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TUFH 2020 Abstracts

Title	**The use of lifestyle medicine intervention among low-income households in an urban relocation setting**
Type	Oral Presentation *Working with Underserved Populations towards Community Empowerment*
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Country	Philippines
Abstract Nº	TUFH457
Content	In disaster-prone contexts, it is imperative to develop and test community-based interventions for vulnerable communities. Those that prioritize prevention and expedite recovery, especially the mental health of survivors are needed. Given the limitations of traditional mental health services, even in settings that made large investments to improve access, it is important to provide alternative community-based models of care in low-resource settings. This study modeled and tested a lifestyle medicine-based psychoeducation intervention for disaster-affected communities in Eastern Philippines using 3-wave longitudinal data. It was hypothesized that sleep quality, depression, and anxiety would be significantly associated with one another, and that intervention targeting these variables would improve health outcomes among participants. Relocated low-income households, vulnerable to the long-term consequences of a massive disaster, were recruited to participate in a series of monthly psychoeducation workshops. It was designed to encourage changes in their day-to-day behaviors, particularly sleep, eating habits, physical activity, social connections, and management of environmental stressors. As hypothesized, poorer sleep quality was associated with depression and anxiety symptoms. Depression and anxiety were also associated with poor sleep quality. The intervention was found to significantly reduce depressive symptoms. While sleep and anxiety ratings improved, the study does not have enough evidence to suggest such changes were associated with the intervention. Despite the limitations of the current study, it showed the potential use of this lifestyle medicine-based approach to meeting the needs of disaster-affected populations in low-resource settings.