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in this population. We therefore surveyed foster caregivers from across the U.S. about the sleep of children in their care. We also examined correlates of sleep quality and problems in these children.

Materials and Methods: $N=485$ foster caregivers from 46 U.S. states completed an online survey including questions about the sleep quality and problems of one child in their care (range 4–11 years; M age=6.4; $SD=2.2$). Children's average length of stay in the current home was 16.5 months ($SD=16.3$). Caregivers were mostly married (72%) White (90%) females (97%).

Results: On average, children required more than 45 minutes to fall asleep at night and spent more than 30 minutes awake during the night. The most common sleep-related problems reported were moving to another's bed during the night (86.8%), nightmares (51.2%), sleep terrors (34%), and bedwetting (31.6%). Number of previous foster placements was positively associated with report of nightmares ($r = .11, p < .05$), night terrors ($r = .17, p < .01$), and sleep walking ($r = .18, p < .01$). Duration of the current foster placement was negatively related with current sleep quality ($r = -.19, p < .001$) and positively associated with daytime sleepiness ($r = .13, p < .05$) and several types of sleep problems. Number of minor children in home (range 1–6), whether the child had their own room, caregiver age and the amount of time the caregiver was a licensed foster parent were not associated with any child sleep variable.

Conclusions: In a large national survey focused on sleep, foster caregivers reported a wide range of sleep problems among the children in their care. In addition to high rates of various sleep-related problems, findings suggest that, irrespective of various caregiver and environmental factors, sleep is adversely affected by number of foster care placements. Further, even after children have been in a stable placement for an extended period, their sleep does not necessarily improve. Given that poor sleep is associated with negative mental and physical health outcomes, it is imperative to better understand the role of poor sleep health among foster care children and to develop evidence-based sleep interventions for this vulnerable population.

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SLEEP QUALITY IN COVID-19 PATIENTS AND ITS ASSOCIATION WITH SEVERITY OF COVID

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Introduction: Bad sleep quality is associated with dysregulated immune response; therefore an individual is prone to develop various viral infections. Aim of the study is to assess quality of sleep in COVID 19 patients and its association with severity of disease.

Materials and Methods: Prospective questionnaire based study. One hundred and twenty three subjects with microbiologically confirmed COVID 19 were administered Pittsburgh Sleep Quality Index (PSQI) questionnaire. Disease severity was assessed with HRCT thorax. Demographic data and co morbidities were noted. Correlation between quality of sleep parameters and disease severity determined.

Results: Analysed data of 123 subjects. Mean age was 51.69 ± 13.17 years. Male: Female ratio was 2.1:1. Co-morbidities were found in 41%; among which Diabetes mellitus, Hypertension, combined DM and HTN, CAD, Hypothyroidism and Airway diseases were 39%, 37%, 22%, 23%, 14% and 10% respectively. Out of 118 patients with HRCT, based on CT Severity Index, subjects with mild, moderate and severe disease were 46% (54), 37% (44) and 17% (20) respectively. Based on global PSQI, 51% (62) had bad quality of

sleep. Good or bad quality of sleep doesn't have association with age and gender. Bad subjective sleep quality were reported in 21% subjects and it's not related to disease severity grades. Insomnia (Sleep latency of >30min) reported in 22% of the subjects and it's correlated with severe COVID disease (P value: 0.095; <0.10). Sleep duration of less than 7 hours were noted in 43% of the subjects and not correlated with severity grades. Poor habitual Sleep efficiency noted in 16% of subjects. Sleep disturbances were noted in 83% of subjects and its not correlated with severity grades. Use of medications for sleep were noted in 23% of subjects. Day time dysfunction noted in 45% of the patients. Among subjects with good quality sleep and bad quality sleep, 10% and 23% were having severe disease respectively. Out of twenty subjects with severe disease 70% had bad sleep quality (global PSQI) and less than 7hours sleep duration.

Conclusions: In this study we observed severe COVID is associated with bad quality sleep and reduced sleep duration. Also sleep quality (global PSQI) in COVID 19 subjects compared to general Indian population reported in other studies is significantly bad. Global PSQI can be used as screening instrument to predict severity of COVID 19. Validation of global PSQI as a screening instrument for development of severe COVID 19 is recommended.

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SLEEP QUALITY OF PARENTS AND CHILDREN DURING THE COVID-19 PANDEMIC – A SOUTH-BRAZILIAN SAMPLE

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Introduction: In March 2020, the WHO (World Health Organization) declared the outbreak of the disease caused by the new coronavirus, called COVID-19, as a pandemic. With this, the Brazilian government decreed on March 18, 2020, the total closure of non-essential activities. Furthermore, during this period, children and adolescents were challenged by changes that included remote classes and altered routine habits that could affect sleep habits.

Materials and Methods: Aligned case-control study, study 1 was through an online questionnaire, made available to parents and children between April and July 2020, the longest quarantine period in Brazil. The sleep of parents and adolescents was characterized using the Pittsburgh Sleep Quality Index and the Epworth Sleepiness Scale. For children ages 0-3, parents completed the Brief Infant Sleep Questionnaire, for children ages 4-12, the Children's Sleep Disorder Scale. Parents also subjectively reported their perception of sleep habits during social distancing. Study 2 started from April 5th to July 30th, 2021, using the same questionnaires as in Study 1. Both in Study 1 and 2, the georeferencing method was used to identify which macro-regions of Rio Grande do Sul / Brazil obtained worse sleep quality. Study 2 integrates the performance of actigraphy, which, for logistical reasons, elected residents of Porto Alegre / Rio Grande do Sul to participate.

Results: In study 1, 5,007 responses were obtained throughout Brazil, 788 with children under 18 years of age. Of the 788 parent respondents, 577 resided in Rio Grande do Sul. We chose to analyze the data from Rio Grande do Sul, as there is greater homogeneity between the containment of the spread of COVID-19 than in other regions of Brazil. Thus, the results revealed that of the 577 parents, 69.8% had sleep disorders, 58.6% in children aged 0 to 3 years, 31.9% in the range from 4 to 12 years (with a predominance of sleep disorders. Sleep initiation or maintenance) and 56.6% in adolescents. Gender (female) and children with sleep disorders were significant predictors of a sleep problem in parents ($p < 0.005$). The subjective perception of concerns revealed related to emotional concerns such as anxiety and fear in adults and due to changes in the routine of children and adolescents. Regarding georeferencing in study 1, in Rio Grande do Sul, 1,729 responses (69.7%) were from the Metropolitan Region of Porto Alegre, of these 1,155 cases (66.8%) had poor sleep quality and sleep disorders according to score Global PSQI ≥ 5 . Currently, the data are being organized for the analysis of Study 2, it obtained 1,559 responses from Brazil, of which 830 resided in Rio Grande do Sul and of these 135 parents responded to the two studies and to the actigraphy collections, carried out in the time 23 collections.