

The repercussions of insomnia and options to reduce its impact on police and organizations





The findings of this analysis show that police officers are at a higher risk of suffering from sleep disorders, and that these disorders have a major impact on their ability to make the right decisions and limit accidents. In addition, employers would see a significant return on investment (ROI) when providing assistance to their employees struggling with sleep issues. The analysis is based on data from 1,700 records from the HALEO Clinic. The ROI achieved by employers is the result of both improved productivity and reduced absenteeism among employees who have used the HALEO program.

A study shows that 53% of municipal and provincial police officers in Canada have been diagnosed with sleep disorders¹, compared to 10 to 22% in the general population^{2 3}. The impact of insomnia-related disorders is high, with affected individuals having a 3- to 7-fold greater likelihood of suffering from mental health disorders if they perform the function of the first responder. Ultimately, this analysis will focus on the links between sleep disorders and mental health disorders, links demonstrated in several studies.

The links between insomnia and workplace injuries and mental health problems have been widely documented scientifically. The increased prevalence of insomnia in the police force, scientifically proven, has the consequence of worsening the negative impact of sleep disturbances. In the general population, sleep disorders are the cause of 25% of accidents and errors in the workplace.

The prevalence of chronic insomnia in the police environment

As shown in the table at the bottom of the page, the prevalence rate of chronic insomnia among police officers is over 53% ¹, while it is estimated to be 10-22% in the general population^{2 3}. So this is 3 to 5 times the average prevalence. This appreciable difference is attributable to several factors, in particular the atypical schedules as well as the high-risk and high-stress situations in which the work of the police officers ¹.

Insomnia poses health and safety risks in the workplace

- Among police officers, the number of accidents attributable to sleep was much higher among workers with atypical schedules and closely related to the presence of sleep disorders⁴.
- Among police recruits, the likelihood of at least one professional error decreased with each hour of sleep⁵.
- Sleep disturbances among police officers lead to reduced job performance (eg, administrative errors, falling asleep while driving, security violations) ⁶.
- In a survey of firefighters and paramedics, 93% said they suffered from significant sleep disorders⁷. Police officers report a lower quality of sleep than civilian personnel⁸.

First responders positive diagnostic in Canada for insomnia and mental health issues ¹

Compared to: 10-22% of civilian adults (US) ^{2 3}.

Role	Insomnia	Mental health disorders
First responders	56%	49%
Provincial/Municipal Police	53%	46%
RCMP	59%	51%
Correctional services	58%	56%
Firefighters	49%	46%
Paramedics	60%	54%

Testimonial of a police officer who has gone through HALEO's CBT-i program



"The job of a police officer comes with several factors that have an impact on the quality of sleep. Whether it is the different stressful situations or the atypical schedule, I personally searched for tools and solutions for several months in order to minimize the impact of these factors on my sleep, and consequently on my ability to function well both personally and professionally.

Restorative sleep is a key pillar of good health.

The medication prescribed by my doctor had great short-term benefits, but I quickly became addicted, along with some serious negative side effects. Seeing that I was looking for a long-term solution to treat insomnia, my doctor strongly recommended that I enter in a cognitive behavioral therapy for insomnia

I was skeptical at first, but the HALEO program has allowed me to regain a healthy sleep, and I am now well equipped to be at my best, at work and with my family. I was able to see results from the third week, I stopped all medication and I am completely satisfied with the program! "

Louis M., Lieutenant-Detective





Insomnia and mental health

Sleep disturbance is strongly correlated with the severity of symptoms of post-traumatic stress disorder (PTSD) " , the symptoms of which worsen during the day". Untreated insomnia is associated with a risk of major depression¹¹. There is compelling evidence for the two-way relationship between sleep and mental disorders¹². Compared to people without sleep disorders, those who experience sleep problems and insomnia are more likely to experience greater physical distress, mental distress, pain, anxiety, to be overwhelmed, by feelings of depression, and of having poorer health, a poorer quality of life and less functioning in society¹³¹⁴.

Insomnia is an important factor in the development and maintenance of a wide range of mental disorders¹². Insomnia is associated with an increased risk of suffering from a wide range of mental disorders, including anxiety and depression, chronic pain¹⁵, substance use and suicidal urges¹⁶, and is associated with deterioration of mental health. quality of life in several areas¹⁷. Insomnia is strongly associated with burnout, with stress at work only being a risk factor when associated with insomnia¹⁸.

Insomnia leads to mental health problems

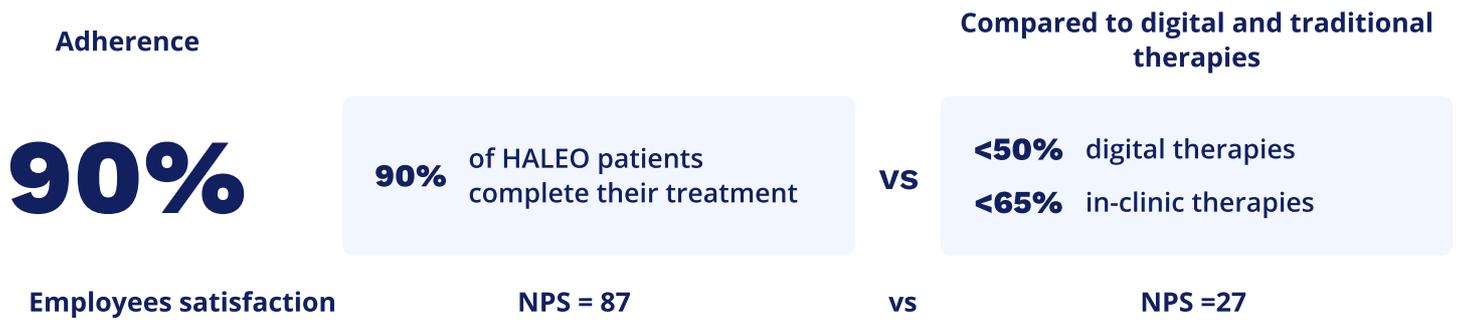
- Police officers who report having more severe sleep problems also report having more severe depressive symptoms¹⁹.
- Most paramedics and firefighters report having sleep disturbances, which are associated with poorer health, lower job satisfaction²⁰, increased psychological distress and symptoms of depression²¹.
- In police officers, sleep disturbances are largely associated with symptoms of post-traumatic stress disorder and general psychopathology²².
- First responders who had poorer quality of sleep were 3 to 7 times more likely to be diagnosed with a mental disorder. The rates of insomnia observed in first responders were more than double those previously observed in the general population population.

HALEO successfully treats insomnia

Even in severe and complex cases, and in people on disability leave

- Over 1,700 people treated, many of whom had comorbidities such as anxiety disorders and depressive symptoms.
- Specialized CBT-I programs for workers with non-standard schedules, people with sleep apnea, PTSD, and an evidence-based nightmare treatment program.
- Provincially-licensed therapist trained and supervised by HALEO's clinical team.
- Outstanding clinical results presented at American Academy of Sleep Medicine Meetings, World Sleep Congress, and Canadian Sleep Society.

Exceptional engagement and satisfaction



A safe and efficient solution



Almost all patients experience reductions in symptoms and return to normal function

* Percentage of clients with moderate to severe symptoms at evaluation who no longer have clinically significant symptoms after treatment, clinical results Q4-2020 (2020 Q4).

Return on investment for employers

The HALEO program offers a higher return on investment. With data supporting the negative workplace impact of insomnia, the return on investment is very precisely quantifiable. HALEO client organizations see a 10-20 fold return on investment. This ROI takes into account the absences and the lack of productivity of the individuals who complete the program. The costs associated with insomnia also include the cost of medication, replacement costs to compensate for short-term absences, and costs related to disability. These "collateral" costs are not included in the calculation of HALEO's ROI and therefore represent substantial additional savings.

The proven efficacy of CBT-I

In 2006, a task force commissioned by the American Academy of Sleep Medicine to update treatment parameters for insomnia declared CBT-I (cognitive behavioral therapy for insomnia) to be a "well-established treatment, and supported by empirical data"²³. Indeed, many meta-analyzes have provided evidence of its effectiveness^{24 25}. The beneficial effects of CBT-I are undeniable and have similar efficacy in patients with or without a disease or comorbid condition (such as anxiety, depression, PTSD and others) and in younger or older patients, and those who use or not sleeping pills²⁶. In addition, it has become clear in recent years that CBT-I also reduces symptoms of depression²⁷ and anxiety²⁸.

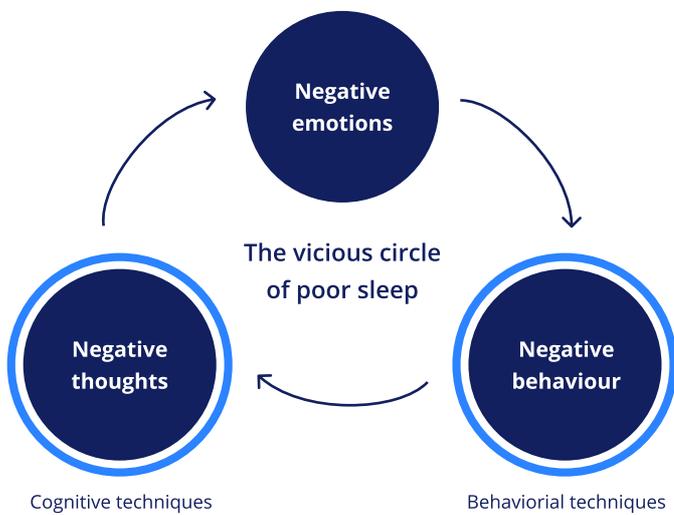


Figure 1. CBT-I is a treatment that combines cognitive, behavioral and educational elements that allow the patient to regain healthy and restful sleep.

Recommended by experts

CBT-I is now recommended as the first-choice treatment for insomnia by the National Institutes of Health, the American College of Physicians, the European Sleep Research Society, and the American Academy of Sleep Medicine. No other treatment for insomnia has the same level of proven effectiveness. Compared to pharmacological treatments, CBT-I improves sleep more sustainably over time, with far fewer side effects^{29 30 31 32}. In addition, patients generally prefer CBT-I to medication therapy³³.



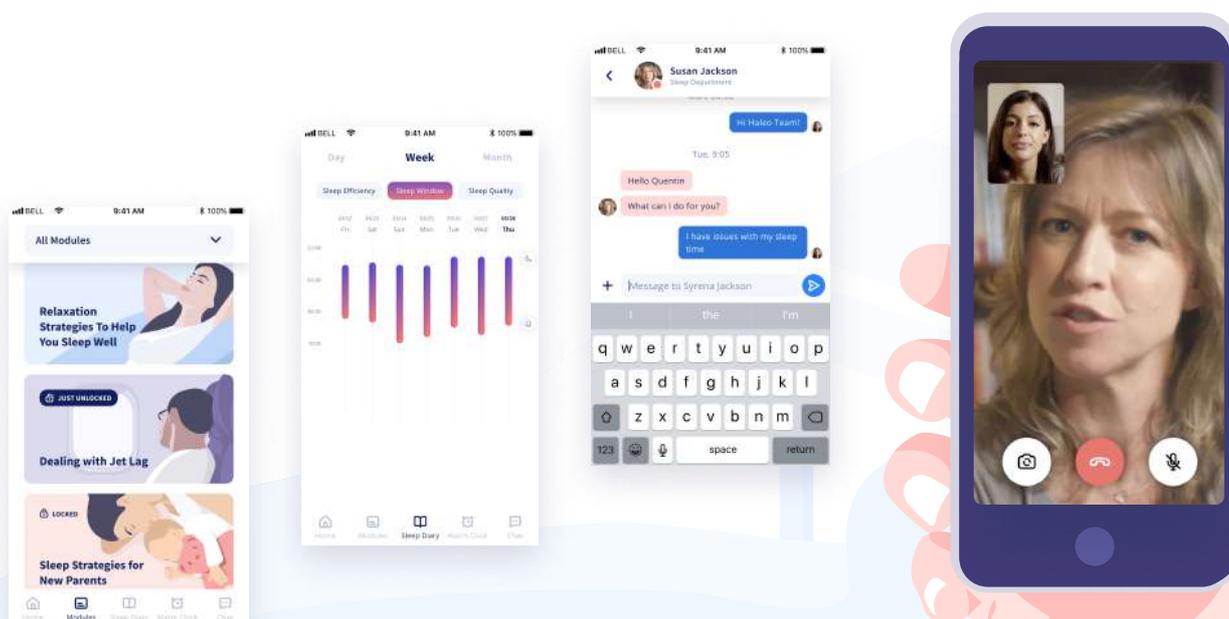
Despite its efficacy in the treatment of insomnia and associated symptoms of depression and anxiety, traditional CBT-I remains difficult to access³⁴. Treating sleep disorders with CBT-I requires the therapist, psychologist or other health professional to acquire a subspecialty in sleep disorders³⁵.

Aggravating factors commonly encountered in first responders, particularly non-standard work, obstructive sleep apnea and nightmarish sleep, further complicate treatment and require special protocols and extensive training from therapists.

HALEO's CBT-I program

The HALEO CBT-I telemedicine program offers a solution to all these considerations limiting the accessibility and effectiveness of traditional CBT-I. HALEO has developed a unique turnkey insomnia treatment solution that includes a telemedicine platform and a CBT-I training program. HALEO's CBT-I program offers five-week therapy based on weekly teleconference sessions with a therapist, and is supported by a state-of-the-art digital platform that includes an iOS and Android mobile app. Teleconferencing sessions are held at a time and location convenient for the client, including during daytime breaks at work, and at home in the evenings or weekends. HALEO trains and supervises experienced therapists licensed by provincial authorities on the clinical and technical aspects of therapy. HALEO's TCC-I program is rigorously structured and personalized; it is complemented by a mobile app that includes digital records of subject sleep data, clinical questionnaires, tools such as relaxation recordings and training, therapeutic and supportive materials and content, teleconferencing to connect to the therapist, a chat function, and a number of features related to treatment adherence. All clients are tested for other sleep or mental health problems.

To this day, more than 1,700 clients have been treated for clinical-level insomnia at the HALEO Telehealth Clinic. Since then, HALEO has expanded its services and now offers 1) a CBT-I program specially tailored for workers with atypical schedules and people with circadian problems, including people with shiftwork sleep disorder, 2) a CBT-I program for people with obstructive sleep apnea, 3) a CBT-I program for people on disability leave, and 4) a nightmare treatment program based on proven methods such as images repetition therapy.



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