

Putting Research to Work for Military Families



Focus:
Multiple
Branches

Daily Insufficient Sleep and Active Duty Status

Chapman, D. P., Liu, Y., McKnight-Eily, L. R., Croft, J. B., Holt, J. B., Balkin, T. J., & Giles, W. H. (2015). Daily insufficient sleep and active duty status. *Military Medicine*, 180(1), 68-76. doi:10.7205/MILMED-D-14-00158

SUMMARY: Given the importance of sleep in health outcomes, phone survey data were used to examine the relationship between active duty status and sleep issues. Active Duty service was associated with an increase in insufficient sleep over the past 30 days.

KEY FINDINGS:

- Among adults age 64 or less, 14% of those with recent Active Duty service, 13% with past Active Duty service, and 11% of civilians reported insufficient sleep over the past 30 days.
- Among adults age 64 or less, self-reported daily insufficient sleep was 33% more likely for military personnel than civilians.
- Among adults over age 65, sleep scores did not vary with respect to a history of military service.

IMPLICATIONS FOR PROGRAMS:

Programs could:

- Provide classes on relaxation techniques for recently returned Service members
- Offer workshops on sleep hygiene, teaching skills in enhancing the quality and duration of sleep
- Educate Service members on potential increased risks associated with insufficient sleep, such as impairment in operating a motor vehicle

IMPLICATIONS FOR POLICIES:

Policies could:

- Monitor Service members' work schedules to ensure they have sufficient time for rest
- Recommend that Service members be routinely screened for sleep practices and associated challenges
- Encourage awareness campaigns on installations regarding the importance of a healthy work-life balance and sufficient sleep

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METHODS

- Data was drawn from the 2009 and 2010 Behavioral Risk Factor Surveillance System random telephone survey of American adults.
- Daily sleep scores were based on self-reports of sleep and rest quality over the past 30 days.
- Respondents answered questions related to military service, binge drinking, smoking obesity, physical inactivity, and mental distress.

PARTICIPANTS

- The sample included 566,861 adults (aged 18 – 64 years old) and 271,202 older adults (aged 65 and over).
- Among 18 – 64 year olds, 1% of respondents reported recent Active Duty, and 7% reported past Active Duty service; among respondents over age 65, 1% reported recent Active Duty service, and 25% reported past Active Duty Service.
- The majority of those with recent (81%) or past (93%) Active Duty status were male, while those with no Active Duty status tended to be female (57%).
- Service branch data were not provided.

LIMITATIONS

- A key variable, insufficient sleep, was based on loosely defined recall data which may have been affected by recall bias.
- Sleep scores were measured by a single item that assessed both rest and sleep, constructs that are related but not synonymous.
- Mental health questions were dichotomous (“good” vs “not good”), preventing researchers from examining shades of well-being.

AVENUES FOR FUTURE RESEARCH

Future research could:

- Examine correlates of sleep difficulties among Service members (e.g., mental health issues or traumatic brain injury)
- Consider research-based definitions of “sufficient sleep” to strengthen study
- Examine the length of time since the Service member returned from deployment in relationship to sleep

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