Better Sleep Checklist			mes		ften
UI Employee Assistance Program	Never	Seldom	Sometimes	ten	Very Often
University of Iowa Human Resources	ž	Se	So	ō	ž
Section 1: Barriers to Good Sleep					
I use a device with a bright (blue) screen in the hour before bed (i.e., smartphone, laptop, etc.).					
When I cannot sleep, I stay in bed and keep trying.					
I often go to bed when still angry or experiencing intense emotions from incidents earlier in the day or evening.					
If I have trouble falling asleep, I sleep longer the next morning to make up for lost sleep.					
My evenings before going to bed are very active.					
I use the bedroom at night for activities other than sleep and intimacy (i.e., watching TV, exercising, talking on the phone or texting or reading).					
My bedroom is noisy.					
My cell phone is on and I can hear texts or messages coming through at night.					
I try to fall asleep watching television.					
I have a different bedtime each night due to work or other activities. I have an evening meal with an hour or two of going to bed.					
I have a drink containing alcohol at bedtime to try to promote sleep.					
I smoke cigarettes and do so to calm myself before going to bed.					
I am hungry when I go to bed.					
Section 2: Promoting Better Sleep					
I have a relaxing routine before sleep.					
I practice relaxation during the day (e.g. relaxed breathing, listening to relaxing music, practicing yoga).					
My bedroom is cool and dark.		1			
If something is worrying me before bed, I am able to calm myself.					
I go to bed and wake up at the same time each day.					
I relax an hour before bed.					
I wait to get into my bed until I am drowsy.					
Identify one or two barriers from Section 1:					
2					
Identify one or two items from Section two that you would like to try:					
1					
2					
What barriers are there to attaining this goal?					
What can I do to remove these barriers?					