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A MIND-BODY INTERVENTION FOR OLDER PLWH: A MIXED-METHODS STUDY OF THE ACCEPTABILITY AND FEASIBILITY OF QIGONG

Background

Almost half of the people living with HIV (PLWH) in the United States are over 50 years old. Yet, few interventions exist targeting this population. Tai Chi/Qigong (TCQ) uses breath-work, meditative focus, and fluid body movements. The present study is a mixed-methods study that examines the preliminary acceptability and feasibility of a TCQ intervention for older PLWH in Miami, Florida.

Methods

Qualitative. Interviews were conducted with key informants (n=9) to determine the acceptability and feasibility of the intervention. Key informants had a minimum of 15 years of experience in the HIV field and included peer-educators, case managers, and healthcare providers. Thematic analyses were conducted using two coders. Quantitative. PLWH aged 50 and older (n=24) were randomized to either a 12-week TCQ intervention, sham qigong, or standard of care control group. Surveys and logs were administered to each participant and collected pre- and post-weekly intervention classes to assess acceptability.

Results

Qualitative. Nineteen sub-codes were identified describing acceptability: (1) having benefits, (2) meditation and relaxation, (3) non-strenuous exercises, (4) seniors love exercising, and (5) worth trying alternatives. Under the feasibility theme, the main sub-codes were (1) doable for different physical levels, (2) non-strenuous exercises, and (3) can start with a chair. Quantitative. In the clinical trial, participants' ages ranged from 50-68 years (M = 58.2, SD = 5.4) with 50% identified as female. Most were African American (80%) and Latinos (13%). Enjoying the TCQ classes was reported by 95% of participants, and 93% said it was meeting their expectations. Ninety percent ranked daily classes as excellent on a 1 (poor) to 5 (excellent) rating scale, with an average ranking of 4.88. Most participants (86%) also identified the movements as very easy or easy; only 3% reported movements as very hard. Most reported doing TCQ home practice (58%), with half of them using the exercise booklets. 90% did not use the DVD or video streaming for the movements because of not having a DVD player or internet. Lastly, the mean attendance in both the intervention and control group for every week was 64%, ranging from 60% to 75%.

Conclusion

Our study found preliminary acceptability and feasibility of a TCQ intervention for older PLWH. This is the first step in developing an intervention for a group that currently has very few intervention options.