



UMEÅ UNIVERSITET

STRESS, SLEEP DISTURBANCE, AND RELATED ILL-HEALTH:

From prevalence and risk-factors to indicated interventions

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Akademisk avhandling

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Stress, sleep disturbance, and related ill-health: From prevalence and risk-factors to indicated interventions

Abstract

With focus on stress-related ill-health and insomnia/sleep disturbance, the overall aim of this thesis was to determine severity and prevalence, risk factors and effectiveness of low-intensity group sessions. This was accomplished by taking epidemiological and quasi-experimental approaches.

With the aim of examining symptom severity and prevalence of insomnia, burnout, anxiety, depression, and somatization across different age groups and sexes, **Study I** used cross-sectional data (n=3406) from the baseline data collection of the Västerbotten Environmental Health Study (VEHS). In comparison to men, women in most age groups exhibited higher levels of symptom severity and prevalence of caseness in various mental health conditions. Insomnia (28.6%) and burnout (17.3%) were common in the population.

With focus on risk factors for insomnia and burnout, **Study II** used a longitudinal design and VEHS data (n=1702–1972) to compare a range of mental and somatic conditions in a general population. The results showed that all examined health conditions were risk factors for cases of insomnia and burnout. For example, insomnia can increase the risk of developing burnout (odds ratio: 2.67), and burnout increase the risk of developing insomnia (odds ratio: 2.73), underscoring the importance of early detection and prevention.

The aim of **Study III** was to examine the effectiveness of four low-intensity group sessions for stress (n=274) and sleep disturbance (n=106) conducted by psychology students. A non-randomized controlled trial design was used in primary care with naturally occurring groups. A control group (n=221) was recruited via social media. Whereas effects were small at post-treatment, a substantial proportion of the patients showed a reliable improvement or recovery at 3-month follow-up.

This thesis provides support for the assumption that severity and prevalence of insomnia, burnout, anxiety, depression, and somatization are common in the population. Burnout and insomnia are mutual risk factors and underscore the importance of indicated prevention in primary care. Low-intensity group interventions facilitated by non-experts can be effective and scalable for patients with stress and sleep disturbance.

Keywords

Stress-related ill-health, Prevalence, Risk factors, Burnout, Insomnia, Non-experts, Low intensity psychological interventions, Primary care, Scalability, Indicated prevention.

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