



# Teen Sleep Issues and School Start Times, Part II

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Part I of this article, presented in the June *Pennsylvania Psychologist* (Karafin, 2013), summarized the research

about adolescent circadian rhythms, and the importance of sufficient sleep for physical and mental health and cognitive functioning. Sleep deprivation and shortened sleep often lead to significant consequences for students' learning and comfort. This article will focus on positive sleep hygiene and the progressive moves by three school districts to establish school start times that were developmentally appropriate for their students.

### Positive sleep hygiene

Fixing sleep problems may be as simple as repairing sleep hygiene or pre-bed habits. Major habits to reinforce are as simple as:

1. Promote a consistent bedtime and bedtime routines.
2. Avoid caffeine in the late afternoon and evening.
3. Avoid books, games, or television programs that are emotionally charged at night.
4. Get regular exercise but avoid exercise/horseplay before bed.
5. Do not take naps. Naps interfere with the circadian rhythm.
6. Turn off the electronic lights of laptops, computers, iPads, cell phones, etc., at bedtime. Electronic light promotes wakefulness.
7. Wake up with bright light.

### Experiences of schools with delayed start times

In 1997, the Minneapolis Public School District changed its school start and dismissal times from 7:15 to 8:40 a.m. and from 1:45 to

3:20 p.m., respectively. The results suggested clear statistical evidence that students who do not experience a sleep lag syndrome report higher grades, less depression, fewer at-risk behaviors and fewer drop outs (Wahlstrom, 2002). Positive change in attendance rate and a reduction in school lateness due to oversleeping were statistically significant. A three-year study of grade trends did not show statistically significant improvement; however, there was a gradual trend noted indicating an increase in grades. Contrary to expectation, changing the morning start times did not encourage students to stay up an hour later on school nights; the statistics showed that students continued to go to bed at the same times, reinforcing that the circadian rhythm causes feelings of sleepiness regardless of the wake-up time.

The Wilton, Connecticut, schools delayed their start time for secondary students by 40 minutes to 8:15 a.m. The Wilton League of Women Voters prepared a report of their study group (2002) recommending that the Wilton Board of Education delay the start time for instruction at the Wilton High School and Middlebrook Middle School in order to provide the best opportunity for student learning and to promote adolescent health and safety. Specifically they recommended that the school district set a high priority on the health and safety of its adolescent students and offer them the opportunity to learn when they are most alert and receptive. In addition, as part of its plan they included a thorough review of the strategies to minimize costs associated with later school start and to maintain participation in extracurricular activities. Teachers reported that students were more awake, had better attitudes, and were overall more pleasant. There was a trend toward higher grades. Athletic coaches who had been worried about holding practices because of the time change reported that their teams had the best athletic season, winning several state championships (The Impact of School Start Times, 2012).

*Early high school start times run contradictory to a teen's normal developmental patterns.*

In 2009 in Middletown, Rhode Island, the St. George's School changed its start time from 8:00 to 8:30 a.m. Their research (Owens, Belon, & Moss, 2010) suggested fewer reports of depressive symptoms. Students reported feeling more motivated to participate in a variety of activities and were less likely to seek medical attention for fatigue-related concerns. Students surveyed reported going to bed 15 minutes earlier following the change and increased their sleep nightly by an average of 45 minutes. Teachers reported alertness increased, and daytime sleepiness and fatigue were reduced. Absences and lateness decreased by 45 percent. Grades rose slightly, but the differences were not statistically significant. At the end of the experimental period, no faculty member, student, or administrator wanted to return to the old start time (The Impact of School Start Times, 2012).

### Implications for psychologists and educators

There are no simple solutions to this complex issue. Circadian rhythms play a major role in the development of sleep patterns. As psychologists and educators we need to promote opportunities for healthy lifestyles. Teens are faced with hormonal shifts creating delays in the circadian rhythms for sleep. Educators need to be mindful about the developmental needs of students and consider the effects of early school start times on the physical and mental systems of teens. Early high school start times run contradictory to a teen's normal developmental patterns.


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## TEEN SLEEP ISSUES...

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Despite the aforementioned benefits of later school start times for teens, there are areas of concern that would need to be addressed sensitively before implementing change. Psychologists and educators need to be mindful that reversing elementary and high school start times may create controversy in the following areas:

1. School transportation schedules and costs.
2. Athletics and after-school activities.
3. Darkness at bus stops for elementary school children.
4. Needs for elementary child care would shift.
5. Changing contractual needs for staff.
6. Afterschool jobs for students.


School districts planning start-time reversals would clearly need to consult with the school community in a collaborative effort before implementing such changes. It should be noted that in review of all the research on teen sleep issues, there has been no study that contradicted the benefits of later start times for adolescents. As advocates for human welfare, psychologists and educators need to bring the research-based knowledge to the community and to advocate for developmentally appropriate environments for children. 

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## A CONTINUUM OF REFLECTIVE PRACTICES

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understand our patients in more productive ways, and ultimately be practicing more ethically. Emotional leaks are normal; we are, after all, human. When they are recognized, named and shared, we can learn to manage them. When they are ignored or repressed, we run the risk of acting on them. 

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