



# How to Know if Weighted Blankets Really Work

*and if research supports the use of weighted blankets*

*by Lora K. Jacobson*

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## Introduction

*How I found the answers to two questions*

It was summer. My life was in an unexpected place after a tragedy claimed the life of my 3½ year old son; I was holding it together, but the grief in my heart festered just below the surface.

I was in my living room, packing up a very large adult-size kingsize weighted blanket ordered by an occupational therapist. On a whim, before I put the blanket in its box, I sat on my couch and rested the entire folded blanket on my chest.

The feeling that washed over me is difficult to put into words. Something like peace. A sense of centeredness. The weight of my grief was lifted, even if temporarily. It was sweet relief. Even though I'd made dozens of weighted blankets for other people, I was surprised by the profound effect of such a simple thing.

Over the past three years, I've filled blanket orders for children and adults, for pre-school and elementary settings, for care facilities, and for professional occupational therapists. I've always wondered about two things:

1. How can someone know if a weighted blanket is right for them before buying?

2. What does the research say about the effectiveness of weighted blankets?

In order to answer these questions, I decided to dig in and find out exactly what the research said.

A quick search on Google will provide you with a long list of symptoms that can be relieved by weighted blankets. But descriptions of cure-alls can easily start to sound like junk science (faulty scientific information or research, especially when used to advance special interests) especially when those claims are made by folks who make their living selling products promoted by said claims.

Since I don't want to sell promises based on junk science, I decided it was time to dig in and find out exactly what the research said. What I discovered is that when they are used correctly, weighted blankets are indeed a useful and effective strategy for managing pain, anxiety, panic attacks, depression, and other mental illnesses.

But don't take my word for it!

This book is a quick and comprehensive guide to the [current] science behind weighted blankets, written for the layperson. So let's take a few minutes to explore the peer-reviewed research and really see what's what.

## Why can't they make up their minds?

*Understanding the research.*

If you read through scientific studies (and papers about scientific studies) about weighted blankets, you'll see similar phrases as: "indicates the potential for future research", "a lack of research", and "few published research studies." What is all this supposed to mean?

Peer-reviewed, scientific studies are held to an extremely high standard where a clear distinction is made between causation and correlation.

For example:

"I turned on the faucet and water came out" is an example of causation—unless the water is turned off at the main, opening the faucet allows water to flow.

"I turned on the faucet and Gabi smiled at me" is an example of correlation—what isn't known without further investigation is whether Gabi will always smile when the water is turned on (causation), if she smiled because I turned the water on (correlation) or if she smiled at me for an entirely different reason (correlation).

Studies that conclusively demonstrate causation can be repeated by other researchers with similar outcomes, and ideally would also compare the results with control groups that either use some sort of placebo or otherwise do not receive treatment from the researchers. Sometimes researchers finish their study and realize that they were asking the wrong questions, or asking the right questions but in the wrong way, or that the study didn't last long enough or include a broad enough representation of the population they were studying.

That's why the language used in research papers can sometimes seem to hang out in some sort of gray area, rather than in the black and white.

## Growing up: From clinical reasoning to clinical research.

*A growing body of knowledge*

For several years, weighted blankets existed in a world where there was little to no research, and the research that existed only indicated the need for more research. Those who wrote about the lack of research would use phrases such as "a lack of empirical evidence" (a lack of rigorous, repeatable, peer-reviewed studies) to describe any claims about the effectiveness of weighted blankets.

When Diane Walker, M.S., OTR/L, and Kathleen McCormack published *The Weighted Blanket: An Essential Nutrient in a Sensory Diet* back in 2002, they explained that, in the absence of long-term clinical trials, "clinicians need to rely on clinical reasoning to determine what interventions to use with a client."<sup>1</sup>

Another researcher observed: *Although professionals are encouraged to use evidence-based research to guide practice, educators and clinicians often rely on strategies gleaned from secondary sources (e.g., other professionals' opinions).*<sup>2</sup>

Basically, that means that while there weren't any long-term, peer-reviewed outcome studies to back up the observations that occupational therapists were making regarding the effectiveness of weighted blankets (and other sensory therapies), they could continue to carefully use and recommend them based on "their cumulated experiences using weighted blankets, and the experiences of their colleagues."<sup>1</sup>

In fact, Walker & McCormack go on to explain that "most sensory integration interventions are applied that way. [And]...clinicians continue to use these interventions because they give us the positive results we are looking for."<sup>1</sup>

Prior to publication of peer-reviewed research, occupational therapists carefully recommended weighted blankets based on their cumulated experiences and the experiences of their colleagues.

The evidence guiding all types of occupational therapy interventions in the pediatric population is limited but is advancing through systematic clinical research.<sup>3</sup>

In the years since Walker & McCormack published *The Weighted Blanket*, the scientific, peer-reviewed evidence has increased significantly, and has supported the continued use of weighted blankets.

### Why a Weighted Blanket?

#### *Sensory input and deep pressure*

The lights seem so much brighter than normal, and the walls feel like they're closing in. The sounds in the room sound louder than they really are, while voices-like fingernails being scraped on a chalkboard-are crowding out her thoughts. Amber can barely form a sentence.

There was a time when moments like this would have spiraled straight to a meltdown. Today, Amber has a weighted blanket. Today she takes note of the overload, finds a quiet spot, pulls her weighted blanket over her body, and allows herself time to re-center, regaining her sense of control. The weight makes her feel safe, "deep into the ground", rather than bouncing all over the place on the inside. The blanket lets her know where her body is in relation to the space around her.

If you do a cursory Google search on weighted blankets and/or sensory processing disorder, you'll find a lot of talk about sensory input via deep pressure. But what is that?

Utilized by occupational therapists "among people with learning and pervasive developmental disabilities"<sup>4</sup> over 30 years ago, the concept of pressure and its effect on anxiety was popularized by the work of Dr. Temple Grandin, a professor of animal science at Colorado State University, who has made significant contributions both as an autistic self-advocate and as a consultant on animal behavior. One of her inventions includes "the squeeze machine", which she originally designed for her own use, to calm her own anxiety and panic attacks.<sup>5</sup>

Grandin explains that while she wanted to be held, as a young child she would simultaneously react negatively to the stimulation of being touched. The squeeze machine helped her meet those needs, and helped her be more able to handle human touch.<sup>5</sup> She later recorded the responses of adult college students who used the squeeze machine:

More than half the students participating in the study found the deep pressure quite relaxing: some described it as a tension reliever.

*After 5-10 minutes, 45 [percent] (18/40) of the subjects employed words such as "relaxing" or "sleep" to describe their reactions. Four students (10 [percent]) used the words "floating," "weightless," or "flight" to describe the sensation. Relaxation was physically evident in some subjects.*<sup>5</sup>

In her research, Grandin talks about how "deep touch pressure is the type of surface pressure that is exerted in most types of firm touching, holding, stroking, petting of animals, or swaddling."<sup>5</sup> She goes on to explain that "a very light touch alerts the nervous system, but deep pressure is relaxing and calming."<sup>5</sup>

Have you seen a newborn infant relax when swaddled in the days following their birth? Turns out that that same sensation is craved by many children and adults, too, and when that deep pressure is utilized, it can have a very effective calming effect.

While a weighted blanket is not a squeeze machine, it has some similarities—in that it is to be used independently (controlled by the user), and it provides deep pressure touch.

Grandin explains that the children [and adults] most likely to benefit from a weighted blanket are those who "seek deep pressure by rolling up in blankets or who get under mattresses."<sup>6</sup>

She observes that "deep pressure can be easily applied by...getting under bean bag chairs, ... [using a] weighted vest, squeeze machine or weighted blanket to help sleep."<sup>6</sup> Research using weighted therapy products (such as a vest, or blanket) has shown that the weight can have an impact on a person's ability to focus and

self-organize, decreasing impulsivity and self-stimulatory behaviors.<sup>4</sup> Researchers explained that the deep pressure can positively affect a person's fight-or-flight response, decreasing one's arousal or anxiety, resulting in "enhanc[ed] adaptation [and] emotion regulation."<sup>6</sup>

Research has shown that the weight can have an impact on a person's ability to focus and self-organize which decreases impulsivity and self-stimulatory behaviors.<sup>4</sup>

*Is a weighted blanket is right for you? [Click here to find out!](#)*

### What is a weighted blanket made of?

*Turtle shells, fairy dust, unicorn wings...*

Every time I answer this question, I can see the wheels spinning: you hear the term "weighted blanket" but you just don't quite have a frame of reference for imagining it. Yet, somehow, it sounds amazing. Magic, even.

Well-made weighted blankets are designed with high-quality fabric and weighted with non-toxic pellets or glass beads.

If you were to Google "how to make a weighted blanket", you'd find dozens of do-it-yourself or how-to guides. While some companies that sell weighted blankets have a patented design, most blankets simply have sealed pockets of plastic pellets or glass beads quilted between the layers of fabric. When I say this out loud, most people look at me in surprise, as if plastic isn't actually heavy and there must be some other secret ingredient I'm not telling them about. When the pellets are delivered to my doorstep in 50-pound boxes, it's a little less difficult to imagine!

Well-made weighted blankets are designed with high-quality fabric, clean non-toxic pellets or glass beads (nothing that can rot or mold or otherwise deteriorate, such as corn or rice), and are carefully stitched so that the small beads cannot accidentally leak out. Most blankets are washer and dryer friendly, although the heavier adult-sized blankets must be washed in a commercial machine.

### What is it like using weighted blankets?

*The comfort of a hug... without touch.*

Alondra was excited. She set out the weighted blanket she had ordered, and waited for Sofia to return home from school. Her daughter had many diagnoses and disabilities, and Alondra hoped that the weighted blanket would offer her daughter a bit of relief. She didn't have to hope for long.

Sofia arrived: upon seeing the weighted blanket, she immediately engulfs herself in it. She sighs. The sounds emanating from her express great comfort and relief unlike any she had ever expressed before.

For those who need heavier weight for greater sensory input, it's like curling up under ten of those heavy, comforting quilts... except, with all the benefits of using only a single blanket.

Remember crawling in under one of those wonderful quilts your great-grandmother made, and how the heaviness of it was comforting? It's pretty much just like that.

Additionally, weighted blankets can provide a pleasing tactile (touch) experience. In one study, it was noted that "about  $\frac{2}{3}$ s [of the participants] preferred a fleece blanket, and  $\frac{1}{3}$  preferred cotton."<sup>7</sup> Blankets can also be made with soft fleece, minky, or cotton-silk blends for individuals who are particularly sensitive to touch, depending on their sensitivities to heat or other habits (such as chewing or twisting).

### Is a weighted blanket right for me?

*What does the research say?*

Shannon is skeptical of solutions that are widely touted as natural problem solvers, but have little to no scientific backing. Not because she doesn't want to believe them; she does. She simply has very strong feelings about companies with claims that over-reach and are unsubstantiated, particularly when those promises and products come with a high pricetag. If the claims are true, a weighted blanket would be worth its weight in gold... but she wants to see the research—and so she should.

Remember how I mentioned that initially there wasn't a lot of research on weighted blankets? That's changing, slowly but surely. This is a wonderful, wonderful thing.

Tina Champagne, an occupational therapist and one of the primary researchers into the safety and effectiveness of weighted blankets, frequently uses the term "self-organization" to describe a process in which an individual is able to self-manage, self-restrain, self-soothe, self-care, self-regulate, and generally cope in a healthy way with whatever stressors they are experiencing.

While there are a lot of terms that describe the sensation of calm that many experience when under a weighted blanket, self-organization seems to me to be the most encompassing.

*Is a weighted blanket is right for you? [Click here to find out!](#)*

"Self-organization" describes the process in which an individual is able to self-restrain, self-soothe, self-regulate, and generally cope with stress in a healthy way.<sup>8</sup>

*Weighted blankets, vests, and lap pads...have been reported as helpful when used preventively or during crisis states with children, adolescents, adults, and elderly individuals... Weighted items offer the sensation of physical holding and containment, and may facilitate self-organization when an individual's capacities are tenuous.*<sup>9</sup>

In other words, when a person is having a difficult time managing or coping with the stresses they are experiencing (emotional, sensory, etc.), the weight of a weighted blanket or other device can help return that sense of self-organization or otherwise being in control.

He flops on the couch. School is stressful. Sean struggled more when he was younger, but now he usually manages to hold it together until he comes home. Typically, something will send him right over the edge into a full blown meltdown. He hates it.

Not today. Today Sean comes home, flops on the couch, and immediately covers up with his weighted blanket. The weight of the blanket allows him to regroup, to quiet his insides, and face the rest of the evening. Now that he has a weighted blanket, the meltdown is something he can bypass altogether.

The weight of a weighted blanket or other device can help you return to that sense of self-organization or otherwise being in control.

Champagne observed that "the weighted blanket... appears to help the consumer nurture, soothe, and care for himself or herself."<sup>9,10</sup> She found this to be especially true when the person using the blanket was in control of how the blanket was used.<sup>7,10</sup>

Additionally, while weighted blankets are quite helpful in the middle of a stressful period/moment, researchers have also reported that they have long been known to be helpful in aiding patients in preventing crisis states or meltdowns.<sup>11</sup>

*Weighted blankets and vests have been used for years to prevent crisis states with children, adolescents, adults and the elderly. Heavy blankets and vests can actually prevent these panic attacks and allow children and adults to resume normal activities...*<sup>11</sup>

Lest I lead you to believe that this is only about researchers and their observation, let me drop in a few more nuggets.

In recent safety studies, Champagne recorded adult participants' responses to the weighted blanket:

#### Study 1:

63% reported less anxiety symptoms after using the 30 lb. weighted blanket

#### Study 2:

78% participants reported that they felt more relaxed with a weighted blanket than without.

51% reported a reduction in anxiety after using the 30 lb. weighted blanket.

77% reported a preference for the weighted blanket when using a self-determined amount of weight.

#### Study 3:

When asked when they felt the most relaxed, 91% selected "When using the weighted blanket."<sup>7</sup>

These numbers blew me away. The studies not only "appear to indicate that the 30-pound WB could be an effective anxiety reducing intervention" but also that regardless of diagnosis, a WB appears to provide a calming effect for a significant portion of the adults who tried them.<sup>4</sup>

Less anxiety and more relaxation, anyone? Yes, please! Hands down, weighted blankets have a profound and effective non-pharmaceutically-based effect on the user that helps them "self-organize", decrease anxiety, and relax. They can be used both during a crisis state and as a preventative.

A weighted blanket provided a calming effect for a significant portion of the participants, regardless of their [mental health] diagnosis.

In a presentation at the American Occupational Therapy Association's annual conference in 2007, Champagne reminded her listeners that when selecting a weighted blanket, each person's history and preferences should be considered on a case-by-case basis.<sup>7</sup> She stated that "people have different tendencies [and] preferences", and that while "no [single] intervention will work for everyone", knowing if a person has a "tendency to like a heavy blanket, a light-weight blanket or no blanket" is invaluable. It's also important to ask "When do you tend to use a blanket? Why?"<sup>7</sup>

If you tend to prefer heavier blankets and find that blankets give you a sense of security and comfort, you are likely a good candidate for a weighted blanket.

*Is a weighted blanket is right for you? [Click here to find out!](#)*

## Are weighted blankets clinically proven to improve sleep?

*How do we know it's not just a placebo?*

She stares at the ceiling. All she wants is sleep. Tick. Tock. Tick. Tock. She tries counting sheep. Or thinking about nothing. She waits with her eyes shut, as if willing sleep to come.

Avery is an active teenager who excels in school, and has struggled with insomnia for several years.

On her birthday, her mom gave her a weighted blanket. That night, she tucked herself into bed, bracing herself for the quiet, dark hours.

But not tonight. Tonight, she sleeps like a baby.

Avery later reported that after she started using the weighted blanket, she slept soundly and woke up refreshed — she hadn't had a single night of trouble since.

Weighted blankets provide an innovative, non-pharmacological approach and complementary tool to improve sleep quality.

The stats we just reviewed show that the use of a weighted blanket can reduce anxiety and increase relaxation, so it stands to reason that if anxiety and stress are disturbing our sleep, reducing those would improve it. In fact, during the studies cited above, Champagne reports that study participants' sleep improved "...when using a self-determined amount of weight."<sup>7</sup>

Recently, a study was conducted with a group of autistic children to measure the difference in the number of minutes a child slept with and without a weighted blanket. In their conclusion, researchers reported that the "weighted blanket did not help children with [Autism Spectrum Disorder] sleep for a longer period of time, fall asleep significantly faster, or wake less often."<sup>12</sup> But the study did make an interesting observation: "...the weighted blanket was favored by children and parents, and blankets were well tolerated over this period."<sup>12</sup>

One of the interesting things to note is that the study investigated the length or quantity of the sleep, but not the quality of the sleep.

A different study investigating the use of weighted blankets in adults with insomnia addressed the question of quality sleep:

*The weighted... blanket used in the present study had a positive impact on sleep, both objectively and subjectively, where a number of physiological and behavioral measures were improved during weighted blanket use. When the participants used the weighted blanket, they*

*had a calmer night's sleep, with a decrease in movements. Subjectively, they believed that using the blanket provided them with a more comfortable, better quality, and more secure sleep.*<sup>13</sup>

Both studies noted that there were other factors at work: *The weighted blanket was favored by children and parents, and blankets were well tolerated over this period.*<sup>12</sup>

Weighted blankets work well for insomniacs, releasing anxiety through calming and cocooning, providing tactile input that decreases activity of the sympathetic nervous system.<sup>13</sup>

Basically, the weighted blanket brings benefits physically and psychologically, and there's nothing wrong with approaching a problem from these two equally important angles.

While one study failed to show an increase in the number of sleeping minutes, other studies have clearly demonstrated that those who use a weighted blanket report having a better night's sleep AND that they move less while sleeping, which is an indication of a higher quality of sleep. Weighted blankets "...provide an innovative, non-pharmacological approach and complementary tool to improve sleep quality."<sup>13</sup>

*Do you need to sleep better? Find out if a weighted blanket is right for you.*

### How to use your weighted blanket safely

*Precautions, so you can enjoy with confidence*

It's easy to let ourselves think that if something is natural and didn't get packaged in a drug store, then it must be harmless. When we stop to think about it, we realize that this isn't true. Water is a necessity of life, but there's a reason we teach our children to swim. Fire is incredibly useful for keeping us warm in winter months or for cooking food, yet we take necessary precautions to keep those flames contained.

Weighted products do an incredible amount of good for those who need them, when properly used. When a weighted blanket is used as a restraint, or when a too-heavy weighted blanket is used on a child for whom it was not designed, the results can be devastating and fatal.

There have been a few such devastating events in the news over the past couple of years, and they generally have one consistent theme: they were used by the wrong person, or were used in the wrong way.

Weighted blankets can be very helpful and they should be used with respect.

With some guidelines in place, weighted blankets can be used safely and effectively.

### For kids:

In 2008, a coroner in Québec, Canada, determined that a 9-year-old's death could have been avoided, and was caused because his teacher rolled him inside a weighted blanket and then left him unattended for 20 minutes. She concluded that "the instructions given by the occupational therapist on the proper use of the weighted [blanket] had not been followed by the educators or the teacher."<sup>14</sup> The coroner made a specific recommendation that the l'Ordre des ergothérapeutes du Québec's (the College of Occupational Therapists of Québec-OEQ) make "clear instructions to its members on how to use such covers."<sup>14</sup>

In response to the coroner's recommendations, the OEQ worked together with a group of occupational therapists, and came up a set of guidelines. The Alberta College of Occupational Therapy also put together a set of guidelines and detailed ways in which they both agreed and disagreed with OEC's statement.

The bottom line is that while there have been a handful of safety studies on the use of weighted blankets for adults,<sup>10</sup> there have not yet been any such safety studies for children. In the absence of such studies, there are some common sense guidelines that should be followed.

Although a minor, the child must also consent to the use of the cover. Any sign of refusal, verbal or nonverbal, must be respected. The child's head and neck must be free at all times.<sup>14</sup>

Weighted blankets can be used safely and effectively, and must never be used as a restraint<sup>7</sup> and the child must always be able to remove it by himself.

An occupational therapist should determine whether the child's health presents any contraindications to the use of the weighted cover.<sup>14</sup>

### Possible contraindications may include:

- breathing problems
- cardiac problems
- epilepsy
- severe hypertonia
- skin problems including certain allergies
- circulatory problems<sup>14</sup>

The weight and size of the recommended blanket must be appropriate for the size of the child. Generally, occupational therapist recommend a ratio of 10 percent of the child's weight. A single weighted blanket cannot be used universally for all children.<sup>14</sup> Always

consult your occupational therapist in determining the appropriate weight.

*NOTE: if you consult Dr. Google, you'll find that nearly all mentions of figuring the weight of weighted blankets for children are 10 percent of body weight + 1lb. The reasoning is that because the blanket is typically longer and wider than the child, some of the weight is not actually resting on the child's body. However, at this time, I have been unable to find any official documentation detailing that calculation, outside of mentions from those who are also selling weighted blankets.*

While there have been safety studies on weighted blankets used by adults,<sup>10</sup> in the absence of clear data on the use of weighted blankets with children, a child must never be left unattended when a weighted blanket is being used.<sup>14</sup> Caregivers should pay special attention to signs that the blanket must be removed, including:<sup>14</sup>

- breathing difficulties
- nausea
- behavioral/physical reactions showing discomfort
- anxiety etc.

The ACOT reminds us that while weighted blankets can be very helpful, they should be treated and used with respect, and encourages therapists to "monitor the impact of the weighted blankets against the treatment goals."<sup>3</sup>

### For adults:

The safety studies for adults have been quite promising, with 63% of participants reporting lower anxiety and 78% preferring the weighted blanket as a calming modality.<sup>10</sup>

Researchers measured participants' vital signs before, during, and after using the weighted blanket, noting that when vital signs were out of range, "the values were similar during both the treatment and control phases, thus indicating that the WB was not the cause of deviation outside of the normative (safe) range."<sup>4</sup>

In one of her safety studies, Tina Champagne concluded that "...the use of the 30-pound WB did not cause any adverse influence on physiological safety in terms of blood circulation, as evidenced by the three vital signs data collected, for the entire 30 adult participants."<sup>4</sup> If the blankets had been too heavy, or there had been other safety concerns, researchers would expect to see elevated heart and pulse rates in response.

What was interesting to me, in reading thru her research, was the observation that body weight of adults did not "appear to factor in to the amount of weight preference" for the weighted blanket.<sup>7</sup> In other words, while parents and clinicians need to stick to the 10 percent of body weight range for minors (as

discussed above), safety studies have demonstrated no cause for concern in using blankets much heavier than 10 percent of body weight for an adult. Of course, it is worth mentioning again that the blanket must be used by choice, and the user must be able to remove the blanket whenever he or she wishes.<sup>7</sup>

More research is necessary before weighted blankets and other deep touch pressure stimulation techniques will be considered standard evidence-based practice; however, “the lack of evidence does not necessarily exclude the use of ... [deep pressure touch] as an effective therapy.”<sup>4</sup> The weighted blanket is “a humane, sensory, and recovery supportive treatment option” and therefore additional study is necessary to continue to support its use among various groups of patients.<sup>4</sup>

The 30 pound weighted blanket did not have any negative physiological effects for any of the adult participants.

If you have concerns about the safety of a weighted blanket for your particular situation, contact your occupational therapist or other health care provider. I am happy to use my experience and the information you provide about your preferences to help you select a blanket that is the best fit within the parameters set by your healthcare provider.

*What about all the other things that weighted blankets are supposed to help?*

Well, I’m not going to tackle all the things, but I am going to specifically address two broader categories that appear quite often in the research:

- chronic pain (which applies to neurofibromatosis, fibromyalgia, and others),
- mental health care (specifically anxiety and depressive disorders, and other illnesses that might lead to self-injury, or the possibility of needing restraint or seclusion in a hospital setting)

The weighted blanket is a humane, sensory, and supportive recovery treatment option.

## Chronic Pain

*Relief for an invisible disability*

The wheelchair rolls into the quiet halls. The beeps, the lights, the quiet voices are all too familiar. She’s been here many times before. It’s overwhelming. Angelica has had so many surgeries and tests on a regular basis that just pulling into the parking lot increases the tension in her neck. The pain, the tension, the pounding in her head; her senses are easily overwhelmed,

and she takes her typically happy self and crawls inside her shell.

Angelica’s mother tucks the weighted blanket in, using it to help position her body. She hangs on to the teddy that has accompanied her on all these trips and relaxes into the blanket’s soothing texture, feeling the pressure over her whole body.

She didn’t ask for this. No one would. But a weighted blanket helps. Today, she can do this.

What do weighted blankets and touch therapy have to do with chronic pain? Champagne, in some of her earlier research, noted that “Nurses and occupational therapists use sensory-based interventions within their scope of practice”<sup>9</sup> and another researcher named Krieger “found therapeutic touch to be effective in decreasing anxiety and pain and increasing wound healing.”<sup>15</sup>

Over in Western Europe, they use a fascinating word to describe multisensory stimulation: “...‘Snoezelen’ is based on two Dutch words meaning ‘to sniff’ and ‘to doze.’ The expression Snoezelen attempts to capture a lazy, relaxed feeling. ...The term[s] Snoezelen and ‘multisensory stimulation’ are used interchangeably in the United Kingdom...”<sup>16</sup>

Snoezelen is marketed as a whole multisensory environment or room designed to “stimulate one’s visual, auditory, proprioceptive, and olfactory systems by providing a variety of sensory activities.”<sup>2</sup> Snoezelen includes a wide variety of sensory options and therapies, and definitely includes weighted blankets.

The terms Snoezelen and multisensory stimulation are used interchangeably in the United Kingdom.

Snoezelen environments are as effective as, if not better than, teaching relaxation within the traditional pain clinic environment.

There is a whole series of studies on the use and effectiveness of Snoezelen, specifically for individuals who are in pain:

“As a leisure approach, Snoezelen appears to add quality to the culture of the care environment.”<sup>17</sup>

“This experimental study investigated the use of Snoezelen...against traditional relaxation within the pain clinic setting. ... The findings suggest that Snoezelen environments are as effective as, if not slightly better than, teaching relaxation within the traditional pain clinic environment for this group of patients.”<sup>18</sup>

“The patients who attended the sensory environment did slightly better than those who attended the traditional relaxation programme in terms of self-efficacy. Thus the current study indicates the potential for

future research into chronic pain management.”<sup>19</sup>

The results include an increase in quality of care, better relaxation, and improved pain management for patients who participated in the study.

*Do you need to find relief? Find out if a weighted blanket is right for you.*

## Mental Health

### *Avoiding a meltdown through self-organization*

Today was a Monday to beat all Mondays. Sam’s senses are in overdrive; he comes home from work perpetually exhausted, even to the point of tears, and still struggles to fall asleep. The depression, the chronic pain—it’s all too much. To top it off, he has to go back to work tomorrow. He kinda wishes Alexander would keep his terrible, horrible, no-good, very bad days.

Today is Monday. Sam is still working at a job that undervalues him and refuses to accommodate his disabilities; he’s still clinically depressed; he’s still in a great deal of pain; but today is different. He comes home, brews his favorite coffee, sinks into his bean bag, and covers himself with his brand-new weighted blanket. At night, instead of tears of exhaustion, he just might shed a tear of joy (shh... don’t tell) as he crawls under his weighted blanket and feels his entire body relax. Sleep follows shortly.

Weighted blankets are not just helpful for people with disabilities and/or sensory processing disorder who need to focus or center themselves, or for individuals with chronic pain.

*In 1999, Tina Champagne, M.Ed., OTR/L began initiating the use of weighted blankets in adult acute care mental health settings in an attempt to offer more self-controlled and individualized approaches to facilitate the consumer’s ability to self-nurture, increase coping skills, increase reality orientation, and actively engage in self-care during both acute dynamic states and for prevention purposes.<sup>7</sup>*

*...weighted blankets are...used in acute mental health services for sensory modulation purposes: to facilitate self-organization, positive change and the recovery process among consumers.<sup>7</sup>*

A weighted blanket is helpful for crisis intervention, preparatory purposes, and as a purposeful activity.

Weighted blankets facilitate the ability to feel safe, comforted, and grounded in the world.

A weighted blanket allows the user an increased ability to take care of themselves and participate in their recovery process. Recent studies have found that those suffering from disorders such as dementia,

depressive and anxiety disorders benefit from touch therapy.

*Therapists use their hands to apply deep pressure to various parts of the body, followed by the application of a soft brush to the skin and concluded by the application of a heavy weight such as a weighted blanket.<sup>10</sup>*

The use of a weighted blanket in acute mental health settings is helpful for “crisis intervention, preparatory purposes, and as a purposeful activity, which appears to help the consumer nurture, soothe, and care for himself or herself,”<sup>10</sup> and aids in the “stabilization and recovery process... [and] when used in an individualized manner, ...the weighted blanket appears to facilitate the ability to feel safe, comforted, and grounded in the world...”<sup>10</sup>

One of the primary motivations for introducing weighted blankets and other sensory integration therapies has been mandated efforts to reduce seclusion and restraint (S/R) rates, “in keeping with the President’s New Freedom Commission (Department of Health and Human Services, 2003).”<sup>7</sup>

“Over time, interdisciplinary staff recognized its influence as an individualized, multi-sensory modality that also appeared to decrease the need for the use of seclusion and restraint.”<sup>9</sup>

In two separate studies involving patients in a mental hospital, Champagne noted that “None of the study participants required the use of restraint or seclusion throughout the admission. Several participants had a history of restraint during previous admissions.”<sup>7</sup>

One of the beauties of the weighted blanket is that it puts the user in control: they can choose to use it, it provides the pressure they need, and they can take it off when they’re done.

Weighted blankets help the consumer nurture, soothe, and care for himself or herself and aids in the stabilization and recovery process.

In another study, other researchers noted that when a sensory room was available for a year, “[seclusion and restraint] use was reduced on the unit by 54 [percent]”<sup>9</sup>

While there are indications that further study is needed (when is it not?), the results were pretty impressive. When sensory rooms were made available to patients in yet another mental hospital, restraint and seclusion rates dropped by over 25 percent, and self-injury rates dropped by over 50 percent.<sup>20</sup>

Because there was no control group for comparison, it is impossible to make a definitive statement, but it

appears that there is a strong correlation between the use of weighted blankets and other sensory modalities and an increase in patients' abilities to self-restrain.<sup>20</sup>

A much more recent study noted that "Those individuals who used the weighted blanket reported significantly greater reductions in distress and clinician rated anxiety than those who did not" and experienced "improvements in a range of disturbed behaviours."<sup>21</sup>

The researchers concluded that "...these results would suggest that weighted blankets may be a useful resource to assist consumers to self-manage distress."<sup>20</sup>

Champagne repeatedly emphasizes the need for patient involvement in both the decision to utilize the weighted blanket, and for determining the amount of weight. In one example, she describes a "woman with a history of self-mutilation" described a weighted vest as a "bullet-proof vest" in which "nobody can hurt me." Instead of her behavior escalating to the point at which S/R would have been used, the woman now asks for her vest and finds the pressure across her back and chest helps her "stay in control."<sup>9</sup>

Champagne goes on to reiterate that "weighted items should be heavy enough to be effective, as determined by the individual, yet light enough to be removed at will" and that "the individuals' preferences and responses should be considered in determining duration of use."<sup>9</sup>

So, weighted blankets can assist a person struggling with mental illness to "self-nurture, increase coping skills, increase reality orientation, and actively engage in self-care", "facilitate self-organization, positive change and the recovery process", "help the consumer nurture, soothe, and care for himself or herself", and "facilitate the ability to feel safe, comforted, and grounded in the world" while "assisting consumers to self-manage distress"?

Weighted blankets can be a wonderful source of relaxation and a powerful antidote for pain.

Self-nurture. Increased coping skills. Actively engage in self-care. Self-organization. Self-soothe. Feel safe. Be comforted. Feel grounded. Self-manage distress. Increased ability to self-restrain.

That's the goal of good mental health care, isn't it? Self-containment and healthy coping skills? Sounds like an all-around win to me.

*Is a weighted blanket is right for you? [Click here to find out!](#)*

## Making your decision...

*What's the bottom line?*

The sentiment repeated several times across the literature is this: one of the beauties of the weighted blanket is that it puts the user in control. They can choose to use it, it provides the pressure they need, and they can take it off when they're done. When the user/patient is in control, they are truly able to relax.

"Weighted blankets and deep pressure touch may work well... both through psychological means (e.g. calming and 'cocooning', releasing anxiety) and physiological means (e.g.tactile input that decreases activity of the sympathetic nervous system)."<sup>13</sup>

Weighted blankets can be a wonderful source of relaxation and a powerful antidote for pain. When used properly, when the user is in control, they can bring positive improvement to the life of the person using the weighted blanket and also to those who love and care for them.

## Is a weighted blanket right for you?

*Take the Quiz*

Now that you've seen the research, take the quiz and answer the question: "Is a Weighted Blanket Right for you?" You can take the quiz for yourself, support someone else in assessing their own needs, or answer the questions for your child.

The quiz is made up of two parts. Part One uses the information here to quickly and easily assess if you would benefit from a weighted blanket. After submitting your responses, you will receive an email with your personalized results.

Part Two is designed to help you decide exactly what specifications and style of weighted blanket is right for you or your loved one, to assist you while you shop for a weighted blanket (with no obligation to purchase from me).

What are you waiting for? [Click here to take the quiz](#) or type: <http://lorasweightedblankets.com/assessment> into your browser.

Use this quiz to quickly and easily assess if you would benefit from a weighted blanket. You can take the quiz for yourself, support someone else in assessing their needs, or answer the questions for your child.

## Resources and Citations

1. Walker D, McCormack K. The Weighted Blanket -- An Essential Nutrient in a Sensory Diet. Everett, MA: Village Therapy, Therapro Publications; 2002.
2. Haegele JA, Poretta DL. Snoezelen Multisensory Environment: An overview of Research and Practical Implications. Palaestra: The Ohio State University [serial online]. 2014; 28:4. Available at: [https://www.researchgate.net/publication/273574572\\_Snoezelen\\_multi-sensory\\_environment\\_An\\_overview\\_of\\_research\\_and\\_practical\\_implications](https://www.researchgate.net/publication/273574572_Snoezelen_multi-sensory_environment_An_overview_of_research_and_practical_implications) Accessed 09/12/2015
3. Alberta College of Occupational Therapists, Ad Hoc Task Force. Commentary on l'Ordre des ergothérapeutes du Québec's Position Statement on Use of Weighted Covers. Edmonton, Alberta: Alberta College of Occupational Therapists; 2009 Dec. 11 p. Available at: <http://www.acot.ca> [PDF download] [http://www.acot.ca/files/Commentary\\_Weighted\\_Blankets\\_c\\_Append.pdf](http://www.acot.ca/files/Commentary_Weighted_Blankets_c_Append.pdf) Accessed 08/08/2015
4. Champagne T, Mullen B, Dickson D, & Krishnamurty S. Evaluating the Safety and Effectiveness of the Weighted Blanket with Adults During an Inpatient Mental Health Hospitalization. Occupational Therapy in Mental Health. 2015; 31:3, 211-233 Available at: <http://dx.doi.org/10.1080/0164212X.2015.1066220> Accessed 10/16/2015
5. Grandin T. Calming Effects of Deep Touch Pressure in Patients with Autistic Disorder, College Students, and Animals. Journal of Child and Adolescent Psychopharmacology. Mary Ann Liebert, Inc., Publishers [serial online]. 1992; 2:1. Available at: <http://www.grandin.com/inc/squeeze.html> Accessed 08/04/2015
6. Grandin T. Sensory Therapies and Autism. Temple Grandin's Website. Available at: <http://www.templegrandin.com> Accessed 08/04/2015
7. Champagne T, Mullen B, Dickson D. Exploring the Safety & Effectiveness of the Use of Weighted Blankets with Adult Populations. AOTA 2007: Proceedings of the American Occupational Therapy Association's Annual Conference, April 2007; St. Louis, MO. Available at: <http://www.ot-innovations.com> PDF Download: [http://www.ot-innovations.com/images/stories/PDF\\_Files/aota2007weighted\\_blanket\\_web\\_final\\_607.pdf](http://www.ot-innovations.com/images/stories/PDF_Files/aota2007weighted_blanket_web_final_607.pdf) Accessed 08/04/2015
8. Bettridge S, Appendix 1 in Darby PL, Pottinger A, Lamb A, Millard R, Perivolaris A, Vardy GS, Wong AHC., Restraint Minimization Taskforce: Final Report Seclusion and Restraint Use In Psychiatric Settings. Toronto, Ontario: Centre for Addiction and Mental Health. 2008, May. 51 p. Available at: <http://www.camh.ca> PDF Download: [http://www.camh.ca/en/hospital/about\\_camh/performance\\_and\\_accountability/Documents/Restraint%20Minimization%20Taskforce%20Report%20August%202008.pdf](http://www.camh.ca/en/hospital/about_camh/performance_and_accountability/Documents/Restraint%20Minimization%20Taskforce%20Report%20August%202008.pdf) Accessed 08/04/2015
9. Champagne T, Stromberg N. Sensory Approaches in Inpatient Psychiatric Settings: Innovative Alternatives to Seclusion & Restraint. Journal of Psychosocial Nursing [serial online]. 2004; 42:9. Available at: [https://www.researchgate.net/publication/8224547\\_Sensory\\_approaches\\_in\\_inpatient\\_psychiatric\\_settings\\_Innovative\\_alternatives\\_to\\_seclusion\\_restraint](https://www.researchgate.net/publication/8224547_Sensory_approaches_in_inpatient_psychiatric_settings_Innovative_alternatives_to_seclusion_restraint) Accessed 08/04/2015
10. Mullen B, Champagne T, Krishnamurty S, Dickson D, Gao R. Exploring the Safety and Therapeutic Effects of Deep Pressure Stimulation Using a Weighted Blanket. Occupational Therapy in Mental Health [serial online]. 24:65-89 · MARCH 2008. Available at: [https://www.researchgate.net/publication/233228002\\_Exploring\\_the\\_Safety\\_and\\_Therapeutic\\_Effects\\_of\\_Deep\\_Pressure\\_Stimulation\\_Using\\_a\\_Weighted\\_Blanket](https://www.researchgate.net/publication/233228002_Exploring_the_Safety_and_Therapeutic_Effects_of_Deep_Pressure_Stimulation_Using_a_Weighted_Blanket) Accessed 08/04/2015
11. Vaucelle C, Bonanni L, Ishii, H. Design of Haptic Interfaces for Therapy. CHI 2009: Proceedings of the 27th International Conference on Human Factors in Computing Systems. April 2009; ACM, New York, NY. 467-470. Available at [https://www.researchgate.net/publication/221518760\\_Design\\_of\\_Haptic\\_Interfaces\\_for\\_Therapy](https://www.researchgate.net/publication/221518760_Design_of_Haptic_Interfaces_for_Therapy) Accessed 08/04/2015
12. Gringas P, Green D, Wright B, Rush C, Sparrowhawk M, Pratt K, Algar V, Hooke N, Moore D, Zaiwalla Z, and Wiggs L. Weighted Blankets and Sleep in Autistic Children—A Randomized Controlled Trial, Pediatrics [serial online]. 2014; 134:2 Available at: [https://www.researchgate.net/publication/263935727\\_Weighted\\_Blankets\\_and\\_Sleep\\_in\\_Autistic\\_Children--A\\_Randomized\\_Controlled\\_Trial](https://www.researchgate.net/publication/263935727_Weighted_Blankets_and_Sleep_in_Autistic_Children--A_Randomized_Controlled_Trial) Accessed 08/04/2015
13. Ackerley R, Badre G, Olausson H Positive Effects of a Weighted Blanket on Insomnia. Journal of Sleep Medicine & Disorders [serial online]. 2015; 2:3:1022. Available at: [https://www.researchgate.net/publication/279846113\\_Positive\\_effects\\_of\\_a\\_weighted\\_blanket\\_on\\_insomnia](https://www.researchgate.net/publication/279846113_Positive_effects_of_a_weighted_blanket_on_insomnia) Accessed 08/04/2015
14. l'Ordre des ergothérapeutes du Québec's (OEQ). Position Statement on the use of Weighted Covers. College of Occupational Therapists of Québec. Montreal, Québec: Dec 2008. 4 p. Available at: <http://cotbc.org> PDF download: [http://cotbc.org/wp-content/uploads/OEQPositionStatement\\_Weighted-Covers.pdf](http://cotbc.org/wp-content/uploads/OEQPositionStatement_Weighted-Covers.pdf) Accessed 08/04/2015
15. Krieger D. Therapeutic touch inner workbook. Santa Fe, NM: Bear & Company; 1997.
16. Chitsey A, Haight B, Jones M. Snoezelen: A Mutisensory Environmental Intervention. Journal of Gerontological Nursing [serial online]. 2002; 28.3:41-9. Available at: [https://www.researchgate.net/publication/11450043\\_Snoezelen\\_A\\_Multi-sensory\\_Environmental\\_Intervention](https://www.researchgate.net/publication/11450043_Snoezelen_A_Multi-sensory_Environmental_Intervention) Accessed 08/04/2015
17. Burns I, Cox H, Plant H. Leisure or Therapeutics? Snoezelen and The Care of Older Persons with Dementia. International Journal of Nursing Practice [serial online]. 2000; 6:3 188-126 Available at: [https://www.researchgate.net/publication/12083805\\_Leisure\\_or\\_therapeutics\\_Snoezelen\\_and\\_the\\_care\\_of\\_older\\_persons\\_with\\_dementia](https://www.researchgate.net/publication/12083805_Leisure_or_therapeutics_Snoezelen_and_the_care_of_older_persons_with_dementia) Accessed 08/04/2015
18. Schofield P. Evaluating Snoezelen for Relaxation within Chronic Pain Management. British Journal of Nursing [serial online]. 2002; 11:12. Abstract available at: [https://www.researchgate.net/publication/11249546\\_Evaluating\\_Snoezelen\\_for\\_relaxation\\_within\\_chronic\\_pain\\_management](https://www.researchgate.net/publication/11249546_Evaluating_Snoezelen_for_relaxation_within_chronic_pain_management) Accessed 08/04/2015
19. Schofield P, Davis B. Sensory Stimulation (Snoezelen) versus Relaxation: A Potential Strategy for the Management of Chronic Pain. School of Nursing and Midwifery [serial online]. 2000; 22:15 Abstract available at: [https://www.researchgate.net/publication/12240879\\_Sensory\\_stimulation\\_%28snoezelen%29\\_vs\\_relaxation\\_A\\_potential\\_strategy\\_for\\_the\\_management\\_of\\_chronic\\_pain](https://www.researchgate.net/publication/12240879_Sensory_stimulation_%28snoezelen%29_vs_relaxation_A_potential_strategy_for_the_management_of_chronic_pain) Accessed 08/04/2015
20. Wale J, Belkin G, Moon R. Reducing the Use of Seclusion and Restraint in Psychiatric Emergency and Adult Inpatient Services— Improving Patient-Centered Care. The Permanente Journal [serial online]. 2011; 15:2 57-62 Available at: [https://www.researchgate.net/publication/51571753\\_Reducing\\_the\\_use\\_of\\_seclusion\\_and\\_restraint\\_in\\_psychiatric\\_emergency\\_and\\_adult\\_inpatient\\_services\\_Improving\\_patient-centered\\_care](https://www.researchgate.net/publication/51571753_Reducing_the_use_of_seclusion_and_restraint_in_psychiatric_emergency_and_adult_inpatient_services_Improving_patient-centered_care) Accessed 08/04/2015
21. Novak T, Newton JS, Mccaull, D, Macdonald N, Clarke T. Pilot Study of a Sensory Room in an Acute Inpatient Psychiatric Unit. Australasian Psychiatry. 2012; 20(5):401-6 Available at: [https://www.researchgate.net/publication/231213675\\_Pilot\\_study\\_of\\_a\\_sensory\\_room\\_in\\_an\\_acute\\_inpatient\\_psychiatric\\_unit](https://www.researchgate.net/publication/231213675_Pilot_study_of_a_sensory_room_in_an_acute_inpatient_psychiatric_unit) Accessed 08/04/2015