Counter Control Instead of Stimulus Control

How can I follow the guidelines to get out of bed if awake during the night if I have physical considerations that would make this risky or hard on my body?

For some people, it is hard on the body to follow the stimulus control guidelines related to getting out of bed when not sleepy or asleep during the night. For example, hospitalized inpatients, individuals with Parkinson's' or other movement disorders, older adults, and individuals with chronic pain may struggle with these instructions or be unable to follow them. In this case, you can follow "counter control" guidelines instead. These guidelines have the same goal and largely achieves the same effects as stimulus control.

In counter control, instead of getting out of bed after 15 minutes of wakefulness in bed, do what you can to stop trying to sleep while still in bed. For example, make some changes to the sleep area, for example, by switching on a dim light and sitting up against some pillows, lay across the bed or put your head at the opposite end of the bed. Think about two different "modes" in bed:

- 1) Sleep Mode: you are in your typical sleep position, with lights off and allowing sleep to come. If you are still awake after about 15 minutes, switch to Wake Mode.
- 2) Wake Mode: you are in a different position and the area is different and you are NOT aiming to fall asleep. When start to feel sleepy, switch to Sleep Mode.

The goal is to link Sleep Mode cues with sleep, and Wake Mode cues with wake.