

shifting more towards evening chronotype during college was related to increased BMI ($r(22) = .356, p < .05$).

Conclusion: These data suggest long-term changes in sleep are related to long-term weight changes. Lack of napping during freshman year and increases in daytime sleepiness throughout college predicted college weight gain; however, college weight gain was also linked to increased weekend sleep and increased napping. These sleep timing changes could be due to shifts towards a more evening chronotype which was also related to greater weight gain.

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INTERPLAY BETWEEN SLEEP DISTURBANCES AND EATING BEHAVIOURS

Michaelsen S¹, Wiebe S^{2,1}, Dubé L², Knauper B², Mangal M^{3,1}, Shuo Jin E^{2,1}, Gruber R^{1,2}

¹Douglas Mental Health University Institute, Verdun, QC, Canada.

²McGill University, Montreal, QC, Canada, ³Concordia University, Montreal, QC, Canada

Introduction: Mounting evidence indicates that an appropriate amount of sleep is necessary in order to lead a healthy life, as sleep is beneficial for cognitive, emotional, and physiological functioning. Several studies have found a relationship between sleep, weight regulation and eating, where lack of sleep is associated with a heightened risk for increased weight and poorer eating habits. However, the mechanisms underlying the interplay between sleep and eating remain unclear. It is still uncertain as to what aspects of sleep (e.g. duration, quality) and what aspects of eating play a role in this relationship. The aim of the study was, therefore, to examine different aspects of sleep habits in relation to women's eating behaviours. We hypothesized that greater sleep disturbances would be associated with greater disordered eating behaviours.

Methods: Twenty women (aged 33-53 years, mean = 40.4 ± 5.2) completed the Adult Dutch Eating Behavior Questionnaire (DEBQ) and the Pittsburgh Sleep Quality Index (PSQI). The DEBQ consists of: emotional eating (eating in response to emotions), restrained eating (attempts to restrain eating due to weight concerns) and external eating (eating based on external cues). Higher scores on the DEBQ suggest greater presence of disordered eating. The PSQI consists of 7 components (sleep quality, latency, duration, efficiency and disturbance, use of sleep medications, and daytime dysfunction) and a global score. Higher scores on the PSQI are related to greater sleep disturbance.

Results: Partial correlations were conducted between PSQI and DEBQ subscales, controlling for age and education level. An alpha of .05 was used to indicate significance. Women scoring higher on emotional eating also had longer sleep latencies, more sleep disturbances, greater daytime dysfunction and higher overall scores on the PSQI. Women scoring higher for restrained eating were found to have more sleep disturbances and greater daytime dysfunction.

Conclusion: Greater sleep disturbances are associated with greater problematic eating habits. While future research is needed to determine the direction of the relationship, it may be beneficial to target sleep in weight loss or disordered eating programs.

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THE CROSSOVER EFFECTS OF SUPERVISOR WORK-FAMILY POSITIVE SPOILOVER ON EMPLOYEE SLEEP DEFICIENCY: MODERATING EFFECTS OF FAMILY SUPPORTIVE SUPERVISOR BEHAVIORS (FSSB)

Crain TL¹, Hammer LB¹, Bodner TE¹, Buxton OM^{2,3}

¹Department of Psychology, Portland State University, Portland, OR, USA,

²Department of Medicine, Brigham and Women's Hospital, Boston, MA, USA,

³Division of Sleep Medicine, Harvard Medical School, Boston, MA, USA

Introduction: Sleep-related constructs have rarely been included in work-family research. However, positive spillover, or the transfer of

positive affect between work and family domains, has been shown to have enriching effects on physical health. The current study investigated if positive spillover is transmitted from supervisor to employee, improving employee sleep. We hypothesize that employee perceptions of family-supportive supervisor behaviors (FSSB) will moderate the relationship between supervisor positive spillover and employee sleep adequacy and duration.

Methods: As part of the Work, Family and Health Study, 221 supervisors (76 female, age 46.2±7.7 years) and 823 employees (282 female, age 45.7±9.0 years) working in the information technology sector reported measures of work-to-family affective positive spillover, FSSB, sleep adequacy (getting enough sleep to feel rested upon waking), and sleep duration.

Results: In multilevel moderated regression analyses, FSSB was positively related to employee sleep adequacy ($B = .07, p = .019, CI = .01-.13$), but did not result in a significant interaction of supervisor positive spillover with FSSB on employee sleep adequacy ($B = .05, p = .336, CI = -.05-.15$). A disordinal interaction was found between supervisor positive spillover and FSSB on employee sleep duration ($B = .20, p < .001, CI = .09-.30$), such that the relationship between supervisor positive spillover and employee sleep duration was positive under high levels of FSSB, but negative under low levels of FSSB. No direct effect of FSSB on sleep duration was found ($B = .03, p = .319, CI = -.02-.09$).

Conclusion: Supervisor positive spillover is associated with the adequacy and amount of sleep that employees are able to attain, supported by the relationship of employee-reports of FSSB on employee sleep adequacy. The effect of supervisor positive spillover on employee sleep duration was strongest when employee reports of FSSB were high. Future occupational health interventions may not only train supervisors to exhibit family-supportive behaviors, but could target the supervisor work-family interface as a means for improving employee sleep health.

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THE PARADOXICAL EFFECTS OF MINDFULNESS MEDITATION ON SUBJECTIVE AND OBJECTIVE MEASURES OF SLEEP

Peck T¹, Lester A², Lasky R¹, Bootzin RR¹

¹Psychology, University of Arizona, Tucson, AZ, USA, ²Neuroscience, University of Arizona, Tucson, AZ, USA

Introduction: While a growing literature exists on the effects of mindfulness meditation (MM) on self-reported sleep quality, little research has investigated how MM affects sleep as measured by polysomnography (PSG).

Methods: This study recruited 38 healthy adult mindfulness meditators (19 male) of varying meditation skill levels and age (18 - 82, median = 42), and participants' sleep and meditation habits were recorded for one week using diaries and Actigraphy. At the end of this week, physi-

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