examined the relationship of perceived housing problems associated with worse mental health. However, previous studies mostly examined one dimension of housing insecurity (e.g., deprivation or crowding). Thus, we aimed to explore the relationship between perceived housing problems and depressive symptoms among middle-aged and older Americans.

Aims

We examined the association between perceived housing problems and depressive symptoms using a national sample of American adults aged 50 and older.

Methods

We used cross-sectional data from wave 2 of the American Housing Survey Supplement and the Center for Epidemiological Studies Depression Scale (CESD). Mixed-effect models were used to assess the relationship between housing problems and depressive symptoms, adjusting for demographic characteristics, socioeconomic status, and housing-related confounders. We also explored the dose-response relationship between severity and duration of housing problems and depressive symptoms.

Results

About 5%-7% of respondents had housing problems during every study visit and 5.67% of them experienced persistent problems. Among those with housing problems, 28.67% had depressive symptoms using a binary measure (CESD score ≥ 4).

Conclusion

Having housing problems was associated with higher risk of depressive symptoms, with increased risk existing for those with greater severity and longer duration of housing problems. Results were adjusted for household-level, and housing-related confounders.

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PERCEPTIONS OF OLDER ADULTS ON YOGA-BASED INTERVENTIONS FOR MULTIMORBIDITY IN MYSORE, INDIA


Globally, over half of older adults suffer from ≥2 chronic diseases. In India, proven exercise interventions are limited by individual, social, environmental and policy-level factors. We aimed to qualitatively explore perceptions about yoga interventions for healthy aging in Mysore, India. In collaboration with the Community Advisory Board, we developed a qualitative assessment of knowledge, attitudes and behaviors around yoga among seniors. Between August-September 2022, we conducted focus group discussions (FGDs) with older adults, after obtaining informed consent. Interviews were recorded, transcribed, and translated from the local language Kannada. Data were coded manually, and emerging themes were identified. We conducted 4 FGDs of 7-8 participants each; 14 male and 13 female older adults participated, and their average age was 66.1±4.3 years; 88.9% had at least 10 years of education. Most participants expressed interest in yoga for health maintenance, specially mentioning its Indian roots, but did not prioritize it for routine practice. Yoga practice was also a means to reduce social isolation for many. Reported challenges in adopting yoga practice included inaccessibility to instructors and dependence on family members. Cultural barriers especially affected women, including ageism and gender role expectations. Women reported hesitancy to express their desire to learn yoga due to perceived negative reactions from their younger family members and their community. Promoting health promotion practices among older Indian adults is challenging primarily due to cultural norms and changing family dynamics with age. Promoting healthy behaviors among them through yoga will first involve family education and consent.

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