Sueño – Sleep Habits in HCHS/SOL

Sleep Questionnaire II (SQE/SQS) Question by Question Instructions

General Instructions:
This section of the interview asks additional questions about sleep patterns and impact of sleep problems. These questions also explore sleep issues more in depth and/or assess different areas of sleep such as circadian rhythms, insomnia, and sleep hygiene.

Question by Question Instructions:

Q1-5. These questions make up the Horne and Östberg Reduced Morningness and Eveningness Questionnaire used to assess the participant's biological rhythm. Emphasize that the responses given in this section should pertain to the PAST 2 WEEKS. The answer choices for Q1, Q3 andQ4 are ranges in clock time. DO NOT present the answer choices to the participant initially. Instead, allow the participant to tell you the time of day and mark the corresponding answer choice. For these questions, if a participant answers a time that is earlier than the earliest answer choice, mark the earliest choice. If a participant answers a time that is later than the latest answer choose, mark the latest choice. If the participant reports a time that corresponds to multiple answer choices, read both answer choices to the participant and ask them to choose the best choice.

Q1. The goal of this question is to understand the timing of the participant's internal clock. Therefore, the question is in regards to what time the participant would wake up from sleep if he/she had no responsibilities (getting to work, taking children to school) to worry about and could organize their own day. Allow the participant to tell you the time of day and mark the corresponding answer choice.

Q2. This question asks how the participant feels after waking at their normal waking time, not the time they chose on Q1.

Q4 A participant's "feeling best" peak is the time when the participant feels the most alert and energized. If the participant is unsure what a "feeling best" peak means, define this term as the time they feel the most alert and full of energy. Allow the participant to tell you the time of day and mark the corresponding answer choice.

Q5 If the participant is unsure what "morning" and "evening" types of people are, define these terms. A "morning" type tends to be more alert and full of energy in the morning whereas an "evening" type tends to be more alert and full of energy in the evening.

Q6-Q13. These questions make up the Insomnia Severity Index. Emphasize that for these questions that the participant is supposed to think about their PAST 2 WEEKS of sleep when answering these questions. Some participants do not have any insomnia symptoms ('no' response to Q10); in this case Q11-13 will be skipped.

Q6. This question refers to the severity of the participant's difficulty getting to sleep after turning off the lights for their longest sleep period.

Q7. This question refers to the severity of the participant's difficulty staying asleep for their longest sleep period. This can be because he/she wakes up frequently or has difficulty falling back to sleep after having woken up.

Q8. This question refers to the severity of the participant's ability to sleep for the entire time set aside for sleep – waking up earlier than they intended or needed to, or earlier than the alarm clock was set – with regards to their longest sleep period.

Q9. This question refers to the participant's overall sleep pattern, not their sleep quality. Their sleep pattern includes when they are able to fall asleep and wake up, duration, and whether they nap. For instance, a participant may not be satisfied with the fact that he is not able to sleep at night, so he has to nap during the day and that impedes him from doing other activities.

Q10. This question assesses whether or not the participant feels like they have any problem with their sleep. This could include poor quality sleep or trouble falling/staying asleep. If participants answer 'no' to this question, skip to Q14

Q11. If participant answers 'yes' to Q10, then ask Q11. This question asks the participant to think of the problem or problems they indicated in Q10 and describe the level to which these problems interfere with their daily functioning.

Q12. If participant answers 'yes' to Q10, then ask Q12. Again, participants are supposed to refer to the problem(s) mentioned in Q10. For this question the participant is asked to describe how noticeable the impairment caused by their sleep problem or problems is to others.

Q13. If participant answers 'yes' to Q10, then ask Q13. Again, participants are supposed to refer to the problem(s) mentioned in Q10. For this question, participants are asked to describe how distressed or worried they are about their sleep problem or problems.

Q14. This question assesses whether the participant has a television in the room that they usually sleep in. The television must be functioning. However, it does not matter whether the participant watches television in that room. If a participant answers 'no' to this question, then skip to Q16.

Q15-20. These questions assess whether the participant uses any activity or supplement to help them fall asleep. Emphasize that this is in the PAST 4 WEEKS. Only mark 'yes' if the participant intentionally does these activities with the purpose of helping them fall or stay asleep.

Q21-22. For these questions emphasize that we are assessing how many cups of CAFFEINATED coffee or tea they may drink in a typical day over the PAST 4 WEEKS. If participant asks for clarification, a cup is 8oz or about the size of a typical, small Styrofoam cup. For example the "venti" (20oz) size from Starbucks would count as 2 cups on these questions. If a participant drinks "half-caf" (half regular and half decaffeinated coffee) then divide however many cups they drink per day by 2 (if this does not equal a whole number round up to the nearest whole number).

Q23. Again, emphasize that the participant should only include caffeinated soda intake per day over the past four weeks. Lemon-lime soda and root-beer, among others, do not usually include caffeine. If the participant asks for clarification, a can of soda is 12oz. If someone drinks a 20oz bottle of soda that would count as 2 glasses or cans of soda. If someone drinks a 2 liter bottle of soda that would count as 5 glasses or cans.

Q24. Again, emphasize that the participant should only count caffeinated energy drinks . Energy drinks come in all sizes, so just record the number of individually packaged (shots, cans, bottles) caffeinated energy drinks that the participant ingests on a typical day.