Sleep as an Occupation in College Students
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INTRODUCTION

• The average person spends 1/3 of his or her life sleeping (Curcio et al., 2006).
• College students have poor quality and quantity of sleep resulting in poor performance in student related occupations, and academic performance.
• Minimal evidence examines the relationship between self-efficacy, sleep, and occupational performance in college students.
• OTs can develop interventions to improve sleep problems by modifying the environment and performance patterns of college students.

STATEMENT OF PURPOSE

1. Measure sleep quality and patterns of sleep in undergraduate college students
2. Explore the relationship between sleep, academic self-efficacy and student characteristics
   • First-generation college students
   • Students with disabilities
   • Student athletes

SLEEP AS AN OCCUPATION

• Sleep is vital for all human life.
• Sleep quality may result in behavioral, occupational, psychological, cognitive impairments and even premature death (Curcio, et al., 2006).

SLEEP DISORDERS

• Common sleep disorders include insomnia, sleep apnea and narcolepsy (Buck, 2013).
• Narcolepsy affects 16% of college students (Gaultstein, 2010).

COLLEGE STUDENTS

• University students often have trouble falling asleep and staying asleep for 7-10 hours a night (CDC, 2013).
• Athletes, first generation students & students with disabilities were shown to have a higher risk of experiencing sleep disturbances.

SLEEP AND OCCUPATIONAL THERAPY

• Rest and sleep are categorized as occupations in the Occupational Therapy Practice Framework (ADTA, 2014).
• Sleep is the only occupation that cannot be performed by another person (Penderetti, 2010).
• OTs implement interventions to address sleep insufficiency and sleep disorders (LeFrand et al., 2014).

REVIEW OF LITERATURE

1. Psychological, sleep, academic self-efficacy, and performance in college students.

PARTICIPANTS

• Undergraduate college students
• 18 – 25yo, no diagnosed sleep disorders

METHODOLGY

Participants

<table>
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<tr>
<th>Gender</th>
<th>N</th>
<th>%</th>
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<tbody>
<tr>
<td>Male</td>
<td>27</td>
<td>13</td>
</tr>
<tr>
<td>Female</td>
<td>182</td>
<td>87</td>
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</tbody>
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Sample Survey Questions
1. During the past month, did you usually get a full night’s sleep at night?
2. During the past month, how long (in minutes) did you usually sleep in the morning?
3. During the past month, how many hours of actual sleep did you get at night?
4. During the past month, how often do you wake up during the night?
5. During the past month, how often do you feel sleepy during the day?
6. During the past month, how often do you feel tired during the day?
7. During the past month, how often do you feel tired during the day?
8. During the past month, how often do you feel tired during the day?
9. During the past month, how often do you feel tired during the day?
10. During the past month, how often do you feel tired during the day?

DATA ANALYSIS

• Quantitative Data: Statistical Package Social Sciences Version 22.0 (SPSS V22.0) Pearson’s r correlation coefficient
• Qualitative Data: Open ended questions regarding sleep disturbances

RESULTS

• Participants:
  - Sleep Quality: 74.7
  - Poor Sleep Quality: 135

DISCUSSION

• Results support existing evidence suggesting college students are sleep deprived.
• Over ¼ of participants reported sleep issues that could be addressed by an occupational therapist.

SUGGESTIONS FOR FUTURE RESEARCH

• Focus on key finding, which suggests that over ¼ of undergraduate students have poor sleep quality and/or quantity.
• Conduct further studies with college students to determine specifically what is affecting their sleep quality and quantity and how it varies across time.
• Focus on specific student categories, ex: students with disabilities

SUGGESTIONS FOR OCCUPATIONAL THERAPY

• OTs can help improve the performance of sleep as an occupation.
• Interventions to improve sleep quality through environmental modifications, client education, and promotion of good sleeping habits.
• Create sleep promotion programs targeting young adults to address their unique biological and physical needs.

REFERENCES


LIMITATIONS

• Responses based on self-report, weak correlations possibly due to small sub-category sample sizes.