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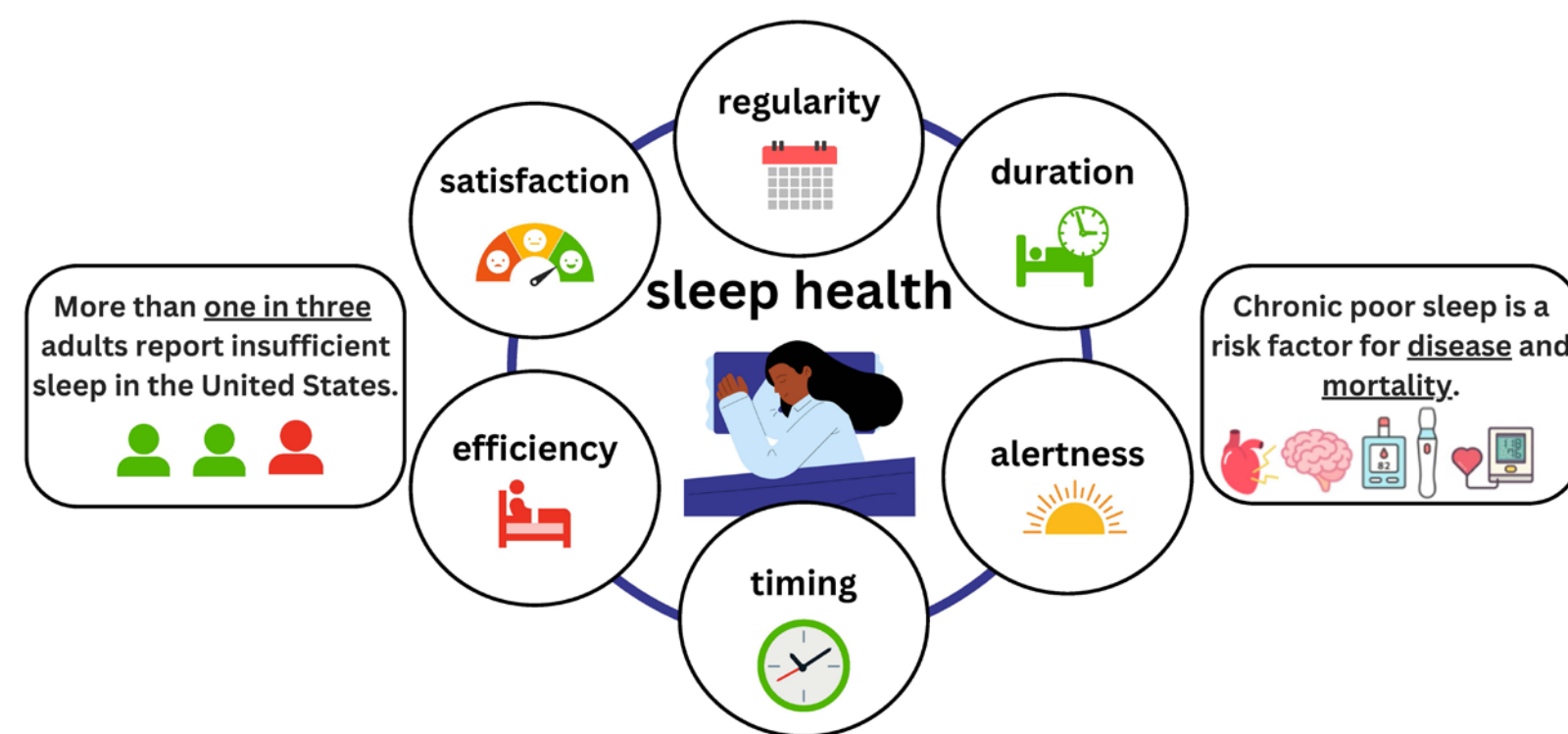


EMORY
UNIVERSITY

Examining Risk and Protective Factors of Sleep Health and the Role of Sleep in Biological Aging among Black and White Adults

The goal of this dissertation is to examine psychosocial risk and protective factors of sleep health, and investigate whether adverse sleep health predicts indicators of weathering (i.e., elevated allostatic load and epigenetic age acceleration due to stressors), a precursor to chronic disease onset and increased mortality risk.

Insufficient sleep is a major public health problem.



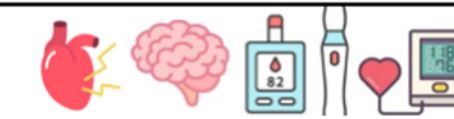
There are unexplained racial disparities in sleep health outcomes.

What we DO understand:

Black Americans have **worse sleep health** outcomes compared to non-Hispanic White Americans after controlling for confounding factors (e.g., age, socioeconomic status, etc.).



Inequities in sleep health are likely **contributors to pervasive racial disparities** in adverse health outcomes where sleep is implicated.



What we DO NOT understand:

What are the **mechanisms** of racial disparities in sleep health?

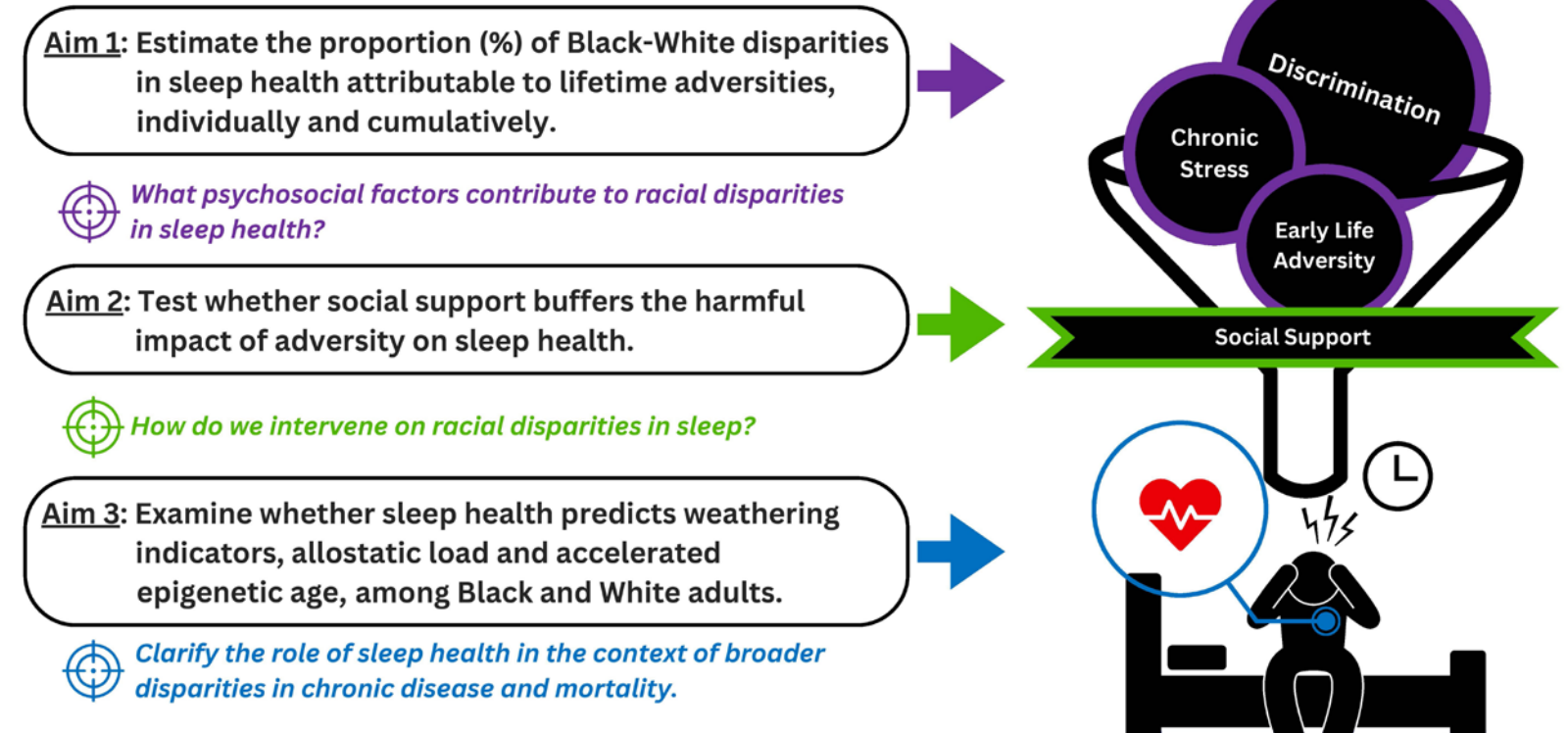


What is **protective** of sleep health among racially minoritized populations?

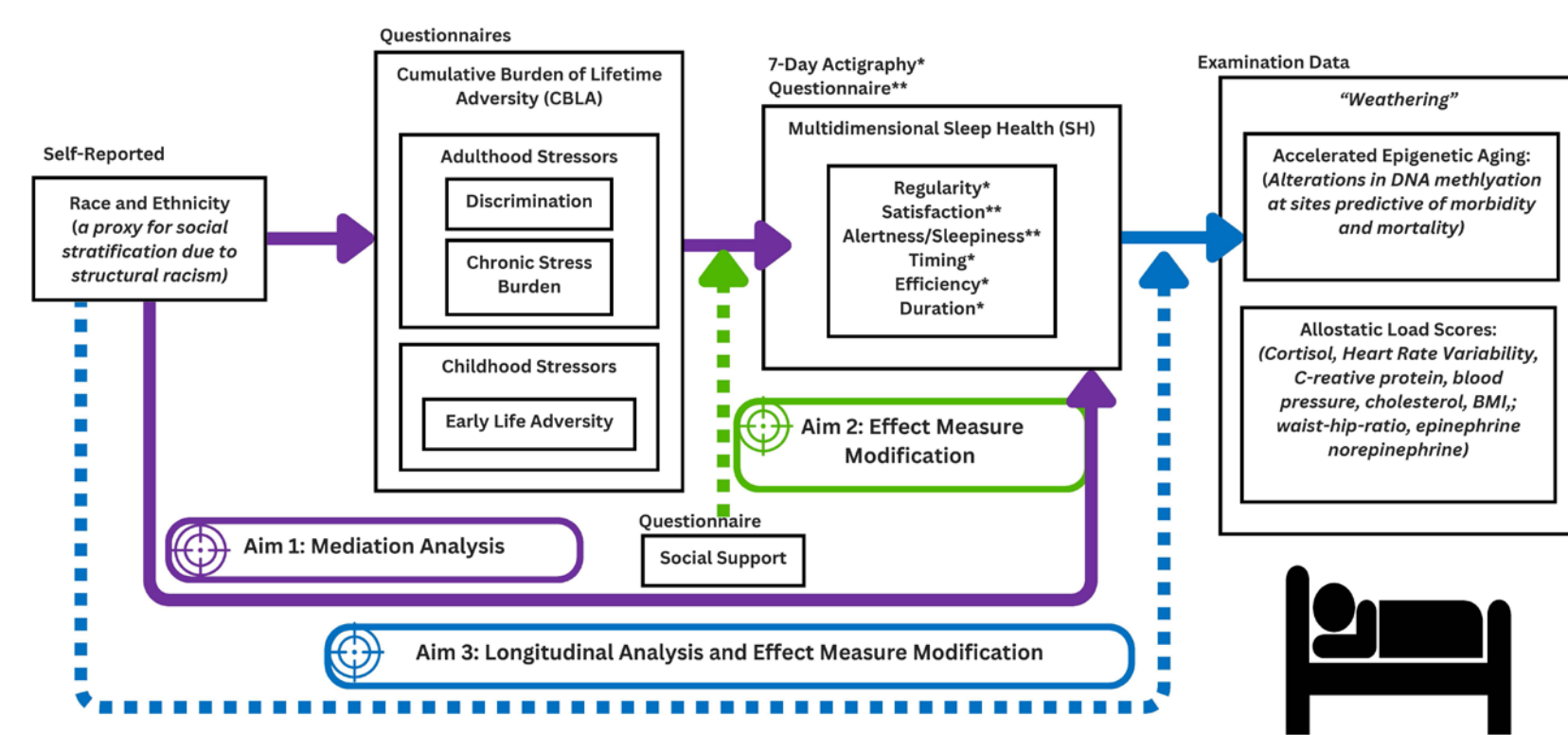
What is the relationship between sleep health and **"weathering"** (i.e. a proposed explanation for racial disparities in adverse health outcomes)?



Dissertation Aims and Potential Insights:



Scientific Approach:



Why is this research important?

- The American Heart Association (AHA) has added sleep to its key recommendations for good health in 2022.
- Healthy People 2030 has added improving population sleep as an objective.
- The National Heart Lung and Blood Institute (NHLBI) has called for more sleep determinants research and sleep disparities research.

Have You Heard?
The AHA Life's Essential 8 Includes Sleep

1. Eat Healthy
2. Be Active
3. Don't Smoke
4. Get Healthy Sleep
5. Manage Weight
6. Control Cholesterol
7. Manage Blood Sugar
8. Manage Blood Pressure

Figure. Model-based crude and age-adjusted county-level prevalence estimates of short sleep duration (<7 hours per 24-hour period) among adults aged 18 years or older, by quintile, United States, 2020. Urban-rural classification was defined by the National Center for Health Statistics 2013 urban-rural classification scheme (6). Age-adjusted estimates were standardized to the 2000 projected US population aged 18 years or older in 13 groups (18-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54, 55-59, 60-64, 65-69, 70-74, 75-79, ≥80) (4). Data source: Centers for Disease Control and Prevention (7).

Overall Goals and Public Health Impact:

