SleepCoach

AI sleep coach for shift workers, new parents, and frequent travellers — the populations whose disrupted circadian rhythms generic sleep apps assume away. $9/month for the 80M+ people whose sleep is structurally broken.

Category	Set 6 · Consumer & Family
Customer	Shift workers (nurses, factory workers, IT graveyard shift), new parents, frequent international travellers, ADHD-spectrum adults with sleep issues
Monetisation	$9/mo Solo · $19/mo Pro (smartwatch integration + advanced) · $39/mo Couples (multi-user)
Build effort	Med
Plan version	v1.0 — 2026-05

Executive Summary

SleepCoach is an AI sleep coach built for the populations that generic sleep apps (Calm, Headspace Sleep, Sleep Cycle, Pillow) systematically fail: shift workers whose schedules invert biological clocks, new parents whose sleep is wake-fragmented across feeds, frequent international travellers crossing time zones weekly. These populations cumulatively exceed 80M users globally + have severe sleep dysfunction + are willing to pay for help that actually addresses their reality (not Generic Wind-Down Routines designed for someone with a 10pm-6am window).

The product: per-user sleep coaching that accepts the user's actual schedule (not an idealised one) + provides personalised circadian + nutrition + light-exposure + caffeine + medication-timing recommendations tuned to disrupted rhythms. Daily morning briefing (today's sleep quality + tomorrow's plan), weekly review, integration with wearables for objective data.

Year-1 target: 4,500 paying subscribers generating ■2 crore annual revenue against ■38 lakh costs. Cash-positive month 3. The wedge against generic sleep apps is population-specific (we don't pretend a nurse's schedule is broken; we work with it). Wedge against medical sleep clinics ($500-3,000 per consultation) is accessible price + daily-relationship cadence.

The Problem

An estimated 80-100M+ people globally have sleep schedules that don't match the 9-to-5 default that consumer sleep apps assume. Shift workers (nurses on 3 nights / 4 days rotation, factory workers on 12-hour swings, IT engineers on US-business-hours graveyard from India): chronically disrupted circadian rhythm with downstream consequences (cardiovascular disease + metabolic syndrome + cognitive impairment + 40%+ shorter career life expectancy). New parents in first 18 months of child's life: wake-fragmented sleep, total sleep often 4-5h, recovery dependent on partner alignment + nap windows. Frequent international travellers (consultants + executives + diplomats + airline crew): perpetual jet-lag with no ability to settle.

Existing apps fail these populations. Calm + Headspace Sleep + Sleep Cycle + Pillow assume a fixed bedtime window + give generic wind-down content (meditation + soundscapes + sleep stories). For someone whose bedtime is 7am because their shift ended at 6am, this is useless. Medical sleep clinics ($500-3,000 per consultation, 6-12 week wait) work for severe cases but are inaccessible for ongoing daily coaching.

The market gap: a coach that meets the user where they actually are + provides personalised + actionable guidance + adapts as schedule changes.

The Solution

SleepCoach onboarding captures the user's actual schedule profile (shift worker with specific rotation / new parent with infant's age + feed schedule / traveller with typical trip patterns) + sleep goals + current sleep status (via brief assessment).

Daily morning briefing: based on previous night's sleep (from wearable data if connected; from user self-report otherwise) + today's schedule (work / travel / events) + chronobiological state, SleepCoach generates structured guidance — caffeine cutoff time (precise hour based on metabolism + schedule), light-exposure recommendations (morning light to anchor circadian rhythm, evening light avoidance), nap window if applicable + duration, meal timing for circadian alignment, evening wind-down adjusted to actual bedtime.

Weekly review: longer-form analysis of week's sleep quality + pattern identification + adjustments to plan + acknowledgment of progress. Delivered Sunday morning.

Population-specific modules. Shift workers: rotation-management guidance (transitioning between day shifts and night shifts; light-exposure protocols for forward + backward rotation). New parents: partner-coordination protocols (alternating night-feed responsibilities for cumulative rest), infant-age-specific sleep regression awareness, return-to-work transition. Travellers: pre-trip preparation (light-exposure shifting starting 3 days before travel), in-flight protocols (when to sleep + when to stay awake), arrival-day reset.

Three structural differences from generic sleep apps. First, population-specific (not 9-to-5 default). Second, daily coaching cadence (not just content library). Third, adaptive (plan adjusts as user's reported sleep + schedule changes).

Pro tier ($19/mo) adds: deep wearable integration (Apple Watch + Garmin + Oura + Whoop data for objective sleep stage + HRV + temperature tracking), advanced chronobiological analysis, prescription-medication timing optimisation (for users on circadian-relevant medications). Couples tier ($39/mo) for new-parent families: partner coordination + alternating-night-care planning + shared dashboard.

Market Opportunity

Addressable population globally. Shift workers: ~20M in US + ~80M globally. New parents in first 18 months: ~8M in US, ~30M globally annually. Frequent international travellers: ~5M heavy travellers. Plus ADHD-spectrum + chronic insomnia + perimenopause-affected populations.

Willingness-to-pay at $9-39/mo is reasonable for sleep solutions; sleep dysfunction is acutely-felt + people pay for relief.

At blended ARPU of $150/year, SAM is ~$2-3B globally. Realistic 4-year capture: 0.05-0.2% = $1-6M ARR. Modest absolute capture but defensible focused-niche business.

Adjacent expansion. Year 2: peri-menopause sleep variant (women 45-55 with hormonal-driven sleep disruption), chronic-pain sleep variant. Year 3: clinical partnership with sleep doctors (white-label tier for clinics to offer to patients between visits).

Target Customer

Primary persona: a 34-year-old ICU nurse in Hyderabad working 4-on/3-off rotation with 12-hour shifts (alternating day + night blocks). Chronically tired, brain-fogged on rotation days, suspects long-term health damage. Will pay $9/mo Solo after free trial shows actionable improvement.

Secondary persona: a 31-year-old new mother of 4-month-old in Pune, husband working full-time. Total sleep ~4.5h fragmented. Will pay $39/mo Couples tier for shared dashboard + alternating-night protocol with husband.

Tertiary persona: a 42-year-old management consultant flying between Bengaluru + London + Singapore + New York 3 weeks/month. Will pay $19/mo Pro tier with Whoop integration for travel-prep + arrival-day protocols.

Product

Onboarding: schedule profile (shift / parent / traveller / mixed), goals, current sleep status, optional wearable connection (Apple Watch / Oura / Whoop / Garmin / Fitbit).

Daily morning briefing: 90-second read with today's caffeine cutoff + light-exposure plan + nap window + meal timing + wind-down adjusted to actual bedtime.

Weekly review: Sunday morning longer-form summary + pattern identification + adjustments + progress recognition.

Population-specific modules: shift rotation management, new-parent partner coordination, traveller jet-lag protocols.

Wearable integration (Pro+): objective sleep stage + HRV + temperature data feeding into analysis.

Sleep journal: optional brief self-report each morning if no wearable.

Couples tier additions: shared partner dashboard + alternating-night-care protocols + co-parent communication.

Technical Architecture

Frontend: Next.js + Tailwind web app + React Native mobile.

Backend: Python on Hetzner cloud, Postgres on Neon.

AI: GPT-4o for daily briefing generation + weekly review (~$0.20/user/month). Custom chronobiology rule engine for personalisation.

Wearable integrations: Apple HealthKit + Google Fit + Oura API + Whoop API + Garmin API + Fitbit API.

Payments: Stripe + Razorpay.

Business Model & Unit Economics

Three tiers. Solo ($9/mo or $89/yr). Pro ($19/mo or $189/yr) — wearable integration + advanced. Couples ($39/mo or $389/yr) — multi-user for parent families.

Conversion: 14-day free trial converts at 14%. Distribution: 60% Solo, 30% Pro, 10% Couples. Monthly churn target under 5%.

Gross margin: 84%. Major cost: AI inference (~$1.50/user/mo), infrastructure (~$0.50/user/mo).

LTV: $108 × 18 mo = $194 (Solo); $228 × 22 mo = $501 (Pro); $468 × 26 mo = $1,217 (Couples).

Unit Economics (Year-1 base case)

Year-1 paying subscribers (target)	4,500
Blended ARPU	$144/year
Year-1 revenue	$230,000 (~■1.9 crore)
Gross margin	84%
CAC	$32
Payback period	3.5 months
Year-1 all-in costs	~■38 lakh
Year-1 net contribution	~■1.2 crore

Go-to-Market

Channel 1 — Population-community organic (40%): shift-worker subreddits (r/nursing, r/shiftwork), new-parent communities, frequent-flyer communities.

Channel 2 — Workplace + occupational health partnerships (25%): hospitals (for nursing staff), corporate wellness programs (for IT shift workers).

Channel 3 — Influencer partnerships (20%): health + sleep + wearable creators.

Channel 4 — Paid acquisition (15%): targeted Meta + Google Ads.

Roadmap (first 12 months)

- Month 1-3: MVP with shift-worker module + Solo tier. 250 paying subscribers.
- Month 4-5: New-parent + traveller modules, Pro tier with wearable integration, 900 subscribers.
- Month 6-8: Couples tier launched, 2,200 subscribers, ■8 lakh MRR.
- Month 9-10: Workplace partnership program, 3,500 subscribers.
- Month 11-12: 4,500 subscribers, ■1.9 crore annualised.

Key Risks

- Wearable data dependency: data quality varies by device. Mitigated by multi-source support + self-report fallback.
- Population-specific niches small individually: each population is 5-20M; need multi-population aggregation. Mitigated by progressive module launches.
- Generic apps adding population-specific features — possible long-term threat. Mitigated by depth of population-specific protocols + chronobiology expertise.

- Medical-advice liability: sleep coaching borders on medical advice. Mitigated by clear scope disclaimers + professional indemnity insurance.
- Slow consumer-SaaS conversion: sleep apps have notoriously high churn after initial novelty. Mitigated by daily-cadence stickiness + adaptive plan.