Insufficient Sleep Among Delaware Adults

Sleep, like food and water, is essential for life.

Consequences of insufficient sleep.

Insufficient sleep has been linked to the onset of and correlates with a number of chronic diseases and conditions, including diabetes, cardiovascular disease, obesity, and depression. Insufficient sleep also contributes to motor vehicle crashes and machinery-related accidents, causing substantial injury and disability each year.[1]

How much sleep do we need?

Although how much sleep is needed varies between individuals, most adults need 7–9 hours of sleep each night.[2] More than a third of U.S. adults report sleeping less than 7 hours per night.[3]

Why don't we get the sleep we need?

Causes of insufficient sleep include lifestyle and occupational factors (e.g., access to technology and work hours).[1] In addition, some medical conditions, medications, and sleep disorders affect the quantity and quality of sleep.[1]

Getting the sleep we need.

Good sleep practices are important for achieving healthy sleep.

Sleep hygiene tips:

- Go to bed at the same time each night and rise at the same time each morning.
- Moderate physical activity may help promote sleep, but avoid vigorous exercise in the few hours before going to bed.
- Avoid large meals before bedtime.
- Avoid caffeine and alcohol close to bedtime.
- Avoid nicotine.

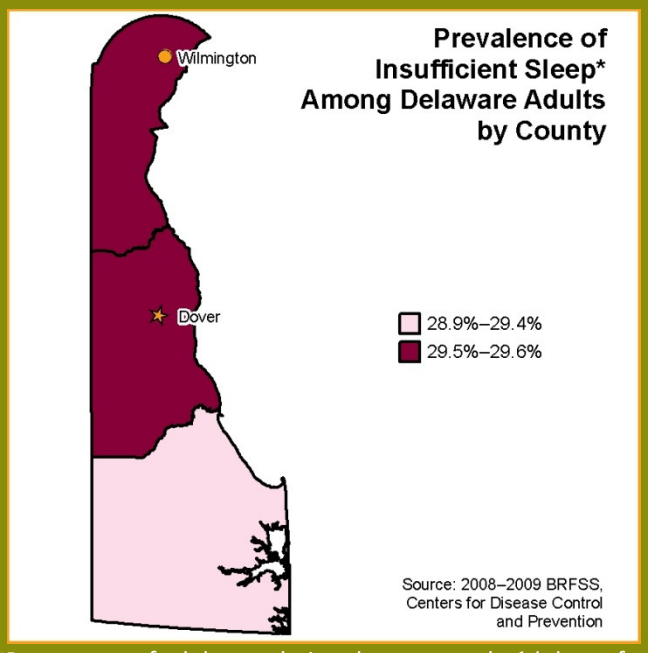
The sleep environment:

- Your bedroom should be a quiet, dark, and relaxing environment, that is neither too hot nor too cold.
- Remove all TVs, computers, and other "gadgets" from the bedroom.
- Your bed should be comfortable and used only for sleeping and not for other activities, such as reading, watching TV, or listening to music.

1 Institute of Medicine. *Sleep Disorders and Sleep Deprivation: An Unmet Public Health Problem.* Washington, DC: The National Academies Press; 2006.

2 National Sleep Foundation. How much sleep do we really need? Washington, DC: National Sleep Foundation; 2010. Available at http://www.sleepfoundation.org/article/how-sleep-works/how-much-sleep-do-we -really need.

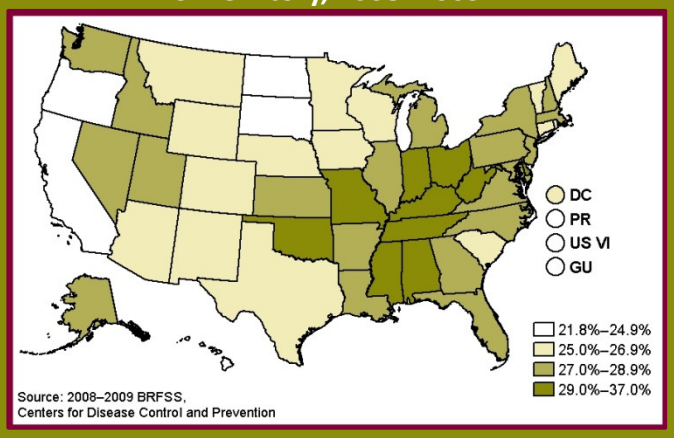
3 CDC. Effect of short sleep duration on daily activities—United States, 2005–2008. *MMWR* 2011;60:239–42.



*Percentage of adult population that reported ≥14 days of insufficient sleep in the past 30 days.

For 2008–2009, 29.4% of Delaware adults reported not getting enough sleep on ≥14 days in the past 30 days. The map above presents the prevalence of insufficient sleep among Delaware adults by county. For comparison, the national map below shows state-by-state adult prevalence of insufficient sleep.

Adult Prevalence of Insufficient Sleep* by State or Territory, 2008–2009



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National Center for Chronic Disease Prevention and Health Promotion
Division of Adult and Community Health

How's *your* sleep?

You may suffer from a sleep disorder if:

1. You frequently have difficulty sleeping (e.g., trouble falling asleep or staying asleep, feeling unrefreshed after sleep).
2. You snore loudly or you or others have observed that you stop breathing or gasp for breath during sleep.
3. You suffer from excessive sleepiness during the day.
4. You have unpleasant, tingling, creeping feelings or nervousness in your legs when trying to sleep.

What to do if you have trouble sleeping.

- Practice good sleep hygiene.
- Consult your physician to discuss any of the problems above.
- Keep a sleep diary to discuss with your physician or sleep specialist.

For more information, go to

http://**www.cdc.gov/sleep**

The table to the right breaks down the prevalence of insufficient sleep among Delaware adults by sex, age, race/ethnicity, education, employment status, marital status, presence of children in the home, and body mass index (a measure of excess weight).

The prevalence of self-reported insufficient sleep was **higher** among women (32.0%) than men (26.6%) ($p<0.05$).

Respondents were **more likely** ($p<0.05$) to report insufficient sleep if they:

- Were aged 25–34 years (39.3%) compared to those aged ≥45 years
- Were unable to work (54.4%) compared to all other employment status categories
- Were a member of an unmarried couple (49.8%) compared to all other marital status categories
- Had a child living in the home (36.2%)
- Were obese (32.7%) compared to normal-weight (27.4%) or overweight individuals (27.0%)

Respondents were **less likely** ($p<0.05$) to report insufficient rest or sleep if they:

- Were retired (14.6%) compared to other employment status categories
- Did not have a child living in the home (24.8%)

There were no statistically significant differences in the prevalence of self-reported insufficient sleep for groups defined by race/ethnicity.

Prevalence of Insufficient Rest or Sleep (≥14 days in past 30 days) Among Delaware Adults, 2008–2009 BRFSS*

(N= 8,309)

	%	(95% CI)
Total	29.4	(27.9 – 30.9)
Sex		
Men	26.6	(24.1 – 29.0)
Women	32.0	(30.1 – 33.9)
Age		
18–24	32.7	(25.6 – 39.9)
25–34	39.3	(34.9 – 43.8)
35–44	34.7	(31.4 – 37.9)
45–54	31.2	(28.2 – 34.2)
55–64	25.4	(22.6 – 28.1)
≥65	14.4	(12.7 – 16.0)
Race/Ethnicity		
White	29.3	(27.6 – 31.0)
Hispanic	32.3	(21.7 – 42.9)
Black	29.0	(24.8 – 33.2)
Asian	29.2	(14.5 – 43.8)
American Indian/Alaska Native	30.7	(15.5 – 45.9)
Native Hawaiian/Pacific Islander	-	- -
Other/Multiracial	36.4	(26.8 – 46.0)
Employment Status		
Employed	31.6	(29.5 – 33.6)
Unemployed	35.6	(27.4 – 43.7)
Retired	14.6	(12.9 – 16.2)
Unable to work	54.4	(46.4 – 62.4)
Homemaker or student	34.4	(28.1 – 40.8)
Marital Status		
Married	28.0	(26.2 – 29.8)
Divorced, widowed, separated	29.2	(26.6 – 31.8)
Member of unmarried couple	49.8	(38.8 – 60.8)
Never married	29.9	(25.5 – 34.4)
Children in Home		
No	24.8	(22.9 – 26.6)
Yes	36.2	(33.5 – 38.8)
Body Mass Index		
Underweight	46.2	(25.4 – 67.1)
Normal	27.4	(24.5 – 30.2)
Overweight	27.0	(24.6 – 29.4)
Obese	32.7	(29.9 – 35.6)

*Data source: Behavioral Risk Factor Surveillance Survey (BRFSS) for 2008 and 2009. As part of the phone survey, respondents were asked, "During the past 30 days, for about how many days have you felt you did not get enough rest or sleep?" Dashes (-) indicate a cell size <50. For information about BRFSS methodology, go to http://www.cdc.gov/BRFSS.