



SAVE STANDARD TIME

The best clock for health, safety, education, economy, environment, civil liberties, and lasting public support.

2022 May 7

Minnesota Legislature
75 Reverend Martin Luther King Junior Boulevard
Saint Paul, Minnesota 55155

Re: HF-4293, Sec-57: Support Permanent Standard Time

Dear Honorable Legislators,

Please support HF-4293, Sec-57. Restoration of permanent Standard Time by exemption from Daylight Saving Time (DST) is the quickest, healthiest, and most sustainable end to unpopular clock change. Please consider amending the effective date from 2030 to 2023.

Permanent Standard Time would protect start times for schoolchildren and blue-collar workers, by letting most sleep naturally past sunrise year-round.^{[Borisenkov][Cell][Schlanger][Skeldon]} Standard Time preserves morning sunlight needed daily by human biology. Its benefits to circadian health improve immunity, longevity, mood, alertness, and performance in school, sports, and work. Its benefits prevent traffic deaths, lower crime, and reduce illnesses.^{[AASM][Juda][SRBR]} The most consistent professional polling shows public preference for Standard Time.^[AP] Permanent Standard Time has been observed in Arizona, Hawaii, all five US territories, and most nations for decades. It is pre-approved by the Uniform Time Act (15 USC §260a); it can end clock change in a matter of months.

Scores of organizations, representing millions of researchers, doctors, teachers, parents, and community leaders worldwide, oppose DST and endorse permanent Standard Time. Among these are the Minneapolis Star Tribune, Wisconsin Sleep Society, Dakota Sleep Society, American College of Chest Physicians, National Safety Council, American Academy of Sleep Medicine, National PTA, American College of Occupational & Environmental Medicine, Start School Later, Canadian Sleep Society, Association of Canadian Ergonomists, Canadian Society for Chronobiology, and many more state, national, and international groups.^{[AASM][CSS][NSF][SRBR]}

Permanent DST instead would force constituents to wake an hour early relative to sunrise, every weekday from November through March. It would revert benefits of starting school later. It would rob morning sunlight needed by farmers, construction workers, and other outdoor laborers.^[Schlanger] It would delay Minnesota sunrises to 9:22am, and past 8am up to 4.5 months. Support for permanent DST reverses into opposition when experienced. Permanent DST has failed several times; it cost American children's lives in 1974.^{[BBC][Ripley][Yorkshire]} It is forbidden by the Uniform Time Act; it cannot end clock change now or in the foreseeable future.

Moving clocks to DST acutely deprives sleep. Leaving clocks on DST chronically deprives sleep (estimated average 19 minutes nightly).^{[Giuntella][Roenneberg]} Artificial delay of sunrise by one hour continually manifests as significant increases in accidents, disease (certain cancers up 12–36%), and healthcare costs, and as significant decreases in learning, productivity, and earnings (individual wages down 3–5%).^{[Gibson][Giuntella][Gu][Roenneberg]} It's not just clock change that harms, but also DST's forced early waking.

Please hear the consensus of doctors, teachers, and history. Save time, money, and lives. Support this bill and end clock change with permanent Standard Time.

Sincerely,



Jay Pea
President

jay@savestandardtime.com

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SAVE STANDARD TIME

The best clock for health, safety, education, economy, environment, civil liberties, and lasting public support.

Endorsements of Permanent Standard Time as the Better Year-Round Clock

The following parties reject permanent Daylight Saving Time and endorse permanent Standard Time as the better year-round clock. These are not implied to be endorsements of the Save Standard Time entity.

Organizations (non-comprehensive list)

American College of Chest Physicians
American Academy of Sleep Medicine
National PTA
Sleep Research Society
American Academy of Dental Sleep Medicine
Society for Research on Biological Rhythms
Society of Behavioral Sleep Medicine
Bloomberg Opinion
Agudath Israel of America
Indiana State Medical Association
Maryland Association of Boards of Education
Colorado PTA
Wisconsin Sleep Society
Missouri Sleep Society
Hampden District Medical Society
Maryland Sleep Society
Southern Sleep Society
Michigan Academy of Sleep Medicine
The Oregonian
South Florida Sun Sentinel
Rabbinical Council of California
California Islamic University
Agudath Israel of Chicago
Cuyahoga Astronomical Association
Adayt Israel San Francisco
Campaign to Opt Out of DST in Texas
Association of Canadian Ergonomists
Solaris Fatigue Management
Society for Light Treatment & Biological Rhythms
B-Society
International Alliance for Natural Time
European Sleep Research Society
Portuguese Sleep Association
French Society for Sleep Research & Medicine
Sleep Medicine Association Netherlands
Curtis Clock Lab
National Safety Council
National Sleep Foundation
American College of Occupational Medicine
World Sleep Society
Start School Later
Society of Anesthesia & Sleep Medicine
American Academy of Cardiovascular Sleep Med
Rabbinical Council of America
Anne Arundel County Public Schools
Florida PTA
Northwest Noggin Neuroscience
California Sleep Society
Kentucky Sleep Society
League of Women Voters of Delaware County
Tennessee Sleep Society
Regional Adolescent Sleep Needs Coalition
Capitol Neurology
Dakota Sleep Society
Minneapolis Star Tribune
The Daytona Beach News-Journal
Agudath Israel of California
Agudath Israel of Maryland
Agudath Israel of Florida
Ohio Bicycle Federation
Stephens Memorial Observatory
Canadian Sleep Society
Canadian Society for Chronobiology
Spanish Sleep Society
Daylight Academy
Good Light Group
European Biological Rhythms Society
Australasian Chronobiology Society
Francophone Chronobiology Society
German Teachers' Association
Dutch Society for Sleep-Wake Research
Chronobiology Lab Groningen

Individuals (non-comprehensive list)

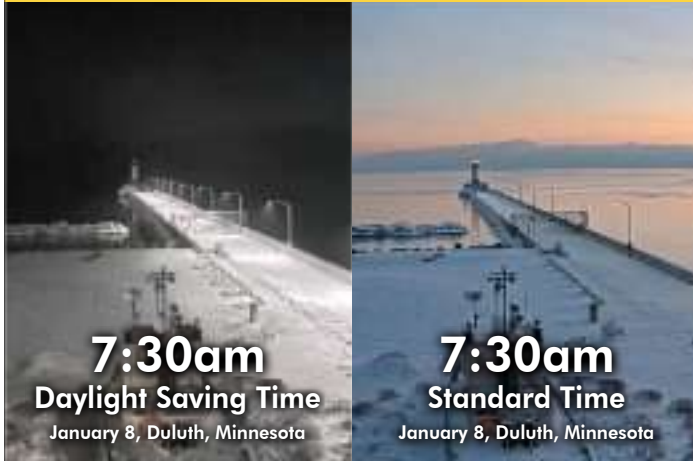
Raúl Aguilar-Roblero MD PhD, Mexico
Konstantin V Danilenko MD PhD, Novosibirsk, Russia
Elizabeth B Klerman MD PhD, Boston, Massachusetts
Michael T Lam MD PhD, San Diego, California
Michael McCarthy MD PhD, San Diego, California
Thomas E Nordahl MD PhD, Davis, California
David K Welsh MD PhD, San Diego, California
Amir Zarrinpar MD PhD, San Diego, California
Salman Ahsan PhD, San Jose, California
Shimon Amir PhD, Montreal, Quebec
Sonia Ancoli Israel PhD, San Diego, California
Michael Antle PhD, Calgary, Alberta
Susanna Barry PhD, Cambridge, Massachusetts
William Bechtel PhD, San Diego, California
Mikhail Borisenkov PhD, Moscow, Russia
Joseph Boyd PhD, Temecula, California
Hugo Calligaro PhD, San Diego, California
Oscar Castanon-Cervantes PhD, Atlanta, Georgia
Archana G Chavan PhD, Merced, California
Joanna C Chiu PhD, Davis, California
Scott Cookson PhD, San Diego, California
Jason DeBruyne, PhD, Atlanta, Georgia
Grant Denn PhD, Colorado
Heinz Freisling MSc PhD, Lyon, France
Frederic Gachon PhD, St Lucia, Queensland, Australia
Karen L Gamble PhD, Birmingham, Alabama
Susan S Golden PhD, San Diego, California
Marijke CM Gordijn MS PhD, Netherlands
Bill Griesar PhD, Portland, Oregon
Chelsea Gustafson PhD, Portland, Oregon
Liz Harrison PhD, San Diego, California
Dietrich Henckel PhD, Germany
Erik Herzog PhD, St Louis, Missouri
Myriam Juda PhD, Vancouver, British Columbia
Thomas Kantermann PhD, Essen, Germany
Paul Kelley PhD, Milton Keynes, United Kingdom
Achim Kramer PhD, Germany
Camilla Kring PhD, Copenhagen, Denmark
Katja Lamia PhD, San Diego, California
Andy LiWang PhD, Merced, California
Travis Longcore PhD, Los Angeles, California
Emily Manoogian PhD, San Diego, California
Peter Mansbach PhD, Bethesda, Maryland
Erik Maronde PhD, Frankfurt, Germany
Girish Melkani MS PhD, San Diego, California
Martha Merrow PhD, Germany
Matt Metzgar PhD, Charlotte, North Carolina
Ralph Mistlberger PhD, Vancouver, British Columbia
João Nunes PhD, Dresden, Germany
Marie Pariollaud PhD, La Jolla, California
Ketema Paul, PhD, Los Angeles, California
Linda Petzold PhD, Santa Barbara, California
Frank Powell PhD, San Diego, California
Kendall Satterfield PhD, San Diego, California
Dorothy D Sears PhD, San Diego, California
Lori L Shemek PhD, Dallas–Fort Worth, Texas
Benjamin Smarr PhD, San Diego, California
Andrea Smit PhD, Vancouver, British Columbia
Barbara Sorg PhD, Portland, Oregon
Melissa A St Hilaire PhD, Boston, Massachusetts
Andrew Steele PhD, San Luis Obispo, California
Joseph S Takahashi PhD, Dallas, Texas
Jennifer Thomas PhD, San Diego, California
Gianluca Tosini PhD, Atlanta, Georgia
Roger Tseng PhD, Ames, Iowa
Judy Village PhD CCCPE, British Columbia
John Wesley White PhD, Sarasota, Florida
Daniel S Whittaker PhD, Los Angeles, California
Anna Wirz-Justice PhD, Switzerland
Wen Zhang PhD, Indianapolis, Indiana
Ying Zhang PhD, Indianapolis, Indiana
Irving Zucker PhD, Berkeley, California
Mariah Baughn MD, San Diego, California
Steven M Croft MD FAAN, Houston, Texas
Richard E Cytowic MD, Washington, DC
Mona Ezzat MD, San Diego, California
John F Gottlieb MD, Chicago, Illinois
Royan Kamyar MD, La Mesa, California
Jack Kruse DMD MD, New Orleans, Louisiana
Beth Malow MD MS, Brentwood, Tennessee
Melody T McCloud MD, Atlanta, Georgia
Andrew Spector MD, Durham, North Carolina
Tessa Sugarbaker MD MFT, San Francisco, California
Nathaniel F Watson MD MSc, Seattle, Washington
Irving Lebovics DDS, Los Angeles, California
Lisa Alexia PA-C, Alaska
Prof Stacey Harmer, Davis, California
Janet Huff LPC, Shreveport, Louisiana
Betty Jung MPH RN MCHES, New Haven, Connecticut
Gayle Kahn Friedman LCSW, Studio City, California
Lynn McGovern MSc, Ireland
Angela Miller MA BSEd, Springfield, Missouri
Prof Kurt Niel, Grieskirchen, Austria
Kevin Spehar, Baltimore, Maryland
Peter Varfalvy MSc, Quebec
Elizabeth Wellburn MA, Victoria, British Columbia
John de Graaf, Seattle, Washington
Fabian Mohedano, Barcelona, Spain

Individuals represent personal views in endorsement of permanent Standard Time policy; they do not endorse as representatives of their employers.

REJECT PERMANENT DAYLIGHT SAVING TIME

Forces early waking. Decreases immunity and alertness. Repeat failure.

Most work/school starts at 8am.
How would you rather start your day half the year?



Permanent Standard Time is the safest, healthiest, quickest end to clock change.



SAVE STANDARD TIME

8:03am average school start in the US. CDC, US ED, SASS, 2015. <https://www.cdc.gov/mmwr/preview/mmwrhtml/mm6430a1.htm>
7:55am median work arrival in the US. 538, ACS, USCB, 2014. <https://fivethirtyeight.com/features/which-cities-sleep-in-and-which-get-to-work-early/>

The US tried permanent DST in 1974.

Several children's lives were taken by sleep-deprived drivers.

<https://www.nytimes.com/1974/01/31/archives/schools-ask-end-to-daylight-time-pressure-follows-success-in-easing.html>



Why repeat bad history? Permanent Standard Time is the safest and quickest way to end clock changes.



SAVE STANDARD TIME

RESTORE PERMANENT STANDARD TIME

Improves sleep. Best for health, safety, education. Federally pre-approved.

"Permanent Standard Time is the only fair, viable option.

"...Permanent Daylight Saving could create real health/safety issues.

Humans require adequate morning light so that our internal biological rhythms synchronize properly to local time. Lack leads to metabolic disorders, depression, cardiovascular disease..."

**Chancellor Gene Block PhD, UCLA
Prof Johanna Meijer PhD, Leiden University**

<https://newsroom.ucla.edu/stories/who-wants-to-go-to-work-in-the-dark>



SAVE STANDARD TIME

"Permanent Standard Time is the best choice to match our sleep-wake cycle.

Daylight Saving Time results in more darkness in the morning and more light in the evening, disrupting the body's natural rhythm."

**Muhammad Adeel Rishi MD
Mayo Clinic & American Academy of Sleep Medicine**

<https://aasm.org/american-academy-of-sleep-medicine-calls-for-elimination-of-daylight-saving-time/>



SAVE STANDARD TIME

"The human circadian system does not adjust to Daylight Saving Time.

Sleep becomes disrupted, less efficient, and shortened... Permanent Standard Time is the healthier, more natural choice."

**Nathaniel F Watson MD MSc
Neurology Professor, University of Washington, Seattle**

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6557642/>



SAVE STANDARD TIME

"Permanent Daylight Saving will undermine any benefits of shifting school start time later.

"...A required wake time of 7am during Daylight Saving leads to the same degree of misalignment as a required wake time of 6am during Standard Time. With permanent Daylight Saving, schools would need to delay start times by one hour during winter just to maintain the status quo!"

**Anne Skeldon PhD
Professor of Biology, University of Surrey**

<https://www.eurekalert.org/news-releases/771715>



SAVE STANDARD TIME

NEWS RELEASE 22-APR-2019

Permanent daylight savings may cancel out changes to school start times

CELL PRESS

Moving the clock forward and then back each spring and fall usually draws plenty of complaints and questions about why such a change is necessary. As a result, several states in the U.S., including California, Washington, Florida, and North Carolina, are now considering doing away with the practice by making daylight savings time (DST) permanent.

But, researchers reporting in the journal *Current Biology* on April 22 say, permanent DST would make it harder to wake up in the winter, as it would remain dark an hour later into the morning. It would also undermine efforts in many states to give teens more time to sleep in by pushing school start times back.

"There has been a long-term, very active debate in the USA and other countries on the difficulties teenagers have in getting up for school," said Anne Skeldon, Professor of Mathematics at the University of Surrey, UK. "Similar discussions on school start times and on permanent daylight saving/standard time are happening in Europe. It seemed important to us to point out that moving to permanent daylight saving will undermine any benefits on sleep timing of shifting school start time later."

Two bills currently making their way through the Californian state legislature are a case in point. Senate Bill SB-328 Pupil Attendance: School Start Time would prohibit middle and high schools from starting earlier than 8:30 in the morning. Senate Bill AB-807 Daylight Saving Time would result in a switch to permanent DST.

Thinking through why permanent DST would negate changes in school start times is a bit tricky, Skeldon explained. That's because it requires understanding how three different times are related to each other and how they shift over the course of the year: environmental time as determined by the sun, our internal biological time (linked to actual light exposure, including sunlight), and the time that we set on our clocks.

If the clocks weren't turned back in the fall, as under permanent DST, it would mean that sunrise would come at an even later clock time than it already does during those shorter days of the winter. As a result, Skeldon and co-author Derk-Jan Dijk, Professor of Sleep and Physiology and Director of the Surrey Sleep Research Centre, write, "a required wake time of 7 a.m. during DST leads to the same degree of misalignment [between the socially required wake time and biological wake time] as a required wake time of 6 a.m. during ST. With permanent DST, schools would need to delay start times by one hour during the winter months just to maintain the status quo!"

Of course, they continued, it's possible that people living indoors under electrical lighting aren't affected that much by shifts in sunrise. But, if that's true, they point out, then it really doesn't matter what time school starts in the first place.

"If we are not entrained to solar time, switching to DST will have no impact on adolescent sleep, but Bill SB-328 delaying school start times is pointless," they write. On the other hand, "if we are completely or partially entrained to solar time, Bill AB-807 leading to permanent DST is bad for adolescent sleep (and the sleep of others) and negates the effect of later school start times."

To sort it out, more research is needed to understand how light exposure affects the sleep and biological clocks of people living in different environments. "We know that spending most of our lives inside and having the lights on late into the evening has had profound effects on when we sleep, but we still have much to learn about exactly how much this matters," Skeldon says.

Carly Britton press@cell.com 617-417-7053 [@CellPressNews](https://twitter.com/CellPressNews)

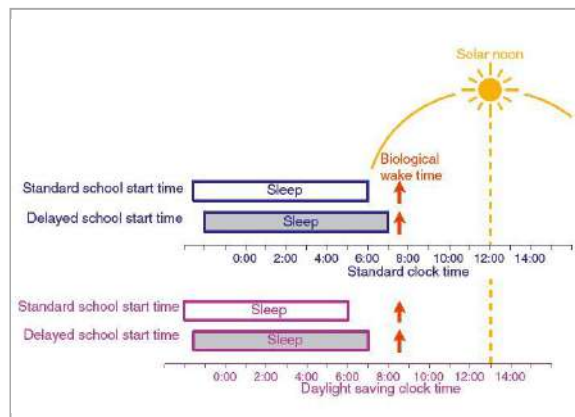


IMAGE: THIS FIGURE SHOWS THE ALIGNMENT OF SLEEP TIMING, CLOCK TIME, AND SOLAR TIME. CREDIT: SKELDON AND DIJK/CURRENT BIOLOGY



American Academy of Sleep Medicine calls for elimination of daylight saving time

DARIEN, IL – Public health and safety would benefit from eliminating daylight saving time, according to a [position statement](#) from the American Academy of Sleep Medicine.

The AASM supports a switch to permanent standard time, explaining in the statement that standard time more closely aligns with the daily rhythms of the body's internal clock. The position statement also cites evidence of increased risks of motor vehicle accidents, cardiovascular events, and mood disturbances following the annual "spring forward" to daylight saving time.

"Permanent, year-round standard time is the best choice to most closely match our circadian sleep-wake cycle," said lead author Dr. M. Adeel Rishi, a pulmonology, sleep medicine and critical care specialist at the Mayo Clinic in Eau Claire, Wisconsin, and vice chair of the AASM Public Safety Committee. "Daylight saving time results in more darkness in the morning and more light in the evening, disrupting the body's natural rhythm."

The position statement, published online as an accepted paper in the *Journal of Clinical Sleep Medicine*, outlines the acute effects of daylight saving time, which range from increased risk of stroke and hospital admissions to sleep loss and increased production of inflammatory markers, one of the body's responses to stress. In addition, studies show that traffic fatalities have increased as much as six percent in the first few days following the change to daylight saving time, and a recently published research abstract found an [18 percent increase in adverse medical events related to human error](#) in the week after switching to daylight saving time.

"There is ample evidence of the negative, short-term consequences of the annual change to daylight saving time in the spring," said AASM President Dr. Kannan Ramar. "Because the adoption of permanent standard time would be beneficial for public health and safety, the AASM will be advocating at the federal level for this legislative change."

In July, an AASM survey of more than 2,000 U.S. adults found that [63 percent support the elimination of seasonal time changes](#) in favor of a national, fixed, year-round time, and only 11 percent oppose it. Additionally, a 2019 survey by the AASM found that [55 percent of adults feel extremely or somewhat tired](#) after the spring change to daylight saving time.

The AASM position statement on daylight saving time has been endorsed by the following organizations:

- American Academy of Cardiovascular Sleep Medicine
- American Academy of Dental Sleep Medicine
- American College of Chest Physicians (CHEST)
- American College of Occupational and Environmental Medicine
- California Sleep Society
- Dakotas Sleep Society
- Kentucky Sleep Society
- Maryland Sleep Society
- Michigan Academy of Sleep Medicine
- Missouri Sleep Society
- National PTA
- National Safety Council
- Society for Research on Biological Rhythms
- Society of Anesthesia and Sleep Medicine
- Society of Behavioral Sleep Medicine
- Southern Sleep Society
- Start School Later
- Tennessee Sleep Society
- Wisconsin Sleep Society
- World Sleep Society.

###

To request a copy of the statement, "[Daylight saving time: An American Academy of Sleep Medicine position statement](#)," or to arrange an interview with an author or an AASM spokesperson, please contact the AASM at 630-737-9700 or media@aasm.org. Accepted papers, which are published online prior to their final inclusion in an issue, are not embargoed. The position statement is scheduled to appear in the Oct. 15, 2020 issue of the journal.

The monthly, peer-reviewed [Journal of Clinical Sleep Medicine](#) is the official publication of the American Academy of Sleep Medicine, a professional membership society that advances sleep care and enhances sleep health to improve lives. The AASM encourages patients to talk to their doctor about sleep problems and visit SleepEducation.org for more information about sleep, including a searchable directory of AASM-accredited sleep centers.

August 27th, 2020 | [Featured](#), [Press Releases](#)



EDITORIAL

Permanent daylight saving time: An idea whose time has not come again

Evidence is in short supply to justify the shift.

By Editorial Board (<https://www.startribune.com/editorial-board/6390869/>) Star Tribune |

MARCH 26, 2022 — 6:00PM

Minnesotans' willingness to give permanent daylight saving time a try back in the 1970s was understandable.

Consumers were reeling from that era's steep inflation. Energy prices were particularly painful, with oil shortages the fallout from Middle East producers flexing their might.

No wonder 68% of those surveyed in a Minnesota Poll published Dec. 2, 1973, said they favored a shift to year-round daylight saving time (DST). If a simple clock adjustment could reduce energy demand and yield savings, why not give it a try? That same rationale led the U.S. Congress to pass legislation to leave clocks one hour ahead year-round beginning in early 1974.

Three months after this shift, Minnesotans had had a major change of heart. In a Minnesota Poll published March 20, 1974, 58% of those surveyed said they preferred standard time during the winter.

That historical reality should throw cold water on ill-informed modern-day proposals for a permanent DST shift.

If it didn't work in 1974, it's unclear why it would work now.

Yet there are bills with broad bipartisan support at the state and federal levels to make this switch again. One of them, the ["Sunshine Protection Act"](#)

([https://www.congress.gov/bill/117th-congress/senate-bill/623?](https://www.congress.gov/bill/117th-congress/senate-bill/623?q=%7B%22search%22%3A%5B%22sunshine+protection+act%22%2C%22sunshine%22%2C%22protection%22%2C%22act%22%5D)

[q=%7B%22search%22%3A%5B%22sunshine+protection+act%22%2C%22sunshine%22%2C%22protection%22%2C%22act%22%5D](https://www.congress.gov/bill/117th-congress/senate-bill/623?q=%7B%22search%22%3A%5B%22sunshine+protection+act%22%2C%22sunshine%22%2C%22protection%22%2C%22act%22%5D)

), "cleared the U.S. Senate with little debate but unanimous consent on March 15. It would make DST permanent [beginning in 2023](#)

(<https://www.rubio.senate.gov/public/index.cfm/press-releases?id=B7EE5AB2-E909-49B3-B0DF-4F1DC0AB49C6>).

At the Minnesota Legislature, there are bills, [SF 149](#)

([https://www.revisor.mn.gov/bills/bill.php?](https://www.revisor.mn.gov/bills/bill.php?b=Senate&f=SF0149&ssn=0&y=2021&keyword_type=all&keyword=daylight)

[b=Senate&f=SF0149&ssn=0&y=2021&keyword_type=all&keyword=daylight](https://www.revisor.mn.gov/bills/bill.php?b=Senate&f=SF0149&ssn=0&y=2021&keyword_type=all&keyword=daylight)) and [HF 72](#)

(<https://www.revisor.mn.gov/bills/bill.php?f=HF72&y=2021&ssn=0&b=house>), calling

for this as well. [Sen. Mary Kiffmeyer](#)

(https://www.senate.mn/members/member_bio.html?leg_id=15302), R-Big Lake, has

long been a [champion](#) ([https://www.revisor.mn.gov/bills/bill.php?](https://www.revisor.mn.gov/bills/bill.php?b=Senate&f=SF0149&ssn=0&y=2021&keyword_type=all&keyword=daylight)

[b=Senate&f=SF0149&ssn=0&y=2021&keyword_type=all&keyword=daylight](https://www.revisor.mn.gov/bills/bill.php?b=Senate&f=SF0149&ssn=0&y=2021&keyword_type=all&keyword=daylight)) of ending

the current "spring forward, fall back" clock shift. A companion bill in the House has a list of authors that includes prominent DFLers and fiery conservatives.

The state legislation, if passed, would be dependent on a congressional approval, which is sensible. Things would get confusing if Minnesota made this switch but other states did not.

Kiffmeyer's clock-flipping complaints are legitimate. The changes, as she said in a statement, are linked to a "statistical rise in car crashes, days missed from work, heart attacks and workplace injuries immediately surrounding the change. These issues emerge as a result of the sleep disruption and a chaotic transition."

Ending the twice-a-year clock change merits serious consideration. But the state and federal bills go beyond that to make DST permanent. That would be a mistake. If there is a shift, it should be to standard time.

The Star Tribune's archives help explain why. The 1974 change went into effect on Jan. 6 that year, trading darker mornings for afternoon daylight. On that day, the time change meant the sun rose in Minnesota around 8:50 a.m. (<https://sunrise-sunset.org/us/minneapolis-mn/2022/1>)

By Jan. 16, the Star Tribune was reporting two accidents that may have been linked to the unaccustomed morning darkness. In Duluth, a 3-year-old boy died when he and his mom were struck returning from a bus stop. In Austin, a car hit a crossing guard and two elementary students.

Parents were advised to add reflective materials to kids' coats. Local leaders called for later school start times to protect kids. Reports released nationally suggested energy savings were minimal. Not surprisingly, broad regret settled in. In October 1974, then-President Gerald Ford signed legislation undoing (<https://www.smithsonianmag.com/smart-news/what-happened-the-last-time-the-us-180979742/#:~:text=In%20October%201974%2C%20President%20Gerald,planned%20two%2Dyear%20experiment%20early.>) the change.

As the current Congress weighs DST 2.0, health experts are speaking out. If there is a permanent change, standard time is the clear choice. It provides more early daylight and most closely aligns with the body's natural wake-work-sleep rhythms. Misalignment has been linked to "increased cardiovascular disease risk, metabolic syndrome and other health risks," according (<https://jcsn.aasm.org/doi/10.5664/jcsn.8780>) to the American Academy of Sleep Medicine.

Simply put, "It's better to have light in the mornings than the evenings," said Dr. Conrad Iber (<https://med.umn.edu/bio/dom-a-z/conrad-iber>), a sleep medicine physician at University of Minnesota Medical School and M Health Fairview.

It's unclear why there's momentum this year behind the federal DST shift. A change that affects so many requires thoughtful consideration and solid evidence to justify it.

So far, both are in short supply. A pause, at the very least, is timely and necessary.

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