

Questionnaire for sleep quality

A study protocol: validation on adolescents

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INTRODUCTION

One of the basic needs of every individual is sleep, which is a reversible and repetitive state and one of a basic physiological needs (1). It is important that it is long enough and of good quality (2). Recently sleep has been increasingly emphasized as one of the major public health factors, as we spend about a third of our lives sleeping and research shows that lack of sleep affects both our physical and mental health (3).

Sleep research in the pediatric population using self-report techniques has begun to develop in recent decades. There is an increasing trend towards translation and validation of various questionnaires (4).

Likewise, questionnaires that assess sleep disorders, excessive daytime sleepiness, and circadian preference in the population of children and adolescents in Slovenia have not yet been officially translated and validated. Data on the prevalence of various sleep indicators in Slovenia is also unknown.

METHOD

We will **develop a study protocol** for epidemiological study.

Protocol indicates that we will translate and validate questionnaires to assess different subjective sleep measures e.g.:

- quality of sleep,
- preferred chronotype,
- excessive daytime sleepiness.

The study will include the sample from the population of children and adolescents in **Slovenia**.

RESULTS

We will conduct a **epidemiological cross-sectional study** in primary and secondary schools in Slovenia.

Observed population will be **children and adolescents** aged from **13 to 18 years** (N = 3.000).

Measures:

- Adolescent Sleep-Wake Scale
- Pediatric Daytime Sleepiness Scale
- Epworth Sleepiness Scale for Children and Adolescents
- Children's Morningness-Eveningness Scale

We will add questions about **stress, anxiety** and **depressive symptoms, drug** and **medication use**, presence of **chronic diseases**, use of **nutritional supplements, sleep hygiene** and **sleeping conditions, family conditions** and **physical activity**.

CONCLUSION

Our newly developed questionnaire will be validated in Slovenian language. That is important because in Slovenia we do not have valid subjective measurements for sleep-related constructs.

Translated questionnaires will undergo the face of content validation with ten experts from different departments (paediatrics, neurology, public health, clinical psychology) and then the final questionnaires will efficiently acquire information about exposure sleep quality, preferred chronotype and excessive daytime sleepiness in Slovenia.

With modifications our questionnaire will be useful in other culturally similar countries in the observed population.

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