Response letter

Dear Editor,

We thank the reviewers for their insightful and detailed comments regarding our manuscript. Our specific responses to the comments of each reviewer are provided below. We found the comments very helpful in revising the manuscript.

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| **Reviewer 1** |
| Thanks to the reviewer for this comment, the manuscript has been revised to maintain consistency. | 1.      In the title, sleep is separated from psychological wellbeing, whereas in the manuscript it is sometimes one of the wellbeing indicators and sometimes remains separate. Please revise to maintain consistency. |
| We added another reference to support the argument presented in the sentence (see page 2). | 2.      Reference 7 includes anxiety, depression and poor sleep as psychological indicators, but FoMO is not mentioned in this article. Therefore the sentence: "All are indicators of psychological well-being7" needs revising. |
| We added references of studies examined smartphone use before sleep onset and during sleep latency (see page 2). All the references we used to describe the relationship between smartphone use and sleep rely on subjective reporting of smartphone use.Reference 8 presents an overview of the problems with subjective measurement that is why we used it as a single source.  | 3.      Third paragraph: please provide the specific references to studies that examined smartphone use before sleep onset and after sleep onset. Also provide references to studies that assessed smartphone use subjectively (reference 8 is a review paper).  |
| Thank you, Corrected according to the reviewer comment. | 4.      Participants, NOT subjects. |
| We added an explanation of the exclusion criteria in the manuscript (see page 2). | 5.      Were there any exclusion criteria? |
| Thanks to the reviewer for this comment, the "procedures" section is now presented in a separate paragraph (see page 2). | 6.      What was the study procedure? |
| We added this information to the manuscript (see page 4). | 7.      What were the correlations between all the outcome variables |
|  We added a discussion of this topic (see page 5). | 8.      In the first paragraph: Please expand on the comparison between the inconsistencies between subjective and objective monitoring of smartphone use vs. sleep. |
| We added a discussion of this topic on page 5 and 6.We added a discussion of this topic on page 5 and 6. | 9.      In paragraph 2: Please offer psychological and/or psychosocial interpretations to the different (i.e., objective vs. subjective) findings.10.     Please discuss findings in the context of the extant literature, specifically, if previous studied relied on self-report and found associations between smartphone use and outcome measures, why were no associations found with self-report in the present study?  |
| **Reviewer 2**  |
| We added the missing details to the revise manuscript (see page 3). | 1. The authors provide no details regarding the application (i.e. name, the developer/brand name etc). |
| We are grateful to the reviewer for this important comment. In the previous version of the manuscript, there was no statement about the reliability of objective measurement. In the revised manuscript, we added a statement about the pilot test done to make sure the data collected through the app was reliable (see page 3). | 2. A more serious concern is that the application used may have not reliably detected each time a participant checked his/her smartphone. |
| We thank the reviewer for this comment; to support our argument that FoMO is another measure of well-being we added another reference (see page 2).  | 3. I am not sure FOMO should be considered as a measure of psychological Well Being. It is a very important feature on its own right in general and in relation to sleep and anxiety in particular. Thus, the authors should perhaps consider a different way of conceptualizing its place in the presentation of the study.  |
| We added a discussion of this topic on the limitations section (page 6).  | 4. According to table 1, the study sample had, on the average, a global PSQI score above 7. Given that the cut off score for clinically relevant sleep disorders is 5 (6 according to some), this is a finding that needs to be addressed, even if briefly, in the discussion (perhaps such poor sleep is common among students in Israel?). |
| We thank the reviewer for this comment, we conducted the requested statistical analysis but the results did not show a special pattern probably due to the small sample size. We decided not to report this analysis due to the word limit and tables in this type of article. | 5. The authors should compare between those who checked their phones and those who did not in terms of the proportion of participants in each group who received a PSQI score greater than 5. It is reasonable to hypothesize that the proportion of such poor sleepers will be higher among those who checked their phone at night. |
| Thank you for this comment. In accordance with your recommendation, the manuscript has undergone editing. | 6. Although the manuscript is generally well organized and clearly presented, I believe it is at time not well written and could benefit from additional editing. |
|  | **Reviewer 3**  |
| We thank the reviewer for this comment, the sample included only women, and we added this information to the participants section (see page 2).  | 1. The article is lacking demographic description of the participants particularly gender. |
| No association was found between the study variables and the demographic indices, probably because the sample was small and homogeneous. | 2. Were the study variables associated with any of the demographic measures (e.g., age, gender)? |
| We added the Skewness and Kurtosis data to the table to present normality. | 3. Were the study measures approximately normally distributed? |
| We added this information to the table. | 4. Please add the range of the study variables in table 1 and degrees of freedom for the F. |