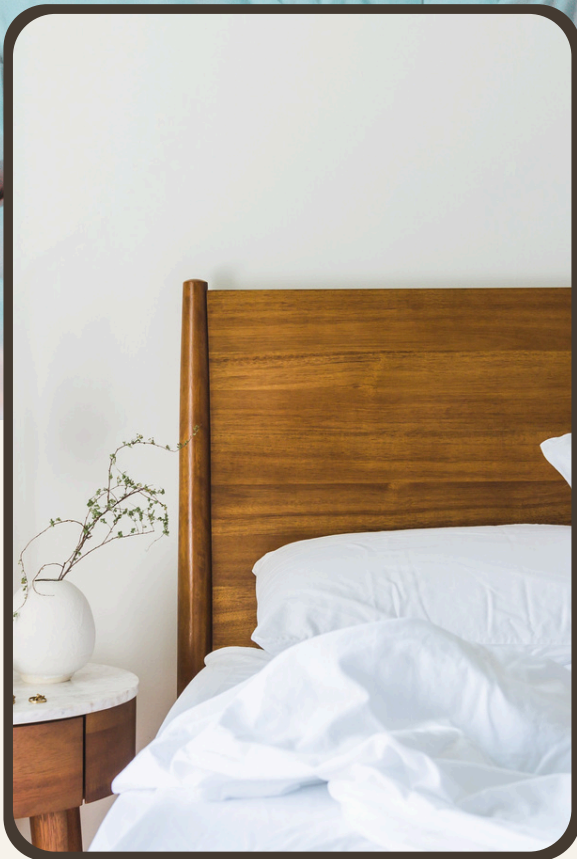




Somatic Sleep

WELLNESS COACH

SOMATIC SLEEP™ CBT-I MANUAL



A downloadable companion for the
**CBT-I Somatic Sleep™ Insomnia
Treatment Course**

Inspired by Dr. Stephen Porges and
the AASM*

BY DAWN BOIANI-SANDBERG,
WELLNESS COACH

What is Insomnia?

Insomnia is trouble falling asleep, staying asleep, waking up too early, or needing a medicine to sleep. It can have devastating effects on one's well-being. The good news is... that sleeping disorders are treatable, and here's how I and many others did it!



Somatic CBT-I

This guide covers the core features of Somatic Sleep CBTi. The information included are aspects of CBTi that have been shown by research to be helpful.

Cognitive Behavioral Therapy for Insomnia (CBTi) is a treatment for insomnia, that been used as a sleep disorder treatment for decades. There is evidence to support CBTi as an effective first line of treatment for insomnia, that works better than sleeping pills with no side effects. This is a non-clinical, peer coach course, from my own experience and research, and not to be substituted for medical advice.

Never decrease or stop taking sleeping pills unless under the close care of a medical provider. I am also trained as a Peer Recovery Coach to support people in benzodiazepine withdrawal, and have been trained with the State of Colorado, and have taken the [Benzodiazepine Peer Support Training](#) with the *Colorado Consortium for Prescription Drug Abuse Prevention*.

Before starting CBTi it is best to consult with a healthcare provider who can provide an initial evaluation to evaluate the root cause of insomnia. You may have chronic pain, *RLS*, a mental health condition, sleep apnea, hormone fluctuations or medication side effects that may require medical treatment. I also found it helpful to work with a coach/therapist, and join a few online support forums.



Can this help me? Here's some of what the AASM says:

1. CBTi is successful for people with chronic insomnia, and is valid treatment for insomnia related to another problem. It can be implemented in older adults and people who use sleeping pills, and can be used to help decrease pill dependence.
2. Stimulus control therapy, sleep hygiene, relaxation, anxiety de-escalation, body & breath based mindfulness training as well as cognitive behavioral therapy are successful treatments for insomnia, and are all covered in our full Somatic Sleep Course.
3. Our modified sleep restriction, shortening the time spent in bed, with some minor behavioral and cognitive changes are very helpful for insomnia cures. We can also offer peer support and resources for safe sleeping pill tapering.

Keeping a **sleep diary** for Cognitive Behavioral Therapy for Insomnia (CBTI) helps identify patterns and triggers affecting your sleep. By recording your sleep habits, moods, and daily activities, you gain insights into behaviors that disrupt rest.

This self-awareness facilitates tailored strategies, making it easier to improve sleep quality and overall well-being. You can use the traditional "Consensus" form or the CBT-I free app!

We also teach a personalized, simplified version.

Consensus Sleep Diary Instructions

- Date: Write the date of the morning you're filling out the diary.
- Time in Bed: What time did you get into bed?
- Time Tried to Sleep: Record when you began trying to fall asleep.
- Time to Fall Asleep: How long did it take you to fall asleep?
- Wakes: How many times did you wake up before your final awakening?
- Awakening Duration: Total time awake between falling asleep and your final awakening.
- Final Awakening Time: What time was your last awakening?
- Time in Bed After Final Awakening: How long did you spend trying to sleep after your final awakening?
- Woke Up Early: Did you wake up earlier than planned? (Yes/No)
- Minutes Early: If yes, how many minutes earlier?
- Get Out of Bed Time: What time did you get out of bed?
- Total Sleep Duration: Estimate total sleep duration.
- Sleep Quality Rating: Rate your sleep quality (good/poor).
- Feeling Upon Waking: How restful or refreshed did you feel upon waking?
- Naps or Dozing Count: How many times did you nap or doze?
- Napping Duration: Total time spent napping or dozing.
- Alcohol Consumption: Number of alcoholic drinks consumed.
- Last Alcoholic Drink Time: Time of your last drink.
- Caffeine Consumption: Number of caffeinated drinks consumed.
- Last Caffeinated Drink Time: Time of your last caffeinated drink.
- Sleep Aids: List any sleep medications taken, including dose and time.
- Comments: Additional notes relevant to your sleep.

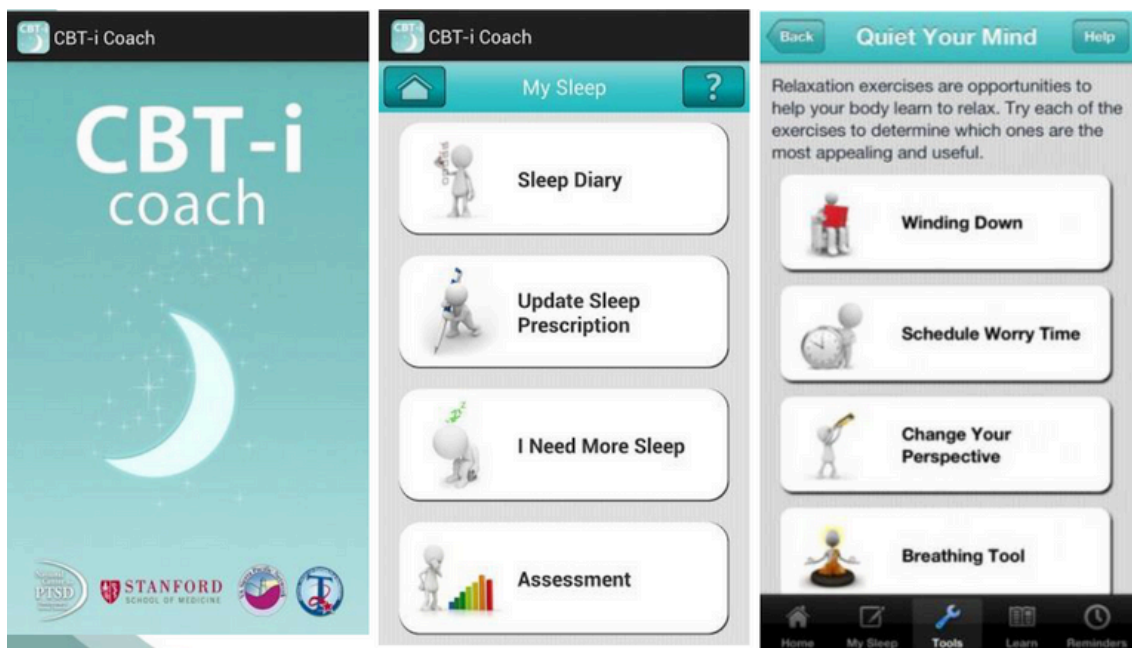
Consensus Sleep Diary

Consensus Sleep Diary-Core

ID/Name: _____

Sample								
Today's date	4/5/11							
1. What time did you get into bed?	10:15 p.m.							
2. What time did you try to go to sleep?	11:30 p.m.							
3. How long did it take you to fall asleep?	55 min.							
4. How many times did you wake up, not counting your final awakening?	3 times							
5. In total, how long did these awakenings last?	1 hour 10 min.							
6. What time was your final awakening?	6:35 a.m.							
7. What time did you get out of bed for the day?	7:20 a.m.							
8. How would you rate the quality of your sleep?	<input type="checkbox"/> Very poor <input checked="" type="checkbox"/> Poor <input type="checkbox"/> Fair <input type="checkbox"/> Good <input type="checkbox"/> Very good	<input type="checkbox"/> Very poor <input type="checkbox"/> Poor <input type="checkbox"/> Fair <input type="checkbox"/> Good <input type="checkbox"/> Very good	<input type="checkbox"/> Very poor <input type="checkbox"/> Poor <input type="checkbox"/> Fair <input type="checkbox"/> Good <input type="checkbox"/> Very good	<input type="checkbox"/> Very poor <input type="checkbox"/> Poor <input type="checkbox"/> Fair <input type="checkbox"/> Good <input type="checkbox"/> Very good	<input type="checkbox"/> Very poor <input type="checkbox"/> Poor <input type="checkbox"/> Fair <input type="checkbox"/> Good <input type="checkbox"/> Very good	<input type="checkbox"/> Very poor <input type="checkbox"/> Poor <input type="checkbox"/> Fair <input type="checkbox"/> Good <input type="checkbox"/> Very good	<input type="checkbox"/> Very poor <input type="checkbox"/> Poor <input type="checkbox"/> Fair <input type="checkbox"/> Good <input type="checkbox"/> Very good	<input type="checkbox"/> Very poor <input type="checkbox"/> Poor <input type="checkbox"/> Fair <input type="checkbox"/> Good <input type="checkbox"/> Very good
9. Comments (if applicable)	I have a cold							

Free App CBT-I Coach





mind+body connection

The mind-body connection in sleep highlights how mental and emotional states influence sleep quality. Stress, anxiety, and unresolved trauma can disrupt sleep patterns, while relaxation and mindfulness practices promote restorative rest. Addressing both mental health and physical sensations is essential for achieving better sleep and overall well-being.

What Does Somatic Sleep™ Mean?

Somatic sleep treatment is an integrative self-care approach that combines body-centered therapies with traditional sleep interventions. It focuses on the connection between physical sensations and emotional well-being, recognizing that stress and trauma can disrupt sleep patterns. With acute insomnia, the nervous system can stay in a hyper-vigilant, sympathetic or *fight-or-flight* state.

Our innovative techniques include body awareness exercises, mindfulness practices, and gentle movement therapies to help release tension, create safety and promote relaxation. By addressing both the mind and body, somatic sleep treatment aims to enhance sleep quality, reduce anxiety, and improve overall mental health. Our holistic method empowers individuals to understand and regulate their bodily responses, fostering a deeper sense of calm, self love and better sleep!

Sleep Hygiene– What to Do...

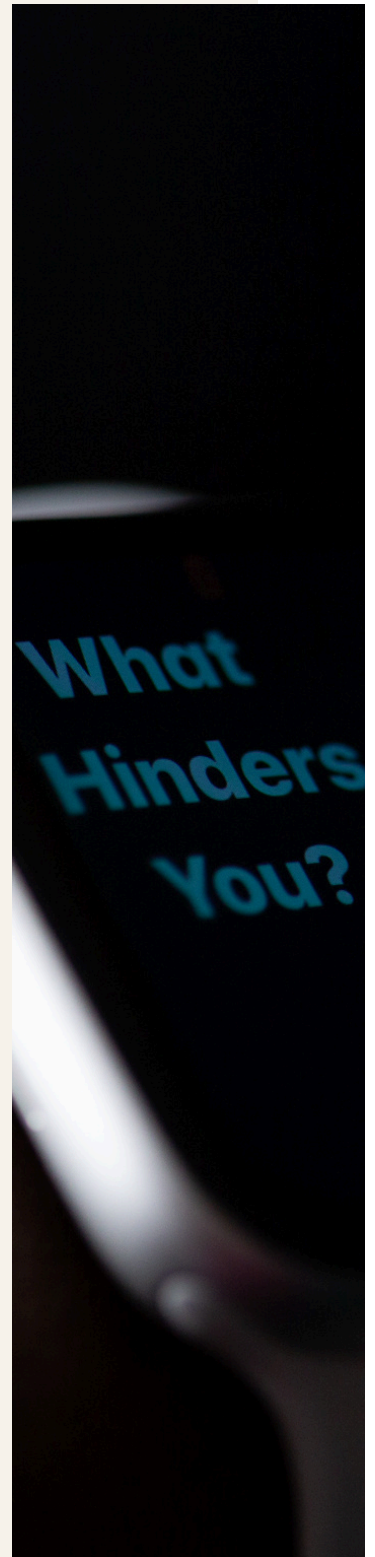
1. Go to bed when sleepy.
2. Get up from bed at the same time each day, even on weekends.
3. Get regular exercise each day, preferably in the morning.
4. Get regular exposure to outdoor or bright lights, especially in the late afternoon.
5. Keep the temperature in your bedroom comfortable- 68 degrees is best.
6. Keep the bedroom quiet when sleeping.
7. Keep the bedroom dark enough to facilitate sleep.
8. Use your bed only for sleep (and sexual activity). No electronics or social media!
9. Establish a regular, relaxing bedtime routine like a warm bath or shower, aromatherapy, reading, or listening to soothing music.
10. Use a relaxation exercises like: box breathing, progressive muscle relaxation or use relaxing guided meditations.
11. Keep your feet and hands warm. Wear warm socks to bed.
12. Write down problems in the afternoon.



Sleep Hygiene– What NOT to Do...

1. Exercise just before going to bed.
2. Engage in stimulating activity just before bed.
3. Have caffeine in the evening (coffee, many teas, chocolate, sodas, etc.)
4. Read or watch television in bed.
5. Use alcohol to help you sleep.
6. Go to bed too hungry or too full.
7. Take another person's sleeping pills.
8. **Do not take sleeping pills without your doctor's knowledge.**
Tolerance can develop rapidly with these medications, and it is often essential to taper slowly to safely discontinue.*
9. Take daytime naps.
10. Command yourself to go to sleep. This only makes your mind and body more alert.
11. Watch the clock or count minutes, remove all clocks, phone and smart watches.
12. Lie in bed awake for more than 20-30 minutes. Instead, get up, go to a different room and then return to bed when you feel sleepy.
13. Succumb to maladaptive thoughts like: "Oh no, look how late it is, I'll never get to sleep" or "I must have eight hours of sleep each night, if I get less than eight hours of sleep I will get sick."
14. Change your daytime routine the next day if you didn't sleep well. Even if you have a bad night sleep and are tired it is important that you try to keep your daytime activities the same as you had planned.
15. Increase caffeine intakes the next day, this can keep you up again the following night.

* I have lived experience tapering from benzodiazepine sleeping pills based on the Ashton Manual and am happy to offer peer recovery coaching to help with this challenging process. Indeed... healing is entirely possible!



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“My body knows how to sleep, there is no need to be afraid. I can just lay here with no pressure and rest. If I don't sleep tonite, I can still have a great day tomorrow. It is common to have sleep challenges as we age.”

Dawn Boiani– Sleep Coach

Cognitive “safety thoughts” that help

If we have a stress- based bout of insomnia, we can lose our confidence and get into a vicious cycle of dis- regulation and anxiety. Create your own safety thoughts to calm and sooth your nervous system to allow the sleep process to occur.

Sleep is part of the autonomic nervous system, there is nothing you need “to do” to make sleep happen, just trust and allow it. If you can't sleep, get up, go to another room and read a book or listen to a relaxing guided meditation or story until you are sleepy and try again later.



Sleep Restriction– Classical CBT–I

Step 1: Collect information about your personal sleep by recording a sleep diary for two weeks. Calculate the sleep efficiency and total time asleep each night.

Step 2: Set a personal wake-up time based on the needed time to get up for the day. The wake-up time should stay the same every day.

Step 3: Take an average of the total time in bed from the collected sleep diary information.

Step 4: RESTRICT the time in bed to the average time actually asleep. Count back from the set wake-up time to figure out the new bedtime.

Step 5: Continue to record sleep diaries. Stay with the restricted time until the sleep efficiency is 90% or greater.

Step 6: Once the sleep efficiency is 90% or greater increase the time in bed by 15 minutes by setting the bedtime 15 minutes earlier.

Step 7: Do not change the new sleep schedule for 5 days. If the sleep efficiency continues to be 90% or greater add back 15 minutes every 5 days until the sleep efficiency drops lower than 90%.

Step 8: If sleep efficiency is between 85% and 90% do not change the sleep time, total time in bed.

Step 9: If sleep efficiency drops below 85% on average for the last 5 days then decrease the total time in bed by 15 minutes.



The Power of Shortening the Sleep Window

A modified sleep restriction is the most powerful step you can take that may itself cure your insomnia. If the CBT-i steps are too complicated, just be lightly aware of your average number of hours slept. Decide what time you want to wake every morning, for example, I average 5 hours a night and I'd like to wake up at 6:00am. That means my bedtime is at 1:00am. You turn off TV and electronics at 11 and begin to read in lower light and wind down in a cozy, comfortable bed. When I do this, I rarely stay up until 1! It removes the fear and pressure to sleep and increases the natural sleep drive. For a detailed sleep recovery path, please enroll in our sleep course for new, innovative techniques that work!



*Thank you!
Dawn*

Unlock restful sleep and emotional balance with our Somatic Sleep™ Coaching Course. Transform your nights and reclaim your well-being today!



www.somaticsleepcoach.com

*American Academy for Sleep Medicine and [Stephen W. Porges, PhD](#)