

### FOOD INSECURITY AND COST-RELATED MEDICATION NON-ADHERENCE IN OLDER ADULTS: A SYSTEMATIC REVIEW

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Food insecurity (FI) is defined as having limited access to nutritional and safe foods due to lack of financial resources and is believed to negatively influence health outcomes. Older adults, in particular, face rising healthcare costs and may be forced to choose between purchasing prescribed medications and using their limited financial resources for basic needs, such as food. The purpose of this systematic review was to examine the relationship of food insecurity (FI) and cost-related medication non-adherence (CRN) in older adults living in the community setting. A comprehensive, electronic review of the literature was performed. Criteria for inclusion were original quantitative or qualitative research, written in English, human participants  $\geq 60$  years, and published from January 2000 through January 2019. The total number of studies included was six. Main findings from the studies largely indicate that FI and CRN are significantly and positively correlated in older adults living in American communities. Further, CRN increases with the severity of FI. Most participants in these six studies were female, non-Hispanic white, with an annual household income  $< 20k$ , and with less than a high school education. Although preliminary evidence is promising, research with more rigorous design is warranted to better understand the relationship of FI and CRN in older adults, and to develop appropriate interventions and programs for this growing public health concern.

### INNOVATIONS IN HOME MODIFICATION RESEARCH: THE STATE OF THE ART

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The overwhelming preference of older adults is to stay in their homes for as long as possible (AARP). However, most housing lacks supportive features and presents barriers that jeopardize residents' ability to successfully age in place. Only 1% of houses have five key features to ensure accessibility: no-step entry, single-floor living, lever door handles, accessible electrical controls, and extra-wide doors and hallways (Harvard Joint Center for Housing Studies), making the vast majority unsuitable for persons who use wheelchairs and problematic for the growing number of people with activity limitations. Persons least likely to have such features in their homes need them the most: old-old, low income, frail, and residents in older housing stock. Although home modification can support people as their needs change and preclude the need to move, often to institutional settings, the majority of older adults lack these supports. Recent studies have demonstrated the role of home modification in health, safety, and cost effectiveness. This symposium will convene a panel of researchers to share evidence-base in home modification,

recent cost-saving innovations including the CAPABLE Program, and policy change to improve service delivery.

### NOT ENJOYING THE MEAL WAS ASSOCIATED WITH DEPRESSIVE SYMPTOMS, DESPITE THE SIZE OF SOCIAL CONNECTIONS

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Conventional studies report that the enjoyment of the meal is related to likelihood of contracting depressive mood. The Japanese assisted living facilities currently support seniors build social connections to maintain their health and well-being, but psychological feeling during mealtime is often left unquestioned. Because seniors engage in conversation with tablemates while dining, the feeling during mealtime should not be ignored. This study aimed to explore the relationship among social connection, enjoyment during mealtime, and depressive mood. A cross-sectional questionnaire study was performed for independent residents at assisted living facility in Kanagawa Prefecture, Japan. The size of social connection (the number of facility residents that one can easily talk to) and enjoyment during the meal were assessed by a single item, respectively. The 15-item Geriatric Depression Scale was used to measure depressive symptoms. The analysis included 190 questionnaires. A logistic regression analysis showed that enjoyment during mealtime was associated with less likelihood of depressive symptoms, but the size of social connection was not, after adjusting for socio-demographics and health conditions. Moreover, a significant interaction between social connection and enjoyment during mealtime was observed. This indicated that greater size of social connection was inversely related to depressive symptoms among those who enjoyed the meal; however, among those who did not enjoy the meal, the likelihood of depressive symptoms were stably higher despite the size of social connection. The findings suggested that along with helping seniors build social connection, care takers should focus on improving the dining environment of seniors.

### DEPENDENCY IN ACTIVITIES OF DAILY LIVING: THE ROLE OF MULTIDIMENSIONAL FRAILTY AND PROTECTIVE FACTORS

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Most older adults prefer to "age in place" and maintain independent regarding activities of daily living (ADL). Dependency in ADL might be caused by frailty. This study