

Only 1% of social service policies for children include information about healthy sleep

June 8 2019



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Preliminary results from a new study indicate that a mere 1% of U.S. social service policies impacting children include material regarding



healthy sleep education and promotion.

Results show that <u>healthy sleep</u> was included in only seven of 513 (1%) of the policies targeted in the review of the following social service programs: Special Supplemental Nutrition (WIC), Healthy Start, Head Start, Children's Health Insurance and Medicaid, Child Welfare, and Juvenile Justice. While Healthy Start provided the most mentions (four) of healthy sleep in manualized educational information related to infant safe sleep, no other programs provided healthy sleep education or promotion for older <u>children</u> above 5 years of age. Child Welfare and Juvenile Justice <u>policy</u> advised on compliance-driven sleep standards, such as providing available space and beds to children and youth.

"We were surprised at the scarcity of healthy sleep-related information in the current social policies impacting <u>vulnerable children</u> in the United States," said principal investigator and lead author Abhishek Pandey, M.D., a physician scientist and affiliated faculty at the University of South Florida in Tampa. "No studies have previously examined these programs through a social justice policy lens and identified ways to promote healthy sleep."

Pandey conducted the study with co-principal investigator Kerry Littlewood, Ph.D., who is also faculty at the University of South Florida School of Social Work. Other collaborators were: Lawrence Cooper, LCSW, The Children's Home; Shima Carter, MSW, AAJ Research & Evaluation; Michelle Rosenthal, Ph.D., Data with Purpose; and Rusty Bennett, Ph.D., MSW, Collaborative Solutions, Inc.

Littlewood and Carter conducted a thematic and <u>content analysis</u> of 513 administrative program policies and manuals from large social service systems with programs serving more than 22.3 million vulnerable children and families facing adverse childhood experiences and health disparities. Their analysis assessed for the inclusion of healthy sleep



education or promotion methods.

The authors also used Bardach's eightfold path method of policy analysis to examine policy options related to healthy sleep promotion and identify targets for intervention. They determined that the most viable touchpoints for sleep promotion in child-related social policy are benefit re-enrollment, intake, home-visits, home safety assessments, family team meetings, and case closure visits.

According to the authors, they coined the "Sleep Promotion Policy Practice" as a strategy to encourage healthy sleep practice in policies, procedures, guidelines, manuals, supplemental documents and other information that provides guidance to front-line social workers, who tend to get very little guidance on how to promote healthy sleep among the vulnerable children and families they serve.

"These results impact the most vulnerable, low-income children and families, who are often experiencing trauma," said Pandey.

"Intentionally integrating healthy sleep education and promotion into existing programs may be an essential intervention for trauma-informed care. Future studies could use the policy recommendations of this study to improve the integration of healthy sleep into our training and Sleep Promotion Policy Practice."

The research abstract was published recently in an online supplement of the journal *Sleep* and will be presented Sunday, June 9, in San Antonio at SLEEP 2019, the 33rd annual meeting of the Associated Professional Sleep Societies LLC (APSS), which is a joint venture of the American Academy of Sleep Medicine and the Sleep Research Society.

Last year at SLEEP 2018 in Baltimore, Pandey presented <u>data from a study</u> showing that there are no state <u>child welfare</u> administrative policies specifically promoting healthy sleep.



More information: Abhishek Pandey et al, 0994 Thematic, Content and Policy Analysis of Sleep Health Promotion in Social Service Policies Impacting The Most Vulnerable Children In The United States, *Sleep* (2019). DOI: 10.1093/sleep/zsz067.991

Provided by American Academy of Sleep Medicine

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