



## Submission to the Inquiry into Sleep Health Awareness

### Terms of Reference

#### 1. The potential and known causes, impacts and costs (economic and social) of inadequate sleep and sleep disorders on the community;

We are a national not for profit organisation that has provided and continues to provide training in every state and territory of Australia to thousands of school staff and leaders that address Student and School Community Wellbeing. This training supports them and builds their knowledge, skills and capacity to undertake the School Wellbeing role, which includes addressing student's wellbeing needs. We have been motivated to provide a submission to this inquiry due to the alarming and detrimental impact that we are finding that technology is having upon students sleep and their subsequent ability to attend and fully participate in schooling which is being undermined.

We are regularly hearing at every training we run, the stories from school leaders and staff of students who defy parent's instructions to turn off electronic devices before bedtime as well as cases where parents allow device use 24/7 but are concerned at the distress devices are causing. The same stories are reoccurring right across Australia. We are being told that **'Students fear the disconnection from their online friends and are keeping their electronic devices switched on 24/7.'** The result being they are reporting to teachers of having their **sleep regularly interrupted during the night.** They are not as attentive in class, struggling to remain awake, functioning below their capacity and in some instances not attending school on a regular basis or starting to disengage. At the same time, we are seeing rising rates of anxiety in this same cohort and this is moving down into lower year levels in Primary schools. This links to the developmental stage of around Year 4, approximately 8 years of age, where their peers start to become of greater significance in children's lives.

**The other major factor impacting on poorer sleep quality is distress and trauma caused by several factors.** We know from our own quantitative data that 95% of Leaders of School/Student Wellbeing who have attended our training and conferences, around 4000 people, do not know the most effective bullying interventions to keep students safe at school. We are hearing stories of the impact of this distress as ranging from severe health issues of anxiety, depression and suicidality, altered sleep patterns, through to absenteeism, school refusal, loss of friends, loneliness and trouble focusing in class. One in four students are affected by family violence, one in six live in poverty and one in five do not have enough food on a weekly basis. One in five children and young people have a mental health difficulty. Regardless of the range of causes of distress and trauma, we know that the loss and grief that is linked to the trauma impacts upon the quality of sleep negatively.

We know that the longer a student remains engaged in education, the better their lifelong health trajectory with fewer chronic health issues. We also know that the more post graduate studies a person completes, their health will be better than those who do not achieve these qualifications. So, the impact of sleep interfering with educational retention and leading to

early disengagement and lower performance, is a massive cost to society in higher chronic health costs, lower life expectancy and less productivity as a nation.

#### **Recommendation**

- 1. That a public education campaign targeting school age children and their parents/carers and schools from ages 8 – 18 years needs to occur about the health risks, both short term and longer term of electronic devices and trauma interrupting sleep.***
- 2. We need to investigate more formally the impact electronic devices and trauma are having on school aged children and young people – the age cohorts, the impact on their schooling and their health and school achievement and retention rates.***
- 3. We need to then measure the impact of health education and awareness of sleep disruption caused by devices and trauma to ensure the strategies to make healthy changes are being effective.***

#### **Terms of Reference**

- 2. Access to, support and treatment available for individuals experiencing inadequate sleep and sleep disorders, including those who are: children and adolescents, from culturally and linguistically diverse backgrounds, living in rural, regional and remote areas, Aboriginal and Torres Strait Islander;**

Our awareness of these services is minimal. We know that some CAMHS services, hospitals and private practitioners provide these but do not promote their services into schools or the community. We would envisage these to be less available in regional and remote Australia and therefore the ability of Aboriginal and Torres Strait Islander students to access such services being limited.

#### **Terms of Reference**

- 3. Education, training and professional development available to healthcare workers in the diagnosis, treatment and management of individuals experiencing inadequate sleep and sleep disorders;**

See our points linked to Terms of Reference 1. This is not happening or being provided to the health and wellbeing staff in schools across Australia who support most of our children and young people across the health promotion, prevention, early intervention, intervention and post-vention stages. So, this massive opportunity for a population health approach is not being utilised.

#### **Recommendation**

- 4. That a health initiative addressing the causes of sleep deprivation and poor sleep health hygiene together with practical preventative, early intervention and intervention strategies is developed as an urgent priority. This can then be provided directly into schools by organisations such as ours who already have the relationship with the school staff who address Student and School Community Wellbeing.***

#### **Terms of Reference**

- 4. Workplace awareness, practices and assistance available to those who may be impacted by inadequate sleep or sleep disorders, with a focus on: rostering practices for shift workers, heavy-work requirements, and the transport industry as compared to international best practice;**

The school is a workplace and awareness is desperately needed into sleep health and the good practices and assistance that is available. The need for this as outlined in our response to the first term of reference above, is urgent and the implications of not acting will further damage an entire group of school age children and young people in relation to their ability to function effectively and remain productively engaged in education. The social implication of this is enormous and a massive cost both socially and economically to Australian society.

**Terms of reference**

**5. Current national research and investment into sleep health and sleeping disorders.**

We outlined in our response to terms of reference 1 the urgent need to undertake research in schools across Australia to identify the level of the problem of sleep health and hygiene with specific age cohorts, the need to measure the impacts on their health, their social and family/carer relationships and their education over time, both short term and longer term.

**See recommendation 2 and 3 above.**

**Contact:**

**Jac Van Velsen CEO**

**PO Box 1090 Castlemaine 3450**



[www.wisawellbeing.com.au](http://www.wisawellbeing.com.au)