



# Assessing sleep problems and daytime functioning: a translation, adaption, and validation of the Athens Insomnia Scale for non-clinical application (AIS-NCA)

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## **Supplementary Information for**

"Assessing Sleep Problems and Daytime Functioning: A Translation, Adaption, and Validation of the Athens Insomnia Scale for Non-Clinical Application (AIS-NCA)"

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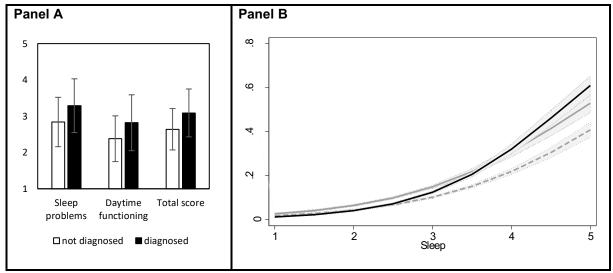
Figure S1. The AIS-NCA in German (Panel A) and English (Panel B).

Panel A					
Wie bewerten Sie die folgend auf die letzten [12 Monate/4		iit Ihrem Schla	ıf zusammenhän	igen? Beziehen?	Sie sich bitte
1) Einschlafen konnte ich meist (nach dem Ausschalten des Lichts)	sofort o	nach sehr kurzer Zeit ○	nach kurzer Zeit ○	nach längerer Zeit ○	nach sehr langer Zeit 0
2) Dass ich während des Schlafens aufwache, passiert	nie O	fast nie	manchmal o	ziemlich oft	sehr oft
3) Endgültig früher aufgewacht als gewünscht bin ich	nie O	fast nie	manchmal o	ziemlich oft o	sehr oft
4) Meine Schlafqualität war insgesamt meist	sehr gut	gut	teils gut/teils schlecht	schlecht	sehr schlech
	0	0	0	0	0
5) Mein Wohlbefinden war tagsüber meist	sehr gut	gut	teils gut/teils schlecht	schlecht	sehr schlech
	0	0	0	0	0
6) Meine Leistungsfähigkeit (physisch und psychisch) war	sehr gut	gut	teils gut/teils schlecht	schlecht	sehr schlech
tagsüber meist	0	0	0	0	0
7) Meine Müdigkeit war tagsüber meist	nicht spürbar	kaum spürbar	mäßig spürbar	stark spürbar	sehr stark spürbar
Panel B	0	0	0	0	0
How do you rate the following months/past four weeks]. <sup>a</sup> 1) I could usually get to sleep	ng aspects relating	after a very	after a short	after a longer	after a very
(after turning off the lights)	0	short time ○	time O	time o	long time o
2) Waking up during my sleep happened	never o	almost never ○	sometimes o	quite often ○	very often 0
3) Waking up prematurely happened	never o	almost never ○	sometimes o	quite often ○	very often 0
4) The overall quality of my sleep was usually	very good	good	sometimes good/ sometimes bad	bad	very bad
	0	0	0	0	0
5) Throughout the day, my level of well-being was usually	very good	good	sometimes good/ sometimes bad	bad	very bad
	0	0	o sometimes daa	0	0
6) Throughout the day, my level of (physical and mental)	very good	good	sometimes good/	bad	very bad
performance was usually			sometimes bad		
	0	Ō	0	Ο	0
7) Throughout the day, my level	o not perceptible	o hardly	o moderately	o very	o very strongi

0

*Notes:* <sup>a</sup>Different reference periods might be entered.

**Figure S2.** Panel A shows the mean scores (with standard deviations) of the subscales for sleep problems and daytime function as well as the total score by sleep disorder diagnosis (at  $t_2$ ), while Panel B shows the predicted values (with 95% confidence intervals) for new sleep disorder diagnosis between  $t_1$  and  $t_2$  (N=14,797).



*Notes:* In Panel A, white bars  $(\Box)$  represent that respondents indicated being not diagnosed with a sleep disorder while black bars  $(\blacksquare)$  represent that respondents indicated being diagnosed with a sleep disorder. In Panel B, grey dashed lines (---) refer to sleep problems, grey solid lines (---) daytime functioning, and black solid lines (---) the total score.

Table S1. Items and descriptives of the AIS-NCA assessed in Study 2 (N<sub>Study 2</sub>=14,797).<sup>a</sup>

- 11	Item and response options	Descriptives							
#		M	SD	Min	Max	Skew	Kurt		
1	I could usually get to sleep (after turning off the lights) immediately; after a very short time; after a short time; after a long time; after a very long time	2.66	0.97	1.00	5.00	0.23	-0.50		
2	Waking up during my sleep happened never; almost never; sometimes; quite often; very often	3.36	0.96	1.00	5.00	0.01	-0.57		
3	Waking up prematurely happened  never; almost never; sometimes; quite often;  very often	2.91	0.98	1.00	5.00	0.28	-0.36		
4	The overall quality of my sleep was usually very good; good; sometimes good/sometimes bad; bad; very bad	2.59	0.87	1.00	5.00	0.50	0.13		
5	Throughout the day, my level of well-being was usually very good; good; sometimes good/sometimes bad; bad; very bad	2.37	0.70	1.00	5.00	0.60	0.69		
6	Throughout the day, my level of (physical and mental) performance was usually very good; good; sometimes good/sometimes bad; bad; very bad	2.34	0.71	1.00	5.00	0.73	1.06		
7	Throughout the day, my level of tiredness was usually not perceptible; hardly perceptible; moderately perceptible; very perceptible; very strongly perceptible	2.59	0.83	1.00	5.00	0.19	0.00		
	AIS-NCA: Sleep problems	2.88	0.71	1.00	5.00	0.29	-0.16		
	AIS-NCA: Daytime functioning	2.43	0.66	1.00	5.00	0.58	0.70		
	AIS-NCA: Total score	2.69	0.60	1.00	5.00	0.41	0.14		

**Notes:** <sup>a</sup>Please find the German version used in Study 2 in Panel A in Figure S1. The question was, "How do you rate the following aspects related to your sleep? Please base your answers on the past twelve months." ["Wie bewerten Sie die folgenden Dinge, die mit Ihrem Schlaf zusammenhängen? Beziehen Sie sich bitte auf die letzten 12 Monate."]. M=Mean, SD=Standard deviation, Min=Minimum, Max=Maximum, Skew=Skewness, Kurt=Excess kurtosis.

**Table S2.** Items and descriptives of the AIS-NCA assessed in Study 3 ( $N_{Study 3}$ =78).<sup>a</sup>

ונ	Italian and annual and	Time	Descriptives						
#	Item and response options	<b>(t)</b>	M	SD	Min	Max	Skew	Kurt	
1	I could usually get to sleep (after turning	$t_1$	2.74	1.23	2.94	1.01	-0.02	-0.52	
	off the lights)	$t_2$	2.63	1.11	2.85	0.99	-0.01	-0.49	
	immediately; after a very short time;								
	after a short time; after a long time; after								
	a very long time								
2	Waking up during my sleep happened	$t_1$	2.74	0.90	2.74	1.00	0.37	-0.04	
	never; almost never; sometimes; quite	$t_2$	2.85	0.99	2.71	1.02	0.47	-0.17	
	often; very often								
3	Waking up prematurely happened	$t_1$	2.52	0.94	2.68	1.01	0.30	-0.50	
	never; almost never; sometimes; quite	$t_2$	2.30	0.91	2.64	0.95	0.68	0.14	
	often; very often								
4	The overall quality of my sleep was	$t_1$	1.93	0.83	2.45	0.89	0.54	0.38	
	usually	$t_2$	2.07	0.73	2.31	0.87	0.78	0.98	
	very good; good; sometimes								
	good/sometimes bad; bad; very bad								
5	Throughout the day, my level of well-	$t_1$	2.00	0.73	2.41	0.86	0.47	0.12	
	being was usually	$t_2$	2.33	0.88	2.42	0.76	0.52	0.76	
	very good; good; sometimes								
	good/sometimes bad; bad; very bad								
6	Throughout the day, my level of	$t_1$	2.22	0.93	2.64	0.76	0.15	-0.50	
	(physical and mental) performance was	$t_2$	2.33	0.83	2.65	0.75	0.29	0.35	
	usually								
	very good; good; sometimes								
_	good/sometimes bad; bad; very bad		0.41	0.00	2.50	0.51	0.12	1.00	
7	Throughout the day, my level of tiredness	$t_1$	2.41	0.80	2.79	0.71	-0.13	1.02	
	was usually	$t_2$	2.44	0.89	2.68	0.76	-0.09	-0.36	
	not perceptible; hardly perceptible;								
	moderately perceptible; very perceptible;								
	very strongly perceptible		• 10				0.40		
	AIS-NCA: Sleep problems	$t_1$	2.48	0.71	2.70	0.75	0.48	0.41	
	AIGNICA Dati Cati	$t_2$	2.46	0.69	2.63	0.70	0.60	0.41	
	AIS-NCA: Daytime functioning	$t_1$	2.21	0.70	2.62	0.65	-0.09	0.00	
	AIG NGA T 4 1	$t_2$	2.37	0.81	2.59	0.67	0.23	0.44	
	AIS-NCA: Total score	$t_1$	2.37	0.62	2.66	0.62	0.38	0.54	
		$t_2$	2.42	0.66	2.61	0.61	0.56	1.11	

*Notes:* <sup>a</sup> Please find the German version used in Study 3 in Panel A in Figure S1. The question was, "How do you rate the following aspects related to your sleep? Please base your answers on the past four weeks." ["Wie bewerten Sie die folgenden Dinge, die mit Ihrem Schlaf zusammenhängen? Beziehen Sie sich bitte auf die letzten 4 Wochen."]. M=Mean, SD=Standard deviation, Min=Minimum, Max=Maximum, Skew=Skewness, Kurt=Excess kurtosis.

Table S3. Items and descriptives of the AIS-NCA assessed in Study 4 ( $N_{Study 4}$ =338).

ш	Item and response options	Descriptives						
#		M	SD	Min	Max	Skew	Kurt	
1	I could usually get to sleep (after turning off the lights) immediately; after a very short time; after a short time; after a long time; after a very long time	2.84	1.03	1.00	5.00	0.15	-0,59	
2	Waking up during my sleep happened  never; almost never; sometimes; quite often; very often	3.27	0.95	1.00	5.00	0.21	-0,47	
3	Waking up prematurely happened never; almost never; sometimes; quite often; very often	3.05	0.97	1.00	5.00	0.19	-0,39	
4	The overall quality of my sleep was usually very good; good; sometimes good/sometimes bad; bad; very bad	2.55	0.86	1.00	5.00	0.67	0,13	
5	Throughout the day, my level of well-being was usually very good; good; sometimes good/sometimes bad; bad; very bad	2.44	0.79	1.00	5.00	0.48	0,23	
6	Throughout the day, my level of (physical and mental) performance was usually very good; good; sometimes good/sometimes bad; bad; very bad	2.42	0.78	1.00	5.00	0.56	0,60	
7	Throughout the day, my level of tiredness was usually not perceptible; hardly perceptible; moderately perceptible; very perceptible; very strongly perceptible	2.73	0.91	1.00	5.00	0.35	0,02	
	AIS-NCA: Sleep problems	2.93	0.72	1.25	5.00	0.35	-0,21	
	AIS-NCA: Daytime functioning	2.53	0.72	1.00	5.00	0.51	0,18	
	AIS-NCA: Total score	2.76	0.65	1.14	4.71	0.43	0,06	

**Notes:** <sup>a</sup> Please find the German version used in Study 4 in Panel A in Figure S1. The question was, "How do you rate the following aspects related to your sleep? Please base your answers on the past four weeks." ["Wie bewerten Sie die folgenden Dinge, die mit Ihrem Schlaf zusammenhängen? Beziehen Sie sich bitte auf die letzten 4 Wochen."]. M=Mean, SD=Standard deviation, Min=Minimum, Max=Maximum, Skew=Skewness, Kurt=Excess kurtosis.

#### **Detailed Ethics Statement**

This research was guided by the principles formulated in the WMA Declaration of Helsinki. In Germany, no further ethics approval for social science research is required if the research issues are not regulated by law (e.g., the German Medicine Act, the Medical Devices Act, the Stem Cell Research Act, or the Medical Association's Professional Code of Conduct). The study had no such objectives, and thus no approval was required. Still, all invited students were informed on the first page of the survey about the topic of the study, the voluntariness and anonymity of their participation, and the confidentiality of their answers (e.g., that the researchers never had access to their personal data). Based on this information, respondents provided informed consent before being able to proceed.