

SLEEP SURVEY FOR MINORS

SLM005 The next questions will be on sleep habits.

INTERVIEWER: HIT ENTER TO CONTINUE

IF AGE >=12 AND <18 GO TO SLM010

IF AGE >=3 and <12 then skip to SLM310

IF AGE <3 then skip to SLM610

SLM010 On a typical **weekday**, over the past month, how many hours and minutes do you think you slept? This may be different than the time spent in bed. Do not include time spent napping. For example: 7 hours and 45 minutes.

HOURS

<0-12> NUMBER **SLM010_H FMT_NUMERIC.**

<d> DON'T KNOW **(GO TO SLM020)**

<r> REFUSED **(GO TO SLM020)**

MINUTES

SLM010_M FMT_NUMERIC.

<0-59> NUMBER

SLM020 On a typical **weekend** day, over the past month, how many hours and minutes do you think you slept? This may be different than the time spent in bed. Do not include time spent napping. For example: 7 hours and 45 minutes.

HOURS

SLM020_H FMT_NUMERIC.

<0-12> NUMBER

<d> DON'T KNOW **(GO TO SLM030)**

<r> REFUSED **(GO TO SLM030)**

MINUTES

SLM020_M FMT_NUMERIC.

<0-59> NUMBER

SLM030 In the past month, did you have a daytime or evening nap that lasted more than 5 minutes?

<1> YES **SLM030 FMT_YES_NO.**

<2> NO **(GO TO SLM060)**

<d> DON'T KNOW **(GO TO SLM060)**

<r> REFUSED **(GO TO SLM060)**

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SLM040 In a typical week over the past month, how many days out of 7 did you usually have a daytime or evening nap?

<0> LESS THAN 1 DAY PER WEEK IN THE LAST MONTH

<1> 1 DAY

SLM040 FMT_SLP040_.

<2> 2 DAYS

<3> 3 DAYS

<4> 4 DAYS

<5> 5 DAYS

<6> 6 DAYS

<7> 7 DAYS

<d> DON'T KNOW

<r> REFUSED

SLM050 On average, how many hours and minutes do you usually nap at one time? For example: 0 hours and 45 minutes.

HOURS

SLM050_H FMT_NUMERIC.

<0-4> NUMBER

<d> DON'T KNOW

(GO TO SLM060)

<r> REFUSED

(GO TO SLM060)

MINUTES

SLM050_M FMT_NUMERIC.

<0-59> NUMBER

SLM060 Over the past month, how would you rate your sleep quality overall?
Excellent, Very Good, Good, Fair, or Poor?

<1> EXCELLENT

SLM060 FMT_QD4_.

<2> VERY GOOD

<3> GOOD

<4> FAIR

<5> POOR

<d> DON'T KNOW

<r> REFUSED

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SLM070 In the past 12 months, how often did you snore while you were sleeping?

(INTERVIEWER: HAND CARD)

- <1> NEVER **SLM070_FMT_SNORE_SNORT.**
 <2> RARELY (1-2 NIGHTS PER WEEK)
 <3> OCCASIONALLY (3-4 NIGHTS PER WEEK)
 <4> FREQUENTLY (5 OR MORE NIGHTS PER WEEK)
- <d> DON'T KNOW
 <r> REFUSED

SLM080 In the past 12 months, how often did you snort, gasp, or stop breathing while you were asleep?

(INTERVIEWER: HAND CARD)

- SLM080_FMT_SNORE_SNORT.**
- <1> NEVER
 <2> RARELY (1-2 NIGHTS PER WEEK)
 <3> OCCASIONALLY (3-4 NIGHTS PER WEEK)
 <4> FREQUENTLY (5 OR MORE NIGHTS PER WEEK)
- <d> DON'T KNOW
 <r> REFUSED

SLM090 Have you ever been told by a doctor or other health professional that you have sleep apnea?

- <1> YES **SLM090_FMT_YES_NO.**
 <2> NO (**SKIP TO SLM110**)
- <d> DON'T KNOW (**SKIP TO SLM110**)
 <r> REFUSED (**SKIP TO SLM110**)

SLM100 Which treatments for sleep apnea have you had?

(INTERVIEWER: HAND CARD. ENTER ALL THAT APPLY. ENTER 'x' WHEN DONE.)

- <1> NONE **SLM100_A_FMT_SLM100_.**
 <2> WEIGHT LOSS **SLM100_B_FMT_SLM100_.**
 <3> CPAP/BIPAP **SLM100_C_FMT_SLM100_.**
 <4> SURGERY **SLM100_D_FMT_SLM100_.**
 <5> DENTAL DEVICE **SLM100_E_FMT_SLM100_.**
 <6> TONSILS AND/OR ADENOIDS REMOVED **SLM100_F_FMT_SLM100_.**

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<7> OTHER, **PLEASE SPECIFY**

<d> DON'T KNOW

<r> REFUSED

SLM110 Have you ever been told by a doctor or other health professional that you have a sleep disorder other than sleep apnea including insomnia, restless leg, narcolepsy or another sleep condition?

(INTERVIEWER: HAND CARD. ENTER ALL THAT APPLY. ENTER 'x' WHEN DONE.)

<1> INSOMNIA

SLM110_A FMT_SLM110_.

<2> RESTLESS LEG

SLM110_B FMT_SLM110_.

<3> NARCOLEPSY

SLM110_C FMT_SLM110_.

<4> OTHER, **PLEASE SPECIFY**

SLM110_D FMT_SLM110_.

<5> NONE

<d> DON'T KNOW

<r> REFUSED

SLM120 **In the past month**, how often did you have trouble falling asleep?

(INTERVIEWER: HAND CARD)

SLM120 FMT_PASTMONTH.

<1> NEVER

<2> RARELY (1 TIME A MONTH)

<3> SOMETIMES (2-4 TIMES A MONTH)

<4> OFTEN (5-15 TIMES A MONTH)

<5> ALMOST ALWAYS (16-30 TIMES A MONTH)

<d> DON'T KNOW

<r> REFUSED

SLM130 **In the past month**, how often did you wake up during the night and have trouble getting back to sleep?

(INTERVIEWER: HAND CARD)

SLM130 FMT_PASTMONTH.

<1> NEVER

<2> RARELY (1 TIME A MONTH)

<3> SOMETIMES (2-4 TIMES A MONTH)

<4> OFTEN (5-15 TIMES A MONTH)

<5> ALMOST ALWAYS (16-30 TIMES A MONTH)

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<d> DON'T KNOW
<r> REFUSED

SLM140 **In the past month**, how often did you wake up too early in the morning and were unable to get back to sleep?

(INTERVIEWER: HAND CARD)

SLM140 FMT_PASTMONTH.

<1> NEVER
<2> RARELY (1 TIME A MONTH)
<3> SOMETIMES (2-4 TIMES A MONTH)
<4> OFTEN (5-15 TIMES A MONTH)
<5> ALMOST ALWAYS (16-30 TIMES A MONTH)

<d> DON'T KNOW
<r> REFUSED

SLM150 **In the past month**, how often did you feel excessively sleepy during the day?

(INTERVIEWER: HAND CARD)

SLM150 FMT_PASTMONTH.

<1> NEVER
<2> RARELY (1 TIME A MONTH)
<3> SOMETIMES (2-4 TIMES A MONTH)
<4> OFTEN (5-15 TIMES A MONTH)
<5> ALMOST ALWAYS (16-30 TIMES A MONTH)

<d> DON'T KNOW
<r> REFUSED

SLM200 How likely are you to doze off or fall asleep in the following situations, in contrast to feeling just tired? [This refers to your usual way of life in recent times. Even if you have not done some of these things recently, try to work out how they would have affected you.]

Sitting and reading?

(INTERVIEWER: HAND CARD)

SLM200 FMT_QD23_.

<1> NO CHANCE
<2> SLIGHT CHANCE
<3> SOME CHANCE

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<4> HIGH CHANCE

<d> DON'T KNOW

<r> REFUSED

SLM210 Watching TV?

(INTERVIEWER: HAND CARD)

SLM210 FMT_QD23_.

<1> NO CHANCE

<2> SLIGHT CHANCE

<3> SOME CHANCE

<4> HIGH CHANCE

<d> DON'T KNOW

<r> REFUSED

SLM220 Sitting inactive in a public place, such as a theater or a meeting?

(INTERVIEWER: HAND CARD)

SLM220 FMT_QD23_.

<1> NO CHANCE

<2> SLIGHT CHANCE

<3> SOME CHANCE

<4> HIGH CHANCE

<d> DON'T KNOW

<r> REFUSED

SLM230 As a passenger in a car for an hour without break?

(INTERVIEWER: HAND CARD)

SLM230 FMT_QD23_.

<1> NO CHANCE

<2> SLIGHT CHANCE

<3> SOME CHANCE

<4> HIGH CHANCE

<d> DON'T KNOW

<r> REFUSED

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SLM240 Lying down to rest in the afternoon when circumstances permit?

(INTERVIEWER: HAND CARD)

SLM240 FMT_QD23_.

<1> NO CHANCE
<2> SLIGHT CHANCE
<3> SOME CHANCE
<4> HIGH CHANCE

<d> DON'T KNOW
<r> REFUSED

SLM250 Sitting and talking to someone?

SLM250 FMT_QD23_.

(INTERVIEWER: HAND CARD)

<1> NO CHANCE
<2> SLIGHT CHANCE
<3> SOME CHANCE
<4> HIGH CHANCE

<d> DON'T KNOW
<r> REFUSED

SLM260 Sitting quietly after lunch?

SLM260 FMT_QD23_.

(INTERVIEWER: HAND CARD)

<1> NO CHANCE
<2> SLIGHT CHANCE
<3> SOME CHANCE
<4> HIGH CHANCE

<d> DON'T KNOW
<r> REFUSED

SLM270 Doing homework or taking a test?

SLM270 FMT_QD23_.

(INTERVIEWER: HAND CARD)

<1> NO CHANCE
<2> SLIGHT CHANCE
<3> SOME CHANCE
<4> HIGH CHANCE

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<d> DON'T KNOW
<r> REFUSED

[END SECTION; ACASI1]

SLM310 What is your child's usual bedtime on weeknights?

SLM310_H FMT_NUMERIC.

HOUR

<0-12> NUMBER

<d> DON'T KNOW (GO TO SLM320)
<r> REFUSED (GO TO SLM320)

MINUTES

SLM310_M FMT_NUMERIC.

<0-59> NUMBER

AND AM/PM

SLM310_Q FMT_AM_PM.

<1> AM
<2> PM

SLM320 What is your child's usual bedtime on weekends?

HOUR

SLM320_H FMT_NUMERIC.

<0-12> NUMBER

<d> DON'T KNOW (GO TO SLM330_PRE)
<r> REFUSED (GO TO SLM330_PRE)

MINUTES

SLM320_M FMT_NUMERIC.

<0-59> NUMBER

AND AM/PM

SLM320_Q FMT_NUMERIC.

<1> AM
<2> PM

SLM330_PRE The following statements are about your [MINOR'S FIRST NAME]'s sleep habits and possible difficulties with sleep. Think about the past week in your life when

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you answer the questions. If last week was unusual for a specific reason, choose the most recent typical week.

INTERVIEWER: HIT ENTER TO CONTINUE

SLM330 Your child goes to bed at about the same time at night

(INTERVIEWER: HAND CARD)

SLM330 FMT_AUSRN.

- <1> ALWAYS (7)
- <2> USUALLY (5-6)
- <3> SOMETIMES (2-4)
- <4> RARELY (1)
- <5> NEVER (0)

- <d> DON'T KNOW
- <r> REFUSED

SLM340 Your child falls asleep within 20 minutes of going to bed

(INTERVIEWER: HAND CARD)

SLM340 FMT_AUSRN.

- <1> ALWAYS (7)
- <2> USUALLY (5-6)
- <3> SOMETIMES (2-4)
- <4> RARELY (1)
- <5> NEVER (0)

- <d> DON'T KNOW
- <r> REFUSED

SLM350 Your child resists going to bed at bedtime

SLM350 FMT_AUSRN.

(INTERVIEWER: HAND CARD)

- <1> ALWAYS (7)
- <2> USUALLY (5-6)
- <3> SOMETIMES (2-4)
- <4> RARELY (1)
- <5> NEVER (0)

- <d> DON'T KNOW
- <r> REFUSED

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SLM360 Your child sleeps about the same amount each day

(INTERVIEWER: HAND CARD)**SLM360 FMT_AUSRN.**

- <1> ALWAYS (7)
- <2> USUALLY (5-6)
- <3> SOMETIMES (2-4)
- <4> RARELY (1)
- <5> NEVER (0)

- <d> DON'T KNOW
- <r> REFUSED

SLM370 Your child is restless and moves a lot during sleep

(INTERVIEWER: HAND CARD)**SLM370 FMT_AUSRN.**

- <1> ALWAYS (7)
- <2> USUALLY (5-6)
- <3> SOMETIMES (2-4)
- <4> RARELY (1)
- <5> NEVER (0)

- <d> DON'T KNOW
- <r> REFUSED

SLM380 Your child snores loudly

(INTERVIEWER: HAND CARD)**SLM380 FMT_AUSRN.**

- <1> ALWAYS (7)
- <2> USUALLY (5-6)
- <3> SOMETIMES (2-4)
- <4> RARELY (1)
- <5> NEVER (0)

- <d> DON'T KNOW
- <r> REFUSED

SLM390 Your child naps during the day

(INTERVIEWER: HAND CARD)**SLM390 FMT_AUSRN.**

- <1> ALWAYS (7)
- <2> USUALLY (5-6)
- <3> SOMETIMES (2-4)

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<4> RARELY (1)
 <5> NEVER (0) **(SKIP TO SLM400)**

<d> DON'T KNOW **(SKIP TO SLM400)**
 <r> REFUSED **(SKIP TO SLM400)**

SLM395 How long do the naps usually last?

HOURS **SLM395_H FMT_NUMERIC.**

<0-4> NUMBER
 <d> DON'T KNOW **(GO TO SLM400)**
 <r> REFUSED **(GO TO SLM400)**

MINUTES **SLM395_M FMT_NUMERIC.**

<0-59> NUMBER

SLM400 What is the average number of night wakings per night?

<0-12> NUMBER **SLM400 FMT_NUMERIC.**

<d> DON'T KNOW
 <r> REFUSED

SLM420 What time does your child usually wake up on weekdays?

<0-12> NUMBER **SLM420_H FMT_NUMERIC.**

<d> DON'T KNOW **(GO TO SLM430)**
 <r> REFUSED **(GO TO SLM430)**

MINUTES **SLM420_M FMT_NUMERIC.**

<0-59> NUMBER

AND AM/PM **SLM420_Q FMT_AM_PM.**

<1> AM
 <2> PM

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SLM430 What time does your child usually wake up on weekends?

HOUR **SLM430_H FMT_NUMERIC.**

<0-12> NUMBER

<d> DON'T KNOW **(GO TO HFM101)**

<r> REFUSED **(GO TO HFM101)**

MINUTES **SLM430_M FMT_NUMERIC.**

<0-59> NUMBER

AND AM/PM **SLM430_Q FMT_AM_PM.**

<1> AM

<2> PM

[END SECTION; GO TO HFM101]

SLM610 The following questions are about your child's sleep habits and possible difficulties with sleep.

In what position does your child sleep most of the time?

<1> ON HIS/HER BELLY **SLM610_SLM610_.**

<2> ON HIS/HER SIDE

<3> ON HIS/HER BACK

<d> DON'T KNOW

<r> REFUSED

SLM620 How much time does your child spend in sleep during the NIGHT, between 7 in the evening and 7 in the morning?

HOURS: **SLM620_H FMT_NUMERIC.**

<0-12> HOURS

<d> DON'T KNOW **(GO TO SLM630)**

<r> REFUSED **(GO TO SLM630)**

MINUTES: **SLM620_M FMT_NUMERIC.**

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<0-59> MINUTES

<d> DON'T KNOW

<r> REFUSED

SLM630 How much time does your child spend in sleep during the DAY, between 7 in the morning and 7 in the evening?

HOURS:

SLM630_H FMT_NUMERIC.

<0-12> HOURS

<d> DON'T KNOW

(GO TO SLM640)

<r> REFUSED

(GO TO SLM640)

MINUTES:

SLM630_M FMT_NUMERIC.

<0-59> MINUTES

<d> DON'T KNOW

<r> REFUSED

SLM640 What is the average number of night wakings per night?

<0-12> NUMBER

SLM640 FMT_NUMERIC.

<d> DON'T KNOW

<r> REFUSED

SLM650 How much time during the night does your child spend in wakefulness, from 10 in the evening to 6 in the morning?

HOURS:

SLM650_H FMT_NUMERIC.

<0-8> NUMBER

<d> DON'T KNOW

(GO TO SLM660)

<r> REFUSED

(GO TO SLM660)

AND MINUTES

SLM650_M FMT_NUMERIC.

<0-59> NUMBER

<d> DON'T KNOW

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<r> REFUSED

SLM660 How long does it take to put your child to sleep in the evening?

HOURS: **SLM660_H FMT_NUMERIC.**

<0-4> NUMBER

<d> DON'T KNOW **(GO TO SLM670)**

<r> REFUSED **(GO TO SLM670)**

AND MINUTES **SLM660_M FMT_NUMERIC.**

<0-59> NUMBER

<d> DON'T KNOW

<r> REFUSED

SLM670 How does your child fall asleep?

(INTERVIEWER: HAND CARD. ENTER ALL THAT APPLY. ENTER 'x' WHEN DONE.)

<1> WHILE FEEDING **SLM670_A FMT_NUMERIC.**

<2> BEING ROCKED **SLM670_B FMT_NUMERIC.**

<3> BEING HELD **SLM670_C FMT_NUMERIC.**

<4> IN BED ALONE **SLM670_D FMT_NUMERIC.**

<5> IN BED NEAR PARENT **SLM670_E FMT_NUMERIC.**

<d> DON'T KNOW

<r> REFUSED

SLM680 When does your child usually fall asleep for the night?

HOUR **SLM680_H FMT_NUMERIC.**

<0-12> NUMBER

<d> DON'T KNOW **(GO TO SLM690)**

<r> REFUSED **(GO TO SLM690)**

MINUTES **SLM680_M FMT_NUMERIC.**

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<0-59> NUMBER

<d> DON'T KNOW

<r> REFUSED

AND AM/PM

SLM680_Q FMT_AM_PM.

<1> AM

<2> PM

SLM690 Do you consider your child's sleep as a serious problem, a small problem, or not a problem at all?

SLM690 FMT_SLM690.

<1> A SERIOUS PROBLEM

<2> A SMALL PROBLEM

<3> NOT A PROBLEM AT ALL

<d> DON'T KNOW

<r> REFUSED

[END SECTION; HFM101]