

# Parental survey on COVID and sleep health in school-aged children

You are invited to participate in a research project being performed by the UBMD Pediatrics Sleep Center to measure how the COVID 19 pandemic has impacted the sleep of school-aged children throughout our community. By entering the survey, you are consenting to participate. No personal information is being collected. All answers are anonymous.

Please complete the survey below to describe how ONE of your children has been sleeping during this difficult time. You can complete multiple surveys if you have multiple school-aged children. We appreciate any time you can provide us.

If you have any additional questions concerning this research or your participation in it, please feel free to contact us or our university research office at any time at 716.323.0370. This research has been reviewed and approved by an Institutional Review Board ("IRB"). An IRB is a committee that provides ethical and regulatory oversight of research that involves human subjects. You may talk to them at (716) 888-4888 or email [ub-irb@buffalo.edu](mailto:ub-irb@buffalo.edu).

Thank you!

Drs. Hassinger, Perez and Monegro

UBMD Pediatrics Sleep Center

**The survey consists of questions about your child's sleep before COVID (Winter 2019-2020), during the lockdown (March 2020 to June 2020) and NOW, during the start of the 2020 school year (Fall 2020).**

**If you have more than one child aged 5 to 13, please complete one survey for each child. Try to answer the questions thinking of a typical week during each time period to give us an idea of how COVID has affected your child's sleep patterns.**

Have you completed this survey before for another child?  Yes  
 No

In years, how old is the child that you are describing in this survey?  5  6  7  8  
 9  10  11  12  
 13  
(As of today's date)

What is your child's gender?  Male  
 Female

What is the type of home in which the child lives for the majority of his or her time?  Apartment or condominium  
 Townhouse or split level  
 Semi-detached house  
 Single family home

Which of the following choices best describes the living situation of your child?  Single parent home  
 Single parent with extended relatives at home (aunt, uncle, grandparent)  
 Two parents in the same house  
 Splits time between different homes because parents are not together

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What is the total household income of home where the child spends the majority of his or her time?

- Less than \$25,000 per year  
 Between \$25,000 and \$49,999 per year  
 Between \$50,000 and \$99,999 per year  
 Between \$100,000 and \$149,999 per year  
 Between \$150,000 and \$249,999 per year  
 \$250,000 per year or more  
 Prefer not to say

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Are any of the adults in your child's house considered an "essential worker"?

- Yes  No

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**Please answer the following questions about your child's schooling and sleep habits BEFORE the pandemic began, in the winter of 2019-2020.**

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What type of school did your child attend BEFORE the pandemic?

- Not in school yet, too young  
 Public school  
 Charter school  
 Private or Catholic school  
 Home schooled  
(Choose one that best describes your child's school)

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How many hours of screen time did your child have in a typical weekday BEFORE the pandemic?

- 0-1 hour per day  
 1-3 hours per day  
 4-8 hours per day  
 More than 8 hours per day  
(This includes computer, tablet, phone and TV)

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Was the majority of the screen time (more than half) related to school activities?

- Yes  No

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BEFORE the pandemic, was your child's screen time different on weekends?

- Yes  No

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How many hours of screen time did your child have on a typical weekend BEFORE the pandemic?

- 0-1 hour per day  
 1-3 hours per day  
 4-8 hours per day  
 More than 8 hours per day  
(This includes computer, tablet, phone and TV)

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What time did your child go to bed on a typical weekday/school night BEFORE the pandemic?

\_\_\_\_\_ (Use the 24 hour clock (Ex: 8:30 pm = 20:30))

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BEFORE the pandemic, was your child's bedtime different on weekends?

- Yes  
 No

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On a typical weekend BEFORE the pandemic, what time did your child go to bed?

\_\_\_\_\_ (Use the 24 hour clock (Ex: 8:30 pm = 20:30))

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BEFORE the pandemic, around what time did your child wake up on a weekday?

\_\_\_\_\_ (Using the 24 hour clock, so 6am would be 06:00)

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Did they wake up at a different time on weekends?

- Yes  
 No

BEFORE the pandemic, around what time did your child wake up on the weekends?

(Using the 24 hour clock, so 6am would be 06:00)

**Choose the frequency for each of the items below related to your child's bedtime patterns BEFORE the pandemic:**

	Rarely (0 to 1 time per week)	Sometimes (2 to 4 times per week)	Usually (5 or more times per week)
Went to bed at the same time every night	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
At any point in the night, would sleep in a parent or sibling's bed	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Had a bad dream or nightmare	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Struggled at bedtime (cried, refused to stay in bed, etc)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Seemed tired or hyperactive during the day	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Did not get enough sleep	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

How would you describe your child's overall sleep BEFORE the pandemic?

- Poor  
 Fair  
 Good  
 Excellent

**Please think of a typical week for your child during the beginning of the pandemic in Buffalo when schools were closed (March through the summer of 2020).**

What time did your child go to bed on a typical weekday DURING the pandemic lock down?

(Use the 24 hour clock (Ex: 8:30 pm = 20:30))

DURING the lockdown, was your child's bedtime different on weekends?

- Yes  
 No

On a typical weekend, what time did your child go to bed?

(Use the 24 hour clock (Ex: 8:30 pm = 20:30))

DURING the lockdown, what time did your child wake up on weekdays?

(Using the 24 hour clock, so 6am would be 06:00)

Was this different on weekends?

- Yes  
 No

DURING the lockdown, what time did your child wake up on weekends?

(Using the 24 hour clock, so 6am would be 06:00)

How many hours of screen time did your child have DURING the pandemic lock-down?

- 0-1 hours per day  
 1-3 hours per day  
 4-8 hours per day  
 More than 8 hours per day  
 (This includes computer, tablet, phone and TV)

Was the majority of the screen time (more than half) during this period related to school activities?

- Yes    No

**Choose the frequency for each of the items below related to your child's bedtime patterns DURING the lockdown phase of the pandemic, from March through the summer of 2020:**

	Rarely (0 to 1 time per week)	Sometimes (2 to 4 times per week)	Usually (5 or more times per week)
Went to bed at the same time every night	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
At any point in the night, would sleep in a parent or sibling's bed	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Had a bad dream or nightmare	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Struggled at bedtime (cried, refused to stay in bed, etc)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Seemed tired or hyperactive during the day	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Did not get enough sleep	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

How would you describe your child's overall sleep DURING the first 6 months of the pandemic?

- Poor  
 Fair  
 Good  
 Excellent

**The last set of questions relates to how your child has slept since the school year has started in the fall of 2020.**

**As all local school districts and private schools have adopted different models for schooling based on space and safety planning, we ask you to describe how often your child attends in-person schooling (meaning physically goes to a school building) or does remote learning (any virtual classroom, synchronous or asynchronous).**

Did you change the type of school your child was attending because of the pandemic?

- Yes    No

What type of school is your child attending NOW in the fall of 2020?

- Public school  
 Charter school  
 Private or Catholic school  
 Home schooled  
 (Choose one that best describes your child's school)



At any point in the night, sleeps in a parent or sibling's bed	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Has a bad dream or nightmare	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Struggles at bedtime (cries, refuses to stay in bed, etc)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Seems tired or hyperactive during the day	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Does not get enough sleep	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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How would you describe your child's overall sleep NOW?

- Poor
- Fair
- Good
- Excellent

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Has anyone in your child's life had COVID?  Yes  No

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Owens JA, Spirito A, McGuinn M. The Children's Sleep Habits Questionnaire (CSHQ): psychometric properties of a survey instrument for school-aged children. Sleep 2000, Dec 15; 23 (8):1043-51