING THE SCHOOL WEEK, I...							
30.	...stay up more than 1 hour past my usual bedtime. My usual school night bedtime is _____:_____ am pm	N	O	S	Q	F	A
31.	..."sleep in" more than 1 hour past my usual wake time. My usual school day wake time is _____:_____ am pm	N	O	S	Q	F	A
ON WEEKENDS, I...							
32.	...stay up more than 1 hour past my usual bedtime. My usual weekend bedtime is _____:_____ am pm	N	O	S	Q	F	A
33.	..."sleep in" more than 1 hour past my usual wake time. My usual weekend wake time is _____:_____ am pm	N	O	S	Q	F	A

Sleep Knowledge Quiz

Q.1 Name three reasons why sleep is important.

1. _____
2. _____
3. _____

Q.2 How many hours sleep does an adolescent need?

Q.3 What happens to your body during *deep* sleep?

- a. you get some rest
- b. your body shuts down so you can dream
- c. growth hormone is at its highest and the body repairs itself after the day

Q.4 Name three things you should avoid before going to sleep

1. _____
2. _____
3. _____

Q.5 Name three things you can do to help you get better sleep

1. _____
2. _____
3. _____

Q.6 What hormone is released in the body to help us get to sleep?

- a. testosterone
- b. adrenaline
- c. melatonin

Q.7 Name three resources a person might have that would help them to manage stress?

1. _____
2. _____
3. _____

Q.8 What should your heart rate be when you exercise?

Q.9 How much time should you spend doing physical exercise every day?

Q.10 How does cigarettes and alcohol affect your sleep?

- a. reduces deep sleep and causes broken sleep
- b. makes you have crazy dreams
- c. it does not affect your sleep

Paediatric Daytime Sleepiness Scale (PDSS)

Scoring:

- 4 = Very often, Always
- 3 = Often, Frequently
- 2 = Sometimes
- 1 = Seldom
- 0 = Never



Please answer the following questions as honestly as you can by circling one answer.

1. How often do you fall asleep or get drowsy during class periods?

Always Frequently Sometimes Seldom Never

2. How often do you get sleepy or drowsy while doing your homework?

Always Frequently Sometimes Seldom Never

3. *Are you usually alert most of the day?

Always Frequently Sometimes Seldom Never

4. How often are you ever tired and grumpy during the day?

Always Frequently Sometimes Seldom Never

5. How often do you have trouble getting out of bed in the morning?

Always Frequently Sometimes Seldom Never

6. How often do you fall back to sleep after being awakened in the morning?

Always Frequently Sometimes Seldom Never

7. How often do you need someone to awaken you in the morning?

Always Frequently Sometimes Seldom Never

8. How often do you think that you need more sleep?

Always Frequently Sometimes Seldom Never

**reverse score this item*

Statement of Commitment

I, _____ (insert your name here) to hereby commit to taking part in this 8 week sleep programme so that I can make positive changes to my own sleep patterns when the time is right for me.

I commit to taking part to the best of my ability.

Signed _____

Witnessed By _____

Date _____



Progressive Muscular Relaxation Script

We will begin now. Make yourself comfortable in the chair, or if there is space you can lie on the floor; if you are sitting, put your feet on the ground and rest your hands in your lap. Close your eyes; if you are not comfortable doing this, pick a point in the room and let your eyes focus softly on this point throughout the exercise. If your mind wanders bring your attention back to the exercise.

We will begin by focusing our attention onto our hands...

Hands Close your hands into fists and tighten the muscles there. Then allow them to open slowly. Notice the change from tension to relaxation in your hands and allow the muscles in this part of your body to become more and more relaxed (repeat x 2).

Arms Bend your arms at the elbow and touch your shoulders with your hands; then allow them to return to their resting position, tightening the muscles in your upper arms. Notice the change from tension to relaxation in your arms and allow this change to continue further and further still, so the muscles of your arms become more and more relaxed (repeat x 2).

Shoulders Raise your shoulders up to your ears. Then, allow time to return to the resting position. Notice the change from tension to relaxation in your shoulders, and allow this change to continue further and further still, so the muscles of your shoulders become more and more relaxed (repeat x 2).

Legs Point your toes downwards tightening your muscles in the fronts of your legs and then allow them to return to the resting position. Notice the change from tension to relaxation in the fronts of your legs and allow this change to continue further and further still so that the muscles in the fronts of your legs become more and more relaxed (repeat x 2).

Point your toes upwards and then allow them to return to the resting position. Notice the change from tension to relaxation in the muscles in the backs of your legs and allow this change to continue further and further still so the muscles in the backs of your legs become more and more relaxed (repeat x 2).

Stomach Take a deep breath and hold it for three seconds, tensing the muscles in your stomach as you do so. Then breathe out slowly. Notice the change from tension to relaxation in your stomach muscles and allow this change to continue further and further still so your stomach muscles become more and more relaxed (repeat x 2).

Face Clench your teeth tightly together. Then relax. Notice the change from tension to relaxation in your jaw and allow this change to continue further and further still, so the muscles in your jaw become more and more relaxed (repeat x 2).

Wrinkle your nose up. Then relax. Notice the change from tension to relaxation in the muscles around the front of your face and allow this change to continue further and further still so the muscles of your face become more and more relaxed (repeat x 2).

Shut your eyes tightly. Then relax. Notice the change from tension to relaxation in muscles around your eyes and allow this change to continue further and further still so the muscles around your eyes become more and more relaxed (repeat x 2).

All over Now that you've done all your muscle exercises, check that all areas of your body are as relaxed as can be. Think of your hands and allow them to relax a little more. Think of your arms and allow them to relax a little more. Think of your shoulders and allow them to relax a little more. Think of your legs and allow them to relax a little more. Think of your stomach and allow it to relax a little more. Think of your face and allow it to relax a little more.

(Facilitator - Acknowledge that some may feel giddy or nervous and explain that this is okay, but to try and come back to the activity as soon as they can. Read the meditation script to the group using a soft quiet voice).

Relaxation - Visualising Exercise

We will begin by making yourself comfortable in the chair or if there is space you can lie on the floor; if sitting, put your feet on the ground and your hands on your lap. Close your eyes, if you are not comfortable doing this, pick a point in the room and let your eyes focus softly on this point throughout the exercise. If your mind wanders bring your attention back to the exercise. (Acknowledge that some may feel giddy or nervous and explain that this is okay to try and come back to the activity as soon as they can. Read the meditation script to the group using a soft quiet voice).

Create an image in your mind of you on a beach by the seaside feeling the sun's warmth on you

Make a picture in your mind of the sandy beach and the warming sun

As the sun warms you, you feel more and more calm and relaxed

As the sun warms your body you feel more and more calm and relaxed

As the sun warms your body you feel more and more calm and relaxed

Imagine the sky is a clear, clear blue. Above you, you can see a small white seagull drifting across the sky flying away into the distance. As the seagull drifts away you feel more and more relaxed.

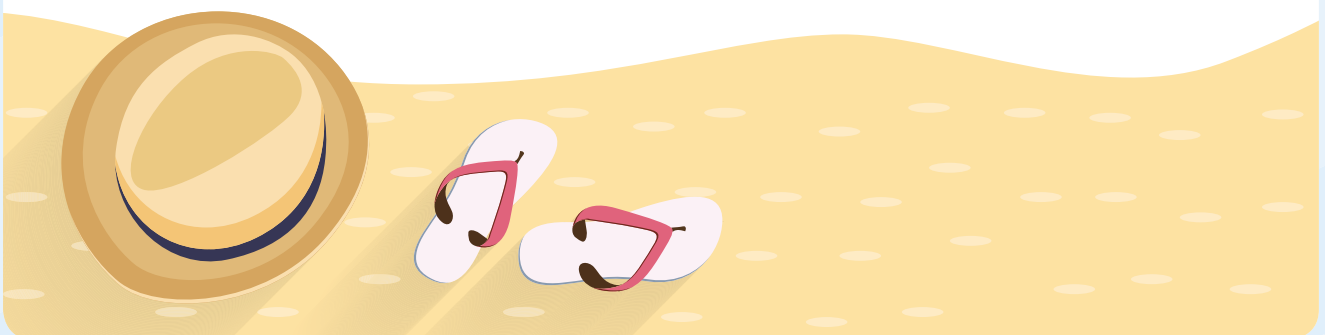
It is drifting away and you feel more and more calm

It is drifting away and you feel more and more calm

As the sun warms you, you feel more and more relaxed






As the seagull drift away you feel more and more relaxed

Note for group leader: At the end, wait for 30 seconds and then say "When you are ready open your eyes feeling more relaxed, calmer and refreshed"











WEEKLY DIARY SHEETS

	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
 Hrs of sleep							
 Wake up time							
 Fall asleep time							
 Meditation/ Relaxation							
 Challenges							

Other Notes



WEEKLY DIARY SHEETS INCLUDING STRESS

	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
 Hours of sleep							
 Wake up time							
 Fall asleep time							
 Meditation/ Relaxation							
 Examples of Stress Felt During the Week and How it Felt in Your Body							
 Challenges							

Other Notes

WEEKLY DIARY SHEETS INCLUDING PHYSICAL ACTIVITY AND DIET

Sample



	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
Hours of sleep	9	5					
Wake up time	7.30am	8.30am					
Fall asleep time	10.30pm	3.30am					
Meditation/ Relaxation	YES	NO					
Challenges: <ul style="list-style-type: none"> No energy drinks Switch off phones No games/tv 	NO YES YES	YES NO NO					
Exercise	Exercise routine, morning and evening	NO					
Breakfast	2 Weetabix and OJ	Coco pops					
Lunch	Tuna sandwich and yoghurt	Sausage roll					
Dinner	Roast Chicken, spuds and vegetables	Pizza					
Snacks	Fruit, nuts, health bar	Crisps, chocolate, fizzy drink					
Glasses of Water	8	2					
How I Felt Today...							

Weekly Diary Sheets including Physical Activity and Diet

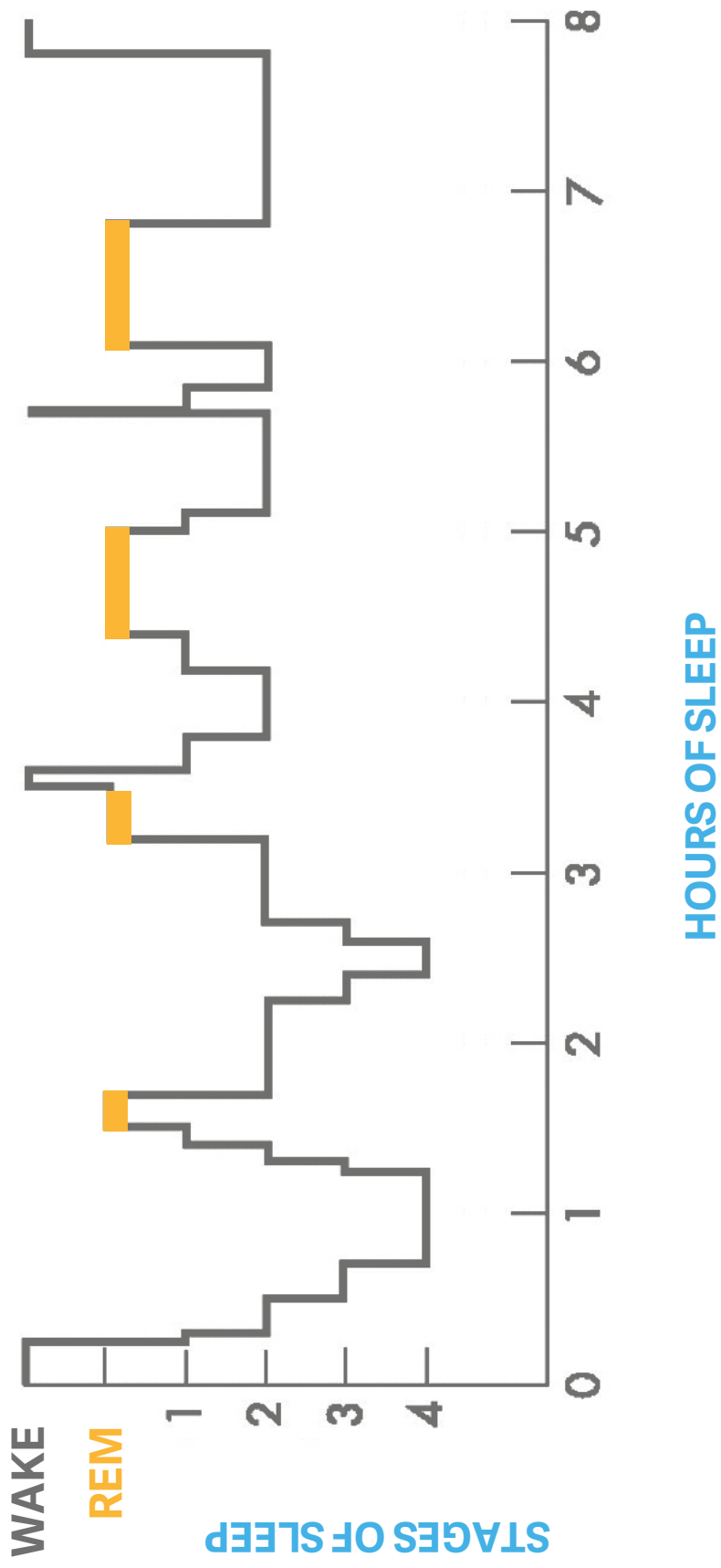
	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
Hrs of sleep							
Wake up time							
Fall asleep time							
Meditation/ Relaxation							
Challenges: <ul style="list-style-type: none"> • No energy drinks • Switch off phones • No games/tv 							
Exercise							
Breakfast							
Lunch							
Dinner							
Snacks							
Glasses of Water							
How I Felt Today...							

Consequences of Lack of Sleep for Teenagers

- Concentration difficulties
- Mentally 'drifting off' in class
- Shortened attention span
- Memory impairment
- Poor decision making
- Lack of enthusiasm
- Moodiness and aggression
- Depression
- Risk-taking behaviour
- Slower physical reflexes
- Clumsiness, which may result in physical injuries
- Reduced sporting performance
- Reduced academic performance
- Increased number of 'sick days' from school because of tiredness
- Truancy/Mitching



HYPNOGRAM



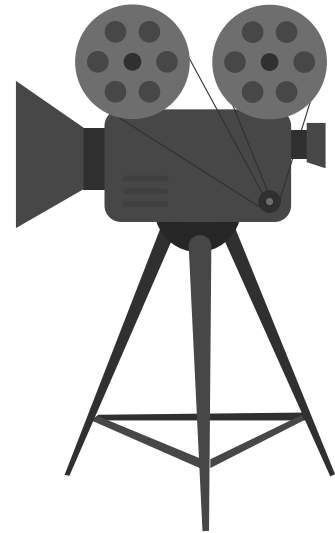
Transcript of Sleep Architecture Short Film

"This is our Hypnogram and it basically explains how we sleep and the cycles we go through during the night. We have 2 types of sleep – REM sleep and Non REM sleep. REM sleep – Rapid Eye Movement sleep – is our dream sleep. Non REM sleep has 3 stages; we sleep in 60-90 minute cycles during the night, drifting from Non REM sleep to REM.

Stage 1: This stage is about 10-15 minutes long and it is the time when we are just beginning to drift off and feeling really comfortable. We might jerk awake for a short time during this stage but we are still drifting into sleep.

Stage 2: We then very briefly go into stage 2 sleep and then at the beginning of the night we go into our deep, deep stage 3 sleep.

Stage 3: After stages 1 and 2 the first 3 hours of night time is our stage 3 sleep which is our deep sleep. During our deep sleep our immune system is highest. In children, growth hormone is at its highest and it is where all our body repair happens.



When we go into our first cycle, we sleep for about 60 minutes and then we very briefly come out of the first stage and have a tiny little bit of dream sleep and then we go back into our second cycle of deep sleep.

Sometimes, we don't really know why, some children if they are going to sleep walk it is usually just as they are coming out of the 1st cycle or if they have a sleep terror, it is always about 1.5 hours after they have gone to sleep.

So when we've had our first two cycles of sleep we then go into stage 2 sleep which is a lighter non REM sleep and we go through cycles through the night of going into our REM sleep, we wake, we go into our type two sleep and we go into our REM sleep, type 2 sleep, REM sleep, we wake.

We do that through the night waking about six times through the night but we just turn over and go back to sleep – we're not aware of it.

When we are in our dream sleep which is our Rapid Eye Movement sleep, we have what we call muscle inertia, which means we cannot move. So the only muscles that we are working when we are in our REM sleep are our thoracic muscles, our eye muscle.

As we go through the night the amount of REM sleep we have gets longer and longer so as we progress we get more and more dream sleep. While we are in our REM sleep, our dream sleep, it is rather like rebooting the computer. The brain is putting everything away we've learnt through the day and storing it in all the appropriate places."

Sleep and Emotional Health Character Cards

Appendix 18

<p>I go to bed at 10pm and read for half an hour before falling asleep</p>	<p>I stay up playing games until 1am every night</p>
<p>I go to bed at the same time every night (11pm) and get up at the same time every morning (8am) even at weekends</p>	<p>It takes me ages to go to sleep because I am worried about something that happened during the day and when I wake during the night I start thinking about it again.</p>
<p>I hate school so I spend my nights worrying about having to go in the next day</p>	<p>I usually eat my dinner really late because I've been out doing martial arts training until 10pm so I don't really sleep until 12am</p>
<p>I usually have 9 hours sleep and wake up feeling ready to go</p>	<p>I am always tired and getting in trouble for not paying attention at school</p>
<p>I'm tired on Mondays sometimes because I like sleeping in at weekends and find it hard to go to sleep early on Sunday night</p>	<p>If I'm annoyed going to bed I find it difficult to sleep and I usually wake up tired and cranky the next morning</p>

<p>Name: Age: Healthy/Unhealthy: How are they sleeping? How is their mood? How might they feel the next day in school</p>	<p>Name: Age: Healthy/Unhealthy: How are they sleeping? How is their mood? How might they feel the next day in school</p>
<p>Name: Age: Healthy/Unhealthy: How are they sleeping? How is their mood? How might they feel the next day in school</p>	<p>Name: Age: Healthy/Unhealthy: How are they sleeping? How is their mood? How might they feel the next day in school</p>
<p>Name: Age: Healthy/Unhealthy: How are they sleeping? How is their mood? How might they feel the next day in school</p>	<p>Name: Age: Healthy/Unhealthy: How are they sleeping? How is their mood? How might they feel the next day in school</p>
<p>Name: Age: Healthy/Unhealthy: How are they sleeping? How is their mood? How might they feel the next day in school</p>	<p>Name: Age: Healthy/Unhealthy: How are they sleeping? How is their mood? How might they feel the next day in school</p>
<p>Name: Age: Healthy/Unhealthy: How are they sleeping? How is their mood? How might they feel the next day in school</p>	<p>Name: Age: Healthy/Unhealthy: How are they sleeping? How is their mood? How might they feel the next day in school</p>

The Children's Sleep Needs Chart

How Much Sleep Do You Really Need?

Age	Sleep Needs
Newborn (0-2 months)	12 to 18 hours
Infants (3-11 months)	14 to 15 hours
Toddlers (1-3 years)	12 to 14 hours
Preschoolers (3-5 years)	11 to 13 hours
School-age children (5-10 years)	10 to 11 hours
Teen (10-17 years)	8.5 to 9.25 hours
Adults	7 to 9 hours

Source: National Sleep Foundation



Sleep Hygiene Tips

TIP 1: Keep a regular sleep schedule

- Set a regular bedtime – go to bed at the same time every night. Try not to break this routine on weekends, help your body adjust by making the change in small daily increments, such as 15 minutes earlier or later each day.
- Wake up at the same time every day
- Nap to make up for lost sleep - but be smart about it, take naps only in early afternoon and limit it to 30 minutes
- Fight after-dinner drowsiness – get off the couch and do something mildly stimulating to avoid falling asleep such as washing the dishes, calling a friend or getting clothes ready for the next day.

TIP 2: Naturally regulate your sleep-wake cycle

- Spend more time outside during daylight
- Let as much light into your home as possible
- Turn off your television and computer at least two hours before going to bed – listen to music or audio books instead or practise relaxation exercises
- Don't read from a backlit device at night (such as an iPad)
- Change your light bulbs – use low-wattage bulbs instead.
- When it's time to sleep, make sure the room is dark – you may need to wear an eye mask

TIP 3: Create a relaxing bedtime routine

- Keep noise down – you may need to use earplugs
- Keep your room cool – if the room is too cool though, or too hot, it can interfere with quality sleep.
- Make sure your bed is comfortable.
- Relaxing bedtime rituals to try – reading a book or magazine by a soft light, take a warm bath, listen to soft music, and do some easy stretches.



TIP 4: Eat right and get regular exercise

- Stay away from big meals at night – try to make dinnertime earlier in the evening and avoid heavy rich foods within two hours of bed. Fatty foods take a lot of work for your stomach to digest and make keep you up, similarly spicy or acidic foods may cause stomach trouble and heartburn.
- Cut down on caffeine - and cut it out after lunch time
- Avoid drinking too many liquids in the evening
- Quit smoking – nicotine is a stimulant which disrupts sleep
- Exercise regularly – 30 minutes of daily activity helps, more rigorous exercise should happen earlier in the day and relaxing exercise such as yoga or gentle stretching can help promote sleep.

TIP 5: Get anxiety and stress in check

- Relaxation techniques for better sleep – deep breathing, progressive muscle relaxation, visualising a peaceful restful place.

TIP 6: Ways to get back to sleep

- Stay out of your head – try not to stress over the fact that you're awake or your inability to fall asleep again instead focus on the feelings and sensations in your body
- Make relaxation your goal, not sleep – remind yourself that although they're not a replacement for sleep, rest and relaxation still help rejuvenate your body.
- Do a quiet non-stimulating activity – if you've been awake for more than 15 minutes, get out of bed keeping the lights dim, get a glass of water and get back into bed
- Postpone worrying – write a note of it on paper and tell yourself you will deal with it in the morning.

Appendix 21



Transcript of Sleep Hygiene Short Film

"Sleep Hygiene – Tips on sleeping better.

Research has shown that teenagers are only sleeping from 7-8 hours per night at the most and it is known that they should be sleeping for about 9.5 – 10 hours a night because during our teenage years there is a high amount of brain maturity happening and teenagers need the extra sleep.

Sleep is controlled by two processes the circadian process which we know as our biological clock and the homeostatic process. The circadian process is controlled by environmental cues called 'Zeitgebers' which is German for 'time givers'.

There are 5 cues and the main one is the light dark cycle. Light Dark Cycle - The circadian rhythm or our biological clock is slightly longer than 24 hours and it is the morning light that regulates and controls it and brings it into our 24 hour cycle.

It is important that when we get up in the morning that we go into the lightest room possible as soon as we wake up. We should eat breakfast in a bright room. We should try not to wear sunglasses to school and if possible try to have a walk in daylight hours.

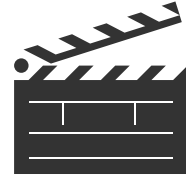
The other side of the light dark cycle is that in the evenings it begins to get dark. We have light receptors in our eyes and as the lack of light happens this sends messages to our brain which then sends it to our Pineal gland to produce melatonin which is our sleep hormone.

If you are watching television or you are playing a game on the computer or on your phone you have an incredible amount of light going into your eyes and therefore you do not produce melatonin which is your sleep hormone. So the recommendation is that you should not watch any television, computer games or anything like that for at least an hour before bed. And if you find that you are waking very early in the morning some people actually find it much better if they have blackout blinds on their curtains so the light doesn't come in especially in the summer when it's light very early.

Routine Meal Times - One of the other things that controls our biological clock is routine meal times so try to have regular meals at set times and don't eat a heavy meal last thing at night because then it is very difficult when you're trying to sleep when you are digesting it.

Mealtime routine is very important and routine controls our biological clock and though we recommend little children have a very set routine I think it is still very important as teenagers that you

have a routine, that you go to bed at a specific time if possible, that you would have your shower, do all the things you need to and you go to bed and you read. We tend to find that most of us have a set routine when we're going to bed and it is important we stick to this.



Temperature also controls biological clock so it is important that your bedroom is not too cold or too hot and that you are comfortable when you are going to bed.

Noise, I know some houses can be noisy, but if possible have a quiet bedroom. Music, some people find that they can go to sleep better if they have music, that's fine if it is relatively quiet.

Caffeine - The other process that controls our sleep is the homeostatic process – it is the mechanism that drives the body to sleep. The process is influenced by the accumulation of sleep promoting chemicals. These chemicals can be blocked by caffeine. We all know that caffeine affects our sleep, this is how caffeine works. It is important 4-6 hours before going to bed that we do not have any drinks or food with caffeine in them. We all know that caffeine is in coffee, tea, stimulant sports drinks, fizzy drinks, chocolate, chocolate drinks and some over the counter medication. How we react to caffeine is very individual and some people are more susceptible than others.

Exercise - The other thing that is important to promoting sleep is to avoid rigorous exercise in the hours before going to bed. Exercise in the day helps to achieve a healthy sleep pattern and tiredness at night. Exercise near your bedtime can have a negative impact on your chances of going to sleep as your adrenalin levels might be very high making it much harder for you to go to sleep.

Sleep Routine - Another thing with teenagers that is very important is trying not to sleep in at the weekends. If we sleep in until 12 o'clock or later we're not going to feel tired when we go to bed and then Sunday evening we're not going to bed till much later and come Monday morning we find it incredibly hard to get up and we are very groggy in school. It is exactly the same as jet lag. It is acceptable to sleep in during the weekends but try not to make it for longer than 2 hours. So if you are getting up at 7 o'clock most weekdays try to actually get up at about 9 o'clock at weekends and try to keep within that 2 hours window of your normal waking time."

Transcript of Effects of Stress Short Animation

"We've heard of stress, we have an idea what causes stress but do we actually know how it affects our bodies physically?"

Let's pick a scenario

You are in school, sitting in the canteen on your own waiting for the bell to go, staring off into the distance thinking about the class ahead when suddenly you are distracted by someone, it's the way they are moving – like they are looking for trouble – then you notice the look on their face – like they are going to kill someone – then you notice that they are looking at you and suddenly you feel how alone you are and worry about who is going to help get you out of this, thoughts come rapidly, what does he want with me, he doesn't even know me, he's in some of my classes – he's always in trouble in class, why is he coming towards me, what have I done, what is he going to do, should I get up and run, maybe he doesn't want me, crap he has just pointed at me

Now your body is recognising signs of stress, ever heard of fight or flight? The body is preparing for either scenario; the panic button has been pressed. Immediately the total resources of the body immobilise, breathing is faster and deeper and the lungs, by their increased activity, supply more life giving oxygen to the bloodstream. The liver, now releases large amounts of sugar into the bloodstream for extra energy, the adrenal glands also step up production, pouring out more hormones to stimulate the heart muscle which in turn reacts with a higher rate of pumping. In the digestive organs certain arteries constrict, needing less blood so this extra blood is directed to the muscles needed for flight or fight. And all this happens within a split second.

He says 'hey you are in my next class, I forget where it is can you tell me?' 'Sure no problem' phew all that freaking out for nothing, OMG he knows I am in his class, he's kinda cute.

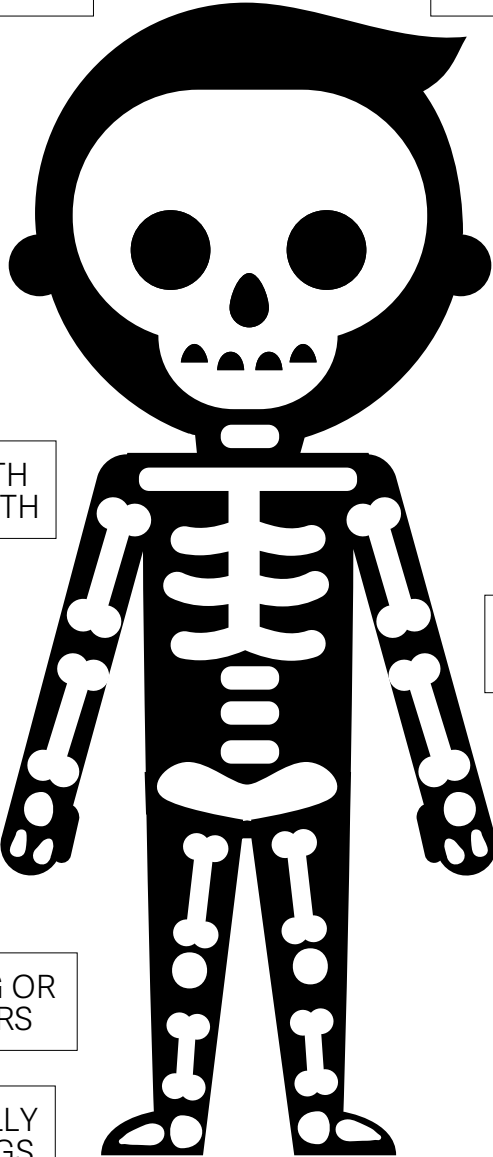


So your poor body has extended all that effort getting ready for fight or flight for nothing. How many times a day do perceived stresses, which are in fact just consequences of your thoughts, put this pressure on your body? And what happens if this continues over a long period of time? What happens if these thoughts are running through your head when you are trying to sleep?"



Stress Skeleton Diagram

Think about how you tend to feel physically when you get anxious. Highlight or colour in any of the following that apply to you.



TINGLING OR NUMB LIPS

HEADACHES

HAIR LOSS

DIZZINESS

RED FACE

CHOKING SENSATION

DRY MOUTH

LUMP IN THROAT

RINGING IN EARS

HEART RACING OR PALPITATIONS

GRINDING TEETH

CHEST TIGHTNESS OR PAIN

RAPID OR SHALLOW BREATHING

STOMACH ACHE OR BUTTERFLIES

SHORTNESS OF BREATH OR CAN'T CATCH BREATH

SKIN PROBLEMS

NAUSEA

FREQUENT URINATION

WEIGHT LOSS OR GAIN

LACK OF APPETITE

BOWEL PROBLEMS

COLD

HOT

SHAKING OR TREMORS

TIREDNESS

SLEEP DISTURBANCE

JELLY LEGS

FAINTING

SWEATING

TWITCHES OR TICS

MUSCLE PAIN, ACHE OR TENSION

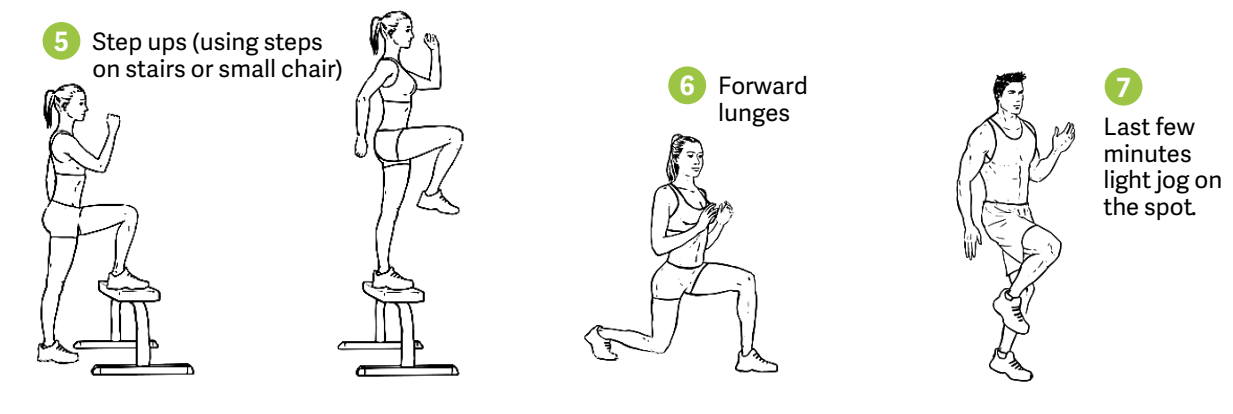
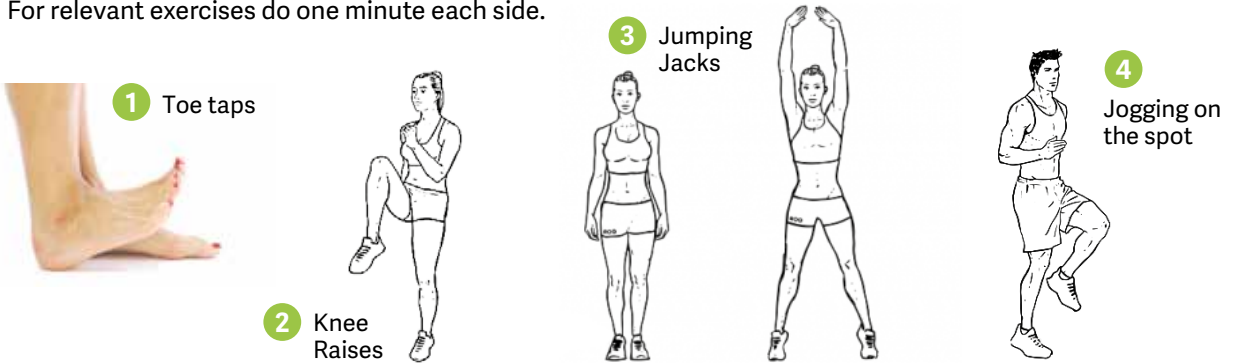
NUMBNESS OR TINGLING IN LIMBS

Reference: Collins Donnelly, K. (2013) Starving the Anxiety Gremlin

Daily Exercise Routines

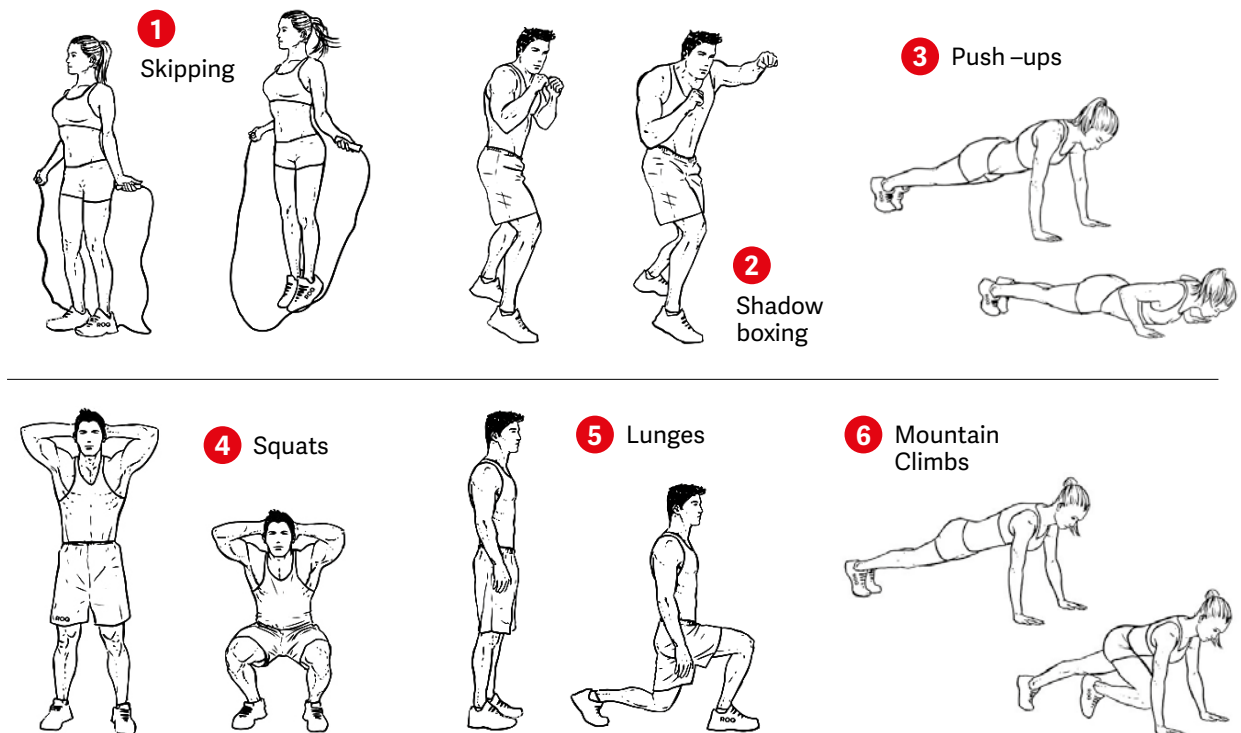
Morning routine – 15 minutes: each exercise to be done for two minutes.

For relevant exercises do one minute each side.



Evening routine – 15 minutes: each exercise to be done for two minutes.

For relevant exercises do one minute each side.

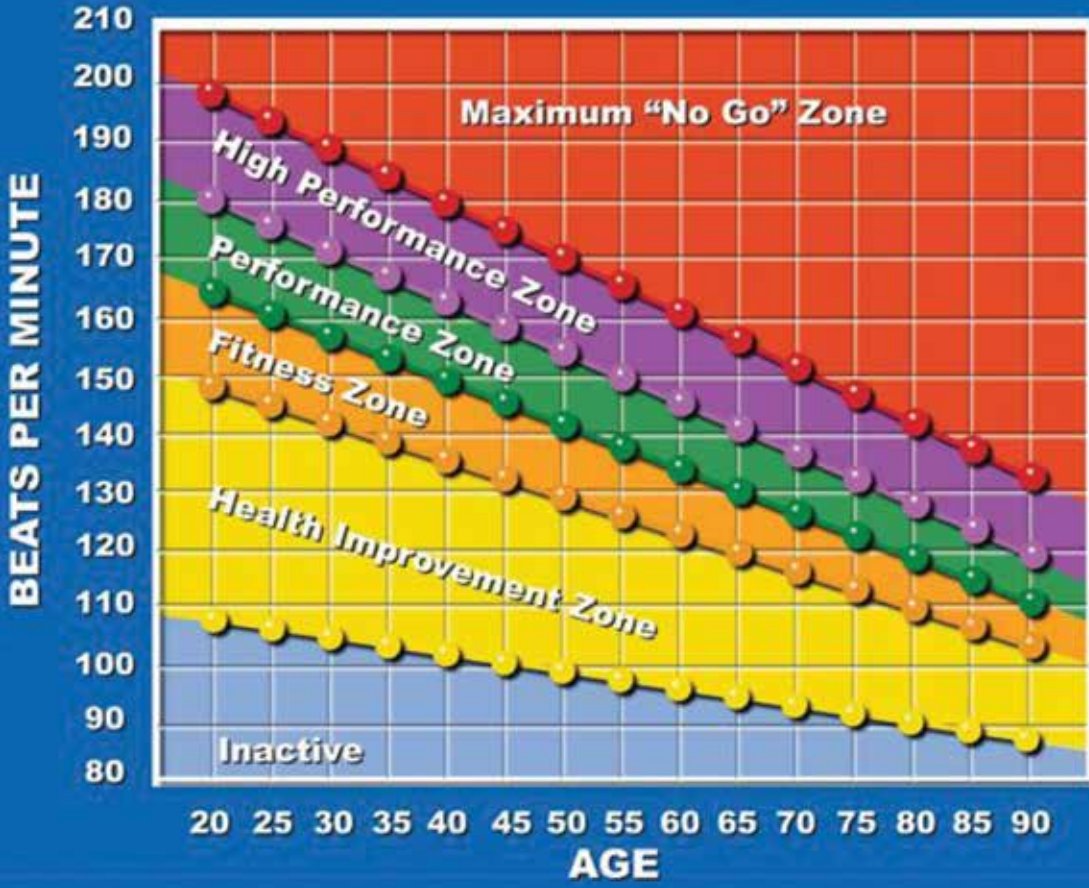


Heart Rate Chart

Age	18-25	26-35	36-45	46-55	56-65	65+
Athlete	49-55	49-54	50-56	50-57	51-56	50-55
Excellent	56-61	55-61	57-62	58-63	57-61	56-61
Good	62-65	62-65	63-66	64-67	62-67	62-65
Above Average	66-69	66-70	67-70	68-71	68-71	66-69
Average	70-73	71-74	71-75	72-76	72-75	70-73
Below Average	74-81	75-81	76-82	77-83	76-81	74-79
Poor	82+	82+	83+	84+	82+	80+

www.newhealthadvisor.com

FITNESS HEART RATE



★ *Certificate
of Achievement* ★

Awarded to _____

For the completion of

The Sleep Programme

Signed: _____

Date: _____



Bibliography

1. Advocates for Youth & Girl's Best Friend Foundation (2005) *Creating Safe Space for GLBTQ Youth: A Toolkit*. Washington DC.
Available at: <http://www.advocatesforyouth.org/storage/advfy/documents/safespace.pdf>
2. Collins Donnelly, K. (2013) *Starving the Stress Gremlin: A Cognitive Behavioural Therapy Workbook on Stress Management for Young People (Gremlin and Thief CBT Workbooks)*. Jessica Kingsley Publishers.
3. Department of Children and Youth Affairs (2015) *National Youth Strategy 2015-2020*. Government Publications: Dublin
Available at: <https://www.dcy.gov.ie/documents/publications/20151008NatYouthStrat2015to2020.pdf>
4. Department of Children and Youth Affairs (2014) *Better Outcomes, Brighter Futures: The National Policy Framework for Children & Young People 2014-2020*. Government Publications: Dublin
Available at: https://www.dcy.gov.ie/documents/cypp_framework/BetterOutcomesBetterFutureReport.pdf
5. Department of Children and Youth Affairs (2014) *Value for Money and Policy Review of Youth Programmes*. Government Publications: Dublin
Available at: <https://www.dcy.gov.ie/documents/publications/20141223ValueforMoneyYouthProjects.pdf>
6. Department of Health (2013) *Healthy Ireland; A Framework for Improved Health and Wellbeing 2013 – 2025*. Government Publications: Dublin
Available at: <http://health.gov.ie/wp-content/uploads/2014/03/HealthyIrelandBrochureWA2.pdf>
7. Diaz, K. (2016) *Smoking and Sleep* [Blog] American Sleep Association. Available at: <https://www.sleepassociation.org/blog-post/smoking-and-sleep/> [Accessed 12 June 2017]
8. Great Group Games. 2017. *Great Group Games* [ONLINE] Available at: <http://www.greatgroupgames.com/> [Accessed 12 June 2017]
9. Health & Safety Executive. 2001. *Tackling Work-related Stress: A Manager's Guide to Improving and Maintaining Employee Health and Well-being*. HSE Books.
10. Health Service Executive, Tobacco Team, Health Promotion Service (Tallaght) (2010) *Quit 4 Youth*. HSE Dublin.
11. Heinonen, R. (2009) *ECYC Game Book*. European Confederation of Youth Clubs. Belgium.
Available at: https://www.ecyc.org/sites/default/files/ecyc_game_book.pdf
12. Kaye Sellman, T. (2017). *What is Sleep Architecture (Stages and Cycles)*. [Blog] Sleep Resolutions.
Available at: <https://www.sleepresolutions.com/blog/what-is-sleep-architecture-stages-and-cycles> [Accessed 12 Jun. 2017].
13. Kuhn, C, Swartzwelder, S., Wilson, W., (2014) *Buzzed: The Straight Facts about the Most Used and Abused Drugs from Alcohol to Ecstasy*. W.W. Norton & Co. 4th Ed.
14. National Sleep Foundation. 2017. *National Sleep Foundation – Sleep Hygiene* [ONLINE]
Available at: <https://sleepfoundation.org/sleep-topics/sleep-hygiene> [Accessed 12 June 2017]
15. National Youth Council of Ireland & Irish Heart Foundation (2010). *Healthy Eating Active Living, A Resource for those Working with Young People in Youth Work Settings*.
Available at: http://www.youthhealth.ie/sites/youthhealth.ie/files/HEAL_NYCI_IHF_2010.pdf
16. Reference.com. *How many thoughts do we have per minute?* [ONLINE] Available at: <https://www.reference.com/world-view/many-thoughts-per-minute-cb7fcf22ebbf8466> [Accessed 12 June 2017]
17. Safefood & Irish Nutrition & Dietetic Institute. *Fuel Your Body: For the Teenage Sports Person*.
Available at: http://www.safefood.eu/SafeFood/media/SafeFoodLibrary/Documents/Publications/Consumer/M10005-SAFEFOOD_Teen-Sport-Leaflet_ROI_WEB.pdf
18. Senior, L & Reddy, M (2002) *Stress: Managing the Business Risk*. ICAS Ltd.
19. Spunout.ie. 2015. *Common Myths About Sleep* [ONLINE]
Available at: <http://spunout.ie/health/article/common-myths-about-sleep> [Accessed 12 June 2017]
20. Wetter, TB. (1994) *The Relation Between Cigarette Smoking and Sleep Disturbance*. Pubmed. NCBI
Available at: <https://www.ncbi.nlm.nih.gov/pubmed/8078854>

Web Resources

www.alcoholireland.ie
www.askaboutalcohol.ie
www.aware.ie
www.dotbe.org
www.drugsandalcohol.ie
www.education.ie
www.foroige.ie
www.getirelandactive.ie
www.yourmentalhealth.ie

www.headspace.com
www.healthpromotion.ie
www.indi.ie
www.nyci.ie
www.spunout.ie
www.ie.reachout.com
www.sleepfoundation.org
www.sollihulapproachparenting.com

Other Related Reading

Babson, M.A. & Bonn-Miller, M. (2014) *Sleep Disturbances: Implications for Cannabis Use, Cannabis Use Cessation, and Cannabis Use Treatment*. Springer International Publishing. Available at: https://www.researchgate.net/publication/260480152_Sleep_Disturbances_Implications_for_Cannabis_Use_Cannabis_Use_Cessation_and_Cannabis_Use_Treatment

Bernert, R.A. & Joiner, T.E. (2007) Sleep Disturbances and Suicide Risk: A Review of the Literature. PubMed. NCBI. Available at: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2656315/>

Mastin, L. (2013) How Sleep Works: The Two Process Model of Sleep Regulation [ONLINE] Available at: https://www.howsleepworks.com/how_twoprocess.html [Accessed 12 June 2017]

Mindel, J.A. (2009) *A Clinical Guide to Pediatric Sleep: Diagnosis and Management of Sleep Problems*. 2nd Ed. Lippincott, Williams & Wilkins.

National Sleep Foundation (2006) *Sleep-Wake Cycle: Its Physiology and Impact on Health*. National Sleep Foundation. Washington. Available at: <https://sleepfoundation.org/sites/default/files/SleepWakeCycle.pdf>

National Sleep Foundation (2000) Adolescent Sleep Needs and Patterns: Research Report & Resource Guide. National Sleep Foundation. Washington. Available at: https://sleepfoundation.org/sites/default/files/sleep_and_teens_report1.pdf

Popova, M. (2013) *Sleep and the Teenage Brain*. [ONLINE]. Available at: <http://bmcpediatr.biomedcentral.com/articles/10.1186/1471-2431-12-189> [Accessed 12 June 2017]

Reachout.com (2017) Sleeping Problems. [ONLINE] Available at: <http://ie.reachout.com/getting-help-2/minding-your-mental-health/sleeping-problems/> [Accessed 12 June 2017]

Tan, E., Healey, D., Gray, A.R., Gallan B.C. (2012) *Sleep hygiene intervention for youth aged 10 to 18 years with problematic sleep: a before-after pilot study*. BioMed Central Ltd. Available at: <http://bmcpediatr.biomedcentral.com/articles/10.1186/1471-2431-12-189>

Notes

