Promoting Healthy Sleep for Older Adults
National Sleep Foundation (NSF) has long supported the position that sleep is critically important for all age groups, including older adults, and that sleep health should be considered a vital sign of overall health. Poor sleep can contribute to the risk of physical and mental health disorders such as depression and anxiety, dementia, obesity, hypertension, cardiovascular disease, and stroke in older adults. Poor sleep is also associated with impaired physical and cognitive functioning, more frequent falls, and overall poor quality of life, which may accelerate the aging process. Need for sleep does not decrease with age (i.e., NSF’s recommended sleep duration for people 65 and older is 7-8 hours per night, similar to the recommendation for younger adults), but biological, environmental, and psychosocial changes can place older adults at greater risk for sleeping difficulties. In addition, policies and practices that result in restricted access to health-promoting resources and more exposure to health damaging environments can contribute to poor sleep in socially disadvantaged older adults. In spite of these challenges, getting older is not synonymous with poor sleep and optimizing sleep health as people age may help prevent or delay the onset of physical, cognitive, and mental disorders in older adults.

As part of the NSF’s mission to improve the public’s health and well-being through sleep education and advocacy, in March 2022, NSF held a virtual workshop with a multidisciplinary range of backgrounds including academic sleep and circadian biology, public health and advocacy, primary care, geriatric medicine, insurance and medical assistance programs, amongst others. This report, tailored to health and public professionals in the aging space, outlines the findings from the conference.
Sleep health recommendations don’t necessarily change with aging, but the context of aging (including biological and social changes) makes it more challenging and more critical for older adults to closely adhere to practices that promote good sleep health. The need to sleep does not change significantly with age, so a consistent bed and rise time that allows 7-8 hours of sleep is also important.

Sleep health recommendations should be followed throughout the lifespan as a means to prevent or delay the adverse effects of poor sleep on health and functioning. Poor sleep is not an inevitable consequence of aging. Rather, poor sleep is more likely related to illnesses and functional limitations that occur with greater frequency with advancing age. Older adults should speak to their healthcare professionals if they have ongoing concerns about sleep; additionally, healthcare professionals should have access to knowledge and tools to identify sleep problems in their older patients. A number of treatments are available, including nonpharmacological and pharmacological options.¹¹

Set a consistent bed and rise time to allow between 7-8 hours of sleep.
Sacrificing sleep for more time awake has a negative impact on the quality of those waking hours. Most older adults need between 7-8 hours of sleep and should be going to bed and getting up at a consistent time each day.

Optimize environmental conditions (e.g., light, noise, air, temperature) that are controllable.
This will promote comfortable sleep, with the understanding that policy work is needed to optimize these conditions on a larger, societal level.

Get regular daily light exposure and moderate to vigorous exercise.
Increase light exposure during the day. Get 45-60 minutes of bright outdoor light over the course of the day. Combine with a walk for added benefit.

Have consistent routines, including timing of meals.
This helps regularize the sleep-wake cycle. But don’t eat within 2-3 hours of bedtime.

NSF has developed and is currently using evidence-based approaches consistent with these conference recommendations. In addition, NSF produces educational campaigns and interventions for earlier in the lifespan, including childhood, early adulthood and middle-aged adults. These age groups may have unique psychosocial and environmental challenges to healthy sleep. Finally, NSF continues to encourage the public to seek help from a clinician if they have sleep difficulties that persist after following fundamental sleep health recommendations. NSF also offers healthcare professionals access to evidence-based sleep health education and assessment tools.
Understanding the connections between sleep and health helps motivate behavior change. In particular, older adults should be aware of the associations between sleep and brain health, pain management, and weight management. It was recommended that sleep be included as both a pillar of healthy living and disease-state education programs. Content should be clear, culturally sensitive, accessible to disadvantaged groups and developed in partnership with communities. Outreach to healthcare professionals about the importance of assessing sleep and promoting sleep health in older adults is also needed.
Promoting Sleep Health Education in Older Adults

1. Indicate the “why” to motivate people.
   Sleep is linked to physical, mental and cognitive health.

2. Have tailored sociocultural educational materials.
   Content should be culturally sensitive, accessible to disadvantaged groups and developed in partnership with communities.

3. Make sure outreach efforts include early adulthood and middle-aged adults.
   Sleep health recommendations apply equally well to all adult populations. It is important to motivate people earlier in life to have the longest impact.

4. Outreach to healthcare professionals about the importance of assessing sleep in older adults.
   This can include promoting access to knowledge and tools to identify sleep problems in their older patients.

5. Include sleep in healthy living and disease prevention messaging campaigns.
   Sleep should be considered an important target for education and intervention due to its many downstream effects on physical and mental health.

NSF is in the process of developing socioculturally tailored materials for middle aged and older adults. These educational campaigns and infographics highlight the health benefits of good sleep and will integrate perspectives of leaders and community members of traditionally disadvantaged groups to continue promoting sleep health equity. In addition, NSF will continue to partner with government agencies, medical associations, academic institutions, and healthcare professionals to ensure that sleep is accepted as a crucial measure of overall health and to provide resources and tools to educate providers and patients about sleep health.
Community support is important for sleep health behavior change in older adults. For example, community and peer-to-peer support has been used to enhance cognitive health and physical health among older adults. Local and national partners can help disseminate sleep health messaging and promote behavior change by enhancing community trust and helping to guide messaging and channels of communication. Finally, at a policy level, efforts are needed to modify environmental and social drivers of sleep health. For example, liveable wages and increased financial support could help bridge disparities, decrease financial distress, and ultimately have a downstream impact on sleep. Increasing green spaces, safe walkable areas, and light levels in community areas during the day could be used to enhance the sleep of older adults through decreased stress and strengthened sleep-wake cycles.

COMMON MYTH
Sleep does not serve any daytime function.

FACT
Sleep is essential for optimal physical, mental, and brain health.
Community Engagment for Promoting Sleep Health

1. **Community support is critical.**
   Community and peer-to-peer support is important for sleep health behavior change.

2. **Involve partners that work with older adults for dissemination of education and behavior change programs.**
   This includes local and national partners. Efforts could include healthcare professionals (e.g., pharmacists), national agencies and organizations (e.g., CDC, AARP, VA), continuing care retirement communities, assisted living communities, federally qualified health centers, and local businesses (e.g., gyms, places of worship, barber shops, nail salons).

3. **Modify environmental and social determinants of sleep health.**
   This could include eliminating causes of sleep health disparities (e.g., financial and psychological stress, air pollution, light pollution, heat islands, food deserts/swamps) and making health promoting environments more equitably distributed (e.g., increasing green spaces, safe spaces, and optimizing light levels in community areas).

NSF supports evidence-based policies and legislative action for older adults. This includes advocating for a sleep health component to disparities legislation and supporting and contributing to policies to address cultural barriers and social determinants of sleep health in communities in which older adults work, live, and receive care. For example, research examining the assumed medical necessity for enforced sleep interruption of older adults residing in nursing homes should be encouraged. NSF also engages with multiple US government agencies, including commenting on the United States Department of Housing and Urban Development (HUD) strategic plan.
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