during the pandemic. Many studies have reported the negative impact of pandemic-related stress on sleep of HCWs. Our mixed-methods investigation sought to extend existing research by characterizing the themes of HCWs' primary concerns during the early pandemic and identifying the most salient concerns which might be impacting sleep.

Methods: North American HCWs (n = 1331) were surveyed during the "second wave" of CoVID-19 case increases (6/9/2020 – 8/17/2020), which included a questionnaire with measures of sleep health (RU-SATED) and nightmare frequency (PSQI). Additionally, each HCW was asked to openly-describe their most salient concern with regard to the pandemic. Each response was categorized by topic. T-tests were conducted to compare frequencies of each response category with sleep health and nightmare frequency.

Results: The study sample comprised 1331 HCWs (91.7% female; 74.5% non-Hispanic white; 64.31% with exposure to CoVID-19 patients; 85.1% working in-person). Primary concerns were grouped into 8 categories including combinations of personal/familial-level concerns (e.g. concern about CoVID-19 infection/spread), and work-related stressors (e.g. increased workload). Concerns about lack of PPE/equipment was significantly associated with lower scores on RU-SATED (t = -2.69; p = .007) and increased nightmare frequency (t = 2.70; p = .007). Additionally, concerns about increased workload were significantly associated with lower scores on both RU-SATED (t = -2.79; p = .005) and increased nightmare frequency (t = 5.24; p = .000). Individually, primary concerns for CoVID-19 infection/spread was significantly associated with more-frequent nightmares (t = 2.01; p = .045). Neither sleep measure was associated with categories involving societal-level concerns (e.g. sociopolitical concerns) among the sample.

Conclusion: Our results indicate that the HCWs most concerned about workplace stressors during the pandemic indicated poorer sleep health and more frequent nightmares. Further analyses could help guide proper stratification of therapeutic approaches to improve sleep health and related distress for HCWs.

Support (If Any):

0053

THE ROLE OF SOCIAL ISOLATION ON SLEEP PROBLEMS INTERFERING WITH DAILY FUNCTIONING

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Introduction: Amidst the COVID-19 pandemic, widespread feelings of social isolation have become more prevalent than ever before as lockdowns and social distancing measures led people to remain in their homes. The constructs of social isolation and loneliness are similar but reflect slightly different aspects of social experience. Social isolation reflects the amount of social contact a person experiences, whereas loneliness reflects the subjective experience of an emotional yearning for such contact. While is known that sleep problems have increased during the pandemic, there has been little research into the potential effects of social isolation on sleep problems. Here, we examined the influence of social isolation on the extent to which insomnia has interfered with daily life activities. We hypothesized that social isolation would contribute to greater disruption in daily functioning from insomnia, exclusive of the effects of loneliness.

Methods: 13,298 English-speaking adults from across the U.S. (18-92 years old; 57.5% female) completed an online battery of

assessments that included demographic questions, the Insomnia Severity Index (ISI), and the UCLA Loneliness Scale – Version 3 between April 2020 and April 2021. Participants were grouped based on whether they felt "socially isolated" or not at the time of assessment. Social isolation groups were compared for the extent that insomnia interfered with daily functioning, while statistically controlling for loneliness.

Results: After controlling for loneliness, socially isolated individuals reported much greater daily interference from sleep problems, M=1.58, SD=1.19, compared to those who denied feeling socially isolated, M=0.96, SD=1.04, F(1,13295)=287.67, p=7.5x10-64.

Conclusion: Social isolation during the pandemic was associated with significantly greater disruption of daily functioning due to sleep-related issues, even after adjusting for self-reported loneliness. Thus, feeling isolated and lacking social contact was related to functional degradation due to sleep problems. Prior evidence suggests that social isolation can have a dramatic negative impact on mental health and can lead to increased all-cause mortality, but these results suggest social isolation may also impact sleep health and functional outcomes (whether that be physical, cognitive, or psychological). Thus, being isolated during the pandemic was associated with greater degradation of functional outcomes of sleep, regardless of subjective loneliness.

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0054

A FEAR OF DYING: HOW AN OBSESSION WITH DEATH DURING THE PANDEMIC CONTRIBUTES TO MORE SEVERE INSOMNIA

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Introduction: The prevalence of insomnia and other sleep disorders increased during the COVID-19 pandemic. While general anxiety, which increased during the pandemic, may account for some of the rise in sleep complaints, other factors may also contribute to insomnia. Here, we examined the potential contribution of fear of dying from the novel coronavirus on the severity of insomnia. We hypothesized that those endorsing a high fear of dying specifically from COVID-19 within 12 months of their assessment would demonstrate more severe insomnia.

Methods: From April 2020 through October 2021, 13,298 U.S. participants (18-92 years old; 57.5% female) completed a online survey (~1,000 participants per month) that included an assessment of their perceived likelihood of dying from COVID in the next year, the Generalized Anxiety Disorder scale-7 (GAD-7), and the Insomnia Severity Index (ISI). We examined insomnia over the course of the first year of the pandemic and divided the sample into those who endorsed at least a 50% or greater perceived likelihood that they would die from COVID-19 in the next year versus those who endorsed a less than 50% perceived likelihood of dying from the illness.

Results: Fear of dying (50% chance or higher) was associated with higher ISI scores (p<.00001) and tended to decline over the course of the year (p<.00001). A significant month x fear interaction (p=.021) suggested that individuals who believed they would die within the year showed significantly fluctuations in insomnia over the course of 13 months with peaks around June and October 2020. Even accounting for

situational anxiety (GAD-7), those with a fear of dying still demonstrated higher insomnia levels than their counterparts (p<.00001).

Conclusion: Self-perceived likelihood of dying from COVID-19 in the near future was associated with significantly elevated severity of insomnia, and this remained true even when controlling for a clinical assessment of generalized anxiety levels. These findings suggest that fear of succumbing to the novel coronavirus contributed significantly to the severity of sleep problems during the first year of the pandemic.

Support (If Any):