

Meeting Minutes: Multi-Center Asian Adolescent Sleep Study (ACROSS) Project Meeting

Date/Time: 30 September 2025, 3:30 PM Singapore Time

Facilitators: Dr. Stijn Agus Adrianus Massar (NUS, Singapore), Dr. Rachel Chan (CUHK, Hong Kong)

In attendance: Ravi Gupta (India), Lokesh Kumar Saini (India), Iris Haimov (Israel), Ami Cohen (Israel), Tayard Desudchit (Bangkok, Thailand), Duong Quy Sy (Vietnam), Qingmin Lin (Shanghai, China), Jihui Zhang (Guangzhou, China), Yoko Komada (Tokyo, Japan), Yuichi Inoue (Tokyo, Japan), Dewi Maulina (Indonesia), Yushu Huang (Taipei, Taiwan), Sijing Chen (Hong Kong), Chris Xie Chen (Hong Kong), Ruth Leong (Singapore), Kyra Chong (Singapore)

1. Welcome and Introductions

- **Welcome and introduction by Dr. Stijn Massar**
 - Representatives from each participating centers in India, Israel, Thailand, Vietnam, China, Japan, Indonesia, Taiwan, and others introduced themselves, their affiliations, and research interests.
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2. Project Overview & Survey Rationale

Presented by Dr. Rachel Chan:

- **Background and objectives of the ACROSS Study:**
 - **Aims:**
 - Assess cultural differences in sleep patterns and sleep problems among Asian adolescents.
 - Use standardized assessment tools and harmonized methodology.
 - Collect 1,000 responses per center from school-aged adolescents (12–18 years, both genders).
 - Assess risk factors, attitudes, obstacles, and promote healthy sleep in schools.
 - **Methods:**
 - Online or paper form survey cover multiple domains including sleep, mental health, lifestyle and demographic data
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3. Survey Updates Based on Feedback

Presented by Dr. Stijn Massar:

Progress:

- Participation confirmed by 19 centres from 15 countries.
- Initial survey shared and feedback collected from participating centres
- Survey updated based on feedback

Main changes:

- **Personal Information:**
 - Standardized religion lists;

- Ethnicities to be specified per country using local standards with a note on majority/minority status.
 - School info updated to include public/private/international and boarding status.
 - **Sleep Patterns:**
 - Clarified as school vs. non-school days; added explicit question on total sleep time.
 - Included optional questions on alcohol and cigarette use (to be used per local regulations).
 - **Sleep Problems:**
 - Added items on restless leg syndrome.
 - Added questions on help/treatment-seeking and types of treatment.
 - **Napping:**
 - Added questions about napping policies at school, napping timing, and frequency of morning wake-up difficulties.
 - **Obstacles to Sleep:**
 - Restructured categories (now under "stress"), added items on health of self/family.
 - **Lifestyle Factors:**
 - Shortened parental attitudes section.
 - Updated self-attitude items and school-related sleep support.
 - Revised activities section: clarified tutoring vs. extracurricular vs. leisure.
 - Added household chores option.
 - Physical activity duration split into days per week + time per day.
 - **Socioeconomic Status:**
 - Simplified parental education and income questions.
 - Housing type left to local adaptation (e.g., ownership, affordability, etc.).
 - **Other:**
 - Recognized need for local adaptation for some questions.
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4. Open Discussion & Feedback

- **Meal timing** and after-school schedules raised as additional culturally relevant factors – suggested inclusion in final questionnaire.
- **Ethnicity:** For countries with mixed-ethnicity backgrounds, clarified need to specify whether based on maternal/paternal side. This will be highly local context dependent. Each centre to determine for their local context. Coordinating centres can help individual centre to formulate, but no standardized solution possible.
- **Sampling:**
 - Discussion on inclusion of urban and rural participants; general agreement to focus on urban/suburban for comparability, but flexibility allowed.
- **Data Collection Methods:**
 - Both online and paper-based options allowed; online preferred for data completeness, but flexibility to fit local school practices.
- **Incentives:**
 - No central fund for incentives; some centers use rewards/certificates/lucky draw per local practice. Local common practice for data collection should be leading.
- **Sensitive Questions:**
 - Cannabis/other substances: not included in master survey due to sensitivity in some countries, but local centers can add optional sections as appropriate.

5. Administrative Issues

- **Translation:** Each center responsible for translation and back-translation of survey.
- **Ethics/IRB:** Each center to secure local institutional review board (IRB) approvals; parental consent required where applicable.
 - Templates and documents to be provided on central website.
 - Data sharing and anonymization to be clarified in documentation for compliance with local regulations.
- **Data Management:**
 - Data to be de-identified and shared in a standardized format (Excel/CSV).
 - Scoring templates to be provided.
 - Centralized platform (potentially via World Sleep Society) being considered for survey hosting.
- **Timeline:**
 - Final survey to be shared by next Monday (6 Oct) after the meeting.
 - Formal documents, IRB protocols, and translation to follow.
 - Target data collection start: January 2026, subject to local IRB approval timelines.
 - Six-month data collection period.
- **Authorship:**
 - Usual practice: 2 authors per center (flexible for large countries/multiple centers).
 - Formal authorship and data management policies to be drafted and shared for feedback.
- **Next Steps:**
 - Finalize survey and instructions.
 - Prepare IRB proposal templates, consent documents, and ASSM (Asian Society of Sleep Medicine) letter listing participating centers.
 - Work towards formalizing data management, authorship, and data sharing agreements.

6. Closing Remarks

- Appreciation for productive participation and constructive feedback.
- Next communication: finalized documents, timeline updates, and information on centralized platforms/templates.
- Noted optimism about collaboration, while recognizing likely need to adjust the project timeline as logistics are finalized.

Meeting adjourned.