

ASSESS THE IMPACT NIGHT WORK HAS ON YOU

Write YES or NO and describe even more, this is for you !

Do you have problems sleeping in the daytime (e.g., sleep too short, too light, or get frequently interrupted) ?

Do you sometimes feel drowsy at work during the night ?

Have you noticed a change in your eating habits or your weight since you started working nights ?

Have you observed changes in your mood since you started working nights ?

Is night work a cause of tensions in your relationships with those close to you ?

Do you experience other problems due to your night work schedule ?
