

45TH ANNUAL MEETING & CONFERENCE



**SOUTHERN
GERONTOLOGICAL
SOCIETY**

Bridging Aging Research & Practice

A Balanced Approach:
*Seeking Evidence-Based
Holistic Strategies to
Promote Healthy Aging*

***BOOK OF
ABSTRACTS***

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“Addressing Structural Racism: Impact on Alzheimer’s Dementia & Caregivers ”

Self-Care Wellness Workshop

Dr. Ethlyn Gibson¹

1. Norfolk State University - School of Nursing

The African American (AA) community is strong and resilient but must address the silent epidemic of Alzheimer’s Disease that is impacted by structural and institutional racism. AA are two times more likely to develop Alzheimer’s Disease than Non-Hispanic white counterparts. Caregivers must address issues such as institutional racism that will increase risk for dementia. This talk will address issues such as limited education, income inequalities and limited or no access to health care.

Caregivers must address structural and institutional racism and factors that impact diagnosis and treatment of such as mistrust of the health care system due to past mistreatment, which may delay access to care and assessment, and 3) cognitive screening tools that may not be culturally appropriate.

This talk will also address the hesitancy of those in the Black community to participate in clinical trials to address Alzheimer’s Dementia.

A Balanced Approach: Personal, Operational and Physical Transformation to Support Dementia Capability

Technique or Tool Demonstration Workshop

***Ms. Kim McRae*¹, *Dr. Jennifer Craft Morgan*², *Ms. Rose Marie Fagan*³**

1. Culture Change Network of Georgia, 2. Georgia State University, 3. Live Oak Project

This workshop will walk participants through achieving personal, operational and physical transformation of organizations to culture change. This interactive workshop will describe the three aspects of transformation - personal, operational and environmental and illustrate how to has apply this framework to support organizations to implement person centered care, person centered dementia care, and create person-centered organizations with robust quality improvement processes. We will discuss how we emphasize competency-building in a trauma-informed approach, person centered care and quality improvement processes to equip long-term care staff with tools that support quality care and quality of life for residents. Implications for the structure and content of continuing education training, modalities for online education including microlearnings and webinars and evaluation of such training will be discussed. Participants will leave the workshop with access to resources and an action plan for using resources with their teams and organizations.

A Curriculum Module to Enhance HBCU College Students' Knowledge of Home Accessibility Features for Older Adults

Professional Paper Presentation

Dr. Sung-Jin Lee¹, Ms. S. Renee Robinson¹, Dr. Elizabeth Hopfer¹, Dr. Meeshay Williams-Wheeler¹, Dr. Valerie Giddings¹, Dr. Hye Won Kang¹

1. North Carolina A&T State University

A home environment with home accessibility and universal design features can assist older adults in successfully aging (Kim et al., 2019; Lee et al., 2017). North Carolina A&T State University (N.C. A&T), the largest Historically Black College and University (HBCU) in the nation, does not provide a comprehensive housing or universal design course in the context of aging. This educational gap can imply a threat that limits college students' competencies related to knowledge of the total life cycle. This study aimed to introduce a curriculum module on aging processes and home accessibility features for older adults, which was delivered to HBCU students to enhance their knowledge of the home environment for older persons.

The authors developed a curriculum module focusing on older adults' physical changes with aging and home accessibility features for a 1-hour, classroom-based educational session. The module consisted of (1) background introduction delivery, (2) students' hands-on activity, (3) students' session evaluation, and (4) discussion. In Fall 2022, 33 students in the Department of Family and Consumer Sciences at N.C. A&T, where the authors are affiliated, participated in the four educational sessions. All students expressed that they came to understand home accessibility features, e.g., "This simulation suggests things like wide hallways/doorways, non-slip floors/bathrooms, and extra floor space, which benefits adults of older age in a home."

As a best practice, the educational session confirmed the module's effectiveness in enhancing non-gerontology students' general understanding of older adults' aging processes and universal design or accessibility feature needs at home.

A Systematic Review of Interventions for Meniscus Tears in Patients Over the Age of 45

Student Poster Presentation

Mr. Andrew Lawendy¹, Dr. TimMarie Williams¹

1. University of the Incarnate Word School of Osteopathic Medicine

The effectiveness of treatments on meniscus tears in adults over the age of 45 is uncertain. The aim of this systematic review was to examine the impact of interventions on meniscus teras in adults over the age of 45. A systematic review was developed in accordance with PRISMA 2020. Relevant databases of PubMed and the Cochrane Library were analyzed for studies between 2013-2023. A total of 37 articles were found and 13 were selected in this systematic review. Criteria for inclusion were: 1) presence of surgical intervention vs physical therapy on meniscus tears, 2) evaluation of patient pain and level of degeneration after a six-month interval, and 3) significant findings associated with the surgical vs physical therapy approach. This review was anticipated to yield clinically meaningful insight on the benefits of treatments for meniscus tears in adults over the age of 45. The attitudes of the selected studies give evidence that further studies are needed.

A Systematic Review of Interventions to Improve Cognition in Older Adults

Student Poster Presentation

***Mr. Ian Blount*¹, *Ms. Rhianna Lopez*¹, *Ms. Harvonya Perkins*¹, *Dr. TimMarie Williams*¹**

1. University of the Incarnate Word School of Osteopathic Medicine

Background: The effectiveness of physical activity interventions on cognition in adults aged 65 and older is unclear. **Method:** A systematic review was developed in accordance with PRISMA 2020 Guidelines. Relevant databases of PubMed and the Cochrane Library were analyzed for studies published between 2013-2023. The aim of this systematic review was to examine the impact of physical activity on cognition among older adults. Criteria for inclusion were: 1) adults over 65, 2) resistance exercise, 3) aerobic exercise and 4) cognitive decline. Also, the exclusion criteria were 1) adults under 65 and 2) studies published before 2013. A total of 126 articles were found and 23 were selected.

Results: All 23 articles in this systematic review give evidence that interventions such as resistance training and aerobic exercise are effective when looking to improve cognition among older adults.

Conclusion: This review was anticipated to yield clinically meaningful insight on the benefits of physical activity on cognition for older adults. Further studies are needed to determine which form of physical activity, resistance training or aerobic exercise, has a greater impact on cognition among older adults.

A Systematic Review of Interventions to Improve Glycemic Control Among Patients with Type 2 Diabetes

Student Poster Presentation

Mr. Lukas Isley¹, Ms. Natalie Willis¹, Dr. TimMarie Williams¹

1. University of the Incarnate Word School of Osteopathic Medicine

Lifestyle changes are promoted via physicians to decrease blood glucose levels and increase insulin sensitivity. The intervention of weight/resistance training is critical because skeletal muscles are responsible for the uptake of 80% of glucose from the blood post-insulin response. The aim of this systematic review was to examine the impact of resistance training on glycemic control in adults with type 2 diabetes. A systematic review was developed in accordance with PRISMA 2020. Relevant databases of PubMed and the Cochrane Library were analyzed for studies published between 2013-2023. Criteria for inclusion were 1) adults 19+, 2) diagnosed with Type II diabetes mellitus, 3) Male and female, and 4) undergoing intervention of resistance/weight training. From a preliminary search of both databases, 204 papers were identified, and 21 papers were selected. This review was anticipated to yield clinically meaningful insight into the benefits of resistance training on glycemic control among adults with type II diabetes. We conclude more studies are needed in the field to develop the current evidence base.

Addressing Age-Related Health Concerns: A Lifestyle Intervention in Postmenopausal Women with Obesity

Student Poster Presentation

Mr. Christian McLaren¹, Dr. Stephen Anton¹

1. University of Florida

Background The increasing obesity rate in U.S. older adults, especially postmenopausal women, particularly among black individuals, emphasizes age-related health concerns. This study addresses this imperative issue by evaluating the impact of a combined lifestyle intervention—including both dietary restriction and exercise—on abdominal adiposity in a diverse sample of post-menopausal women with obesity.

Methods: Twenty-five individuals were randomly assigned to either the Health Education Control (HEC) group, receiving monthly lectures, or the Dietary Restriction plus Exercise (DR+E) group, instructed to reduce daily caloric intake by 750 kcal and engage in weekly exercise sessions. Subcutaneous abdominal tissue (SAT) and visceral abdominal tissue (VAT) volumes were assessed pre and post-treatment using T1-weighted 3D-Magnetic Resonance Imaging scans at the L4-L5 vertebral level. Group differences were compared using the Wilcoxon rank-sum test.

Results: Participants in the DR+E group exhibited a more substantial reduction in VAT compared to the HEC group ($-63,109.6 \pm 50,992.3 \text{ cm}^3$ versus $-20,454 \pm 40,801.3 \text{ cm}^3$; $p=0.04$). While a greater reduction in SAT in the DR+E group compared to the HEC group was observed, it did not reach statistical significance ($-172,756.7 \pm 204,386.2 \text{ cm}^3$ versus $-36,834.6 \pm 159,223.5 \text{ cm}^3$, $p=0.09$).

Conclusions: This study underscores the efficacy of DR+E intervention in significantly reducing abdominal body fat in a diverse sample of post-menopausal women with obesity. These findings offer valuable insights into addressing age-related health and wellness concerns, with a specific emphasis on the unique challenges faced by black postmenopausal women.

Ageist or Age-Positive? Exploring Images of Elders in Fine Art and Photography

Professional Paper Presentation

Dr. Meldrena Chapin¹

1. University of Maryland, Baltimore County

Ageist, showing discrimination based on age, is related to ageism, discrimination against older people because of negative, and often, inaccurate stereotypes. Weir (2023) suggests that ageism is “so ingrained in our culture that we often don’t even notice”. There is good news, however, researchers have shown “that interventions to reduce ageist stereotypes and prejudice can be effective” (Burnes, et.al., 2019). Most of these efforts include education about aging and/or intergenerational contact. None appear to include fine art.

This paper presents the results of student observations of fine art and photography, using artistic analysis and observer-constructed meaning, which led to determining if an image was ageist or age-positive. Results reveal that art can be age-positive. More importantly, viewing art can be a means of educating individuals about the aging experience. This experience suggests that art can be an effective tool in combating ageism.

Aging with Independence: How Cognitive Impairment and Physical functioning Impacts Activities of Daily Living (ADLs) among Older adults.

Student Paper Presentation

Mr. Alfred Boakye¹

1. University of Maryland, Baltimore and Baltimore County

Due to population growth, the number of older adults is projected to be over 1.5 billion by 2050. This trend would increase the percentage of disability among this group, leading to loss of independence, increased morbidity, and mortality. The prevalence of disabilities varies among groups based on differences in characteristics such as age, gender, sex, number of comorbidities, marital status, educational level, and level of cognitive function. The demanding needs of older adults will require more support to navigate basic and instrumental activities of daily living (BADLs & IADLs). This reflects the growing public health concern around cognitive impairment and age-related diseases such as Alzheimer's and stroke as contributing factors to these disabilities and their impact on physical functioning. However, the relationship between these variables has not been well established and seems inconsistent among the results published in extant literature. This review aimed to 1) gain a deeper understanding of how cognitive impairment and comorbidities impact older adults' physical functioning, 2) explore the relationship between cognitive impairment, physical functioning, and ADL management, and 3) describe practical ways to support older adults with cognitive impairment to stay independent while they age in place. After an extensive literature review from research databases and reports from government agencies, a conceptual framework was designed to understand better how cognitive impairments, age-related diseases, and physical functioning impact ADLs among older adults. Practical implications that could inform sustainable interventions and increase independence among older adults with disabilities have been proffered.

Aligning Smiles and Bodies: A Holistic Approach to Geriatric Dental and Physical Wellness”

Professional Paper Presentation

***Dr. Julie Hartmann*¹, *Dr. Tara Granada*¹, *Dr. Kathleen Fischer*², *Dr. James Harrison*², *Dr. Megan O’Malley DeGaris*², *Mrs. Avery Estes*¹, *Ms. Caroline Husband*¹**

1. Bellarmine University, 2. University of Louisville

Background: Interdisciplinary collaboration is imperative when providing holistic, patient-centered care for older adults. Collaboration between dentists and physical therapists is uncommon but invaluable in caring for the older adult population. To achieve this, the authors believe it is vital to educate the future generation of the healthcare workforce to embrace interdisciplinary care. The purpose of this project was to facilitate collaboration, increase awareness of scope of practice, and decrease barriers to referrals between physical therapy students and dental students.

Methods: Physical therapy and dental students participated in an interdisciplinary event at a local dental school. Data was collected utilizing The Collaborative Healthcare Interdisciplinary Planning Scale (CHIRP) to assess attitudes towards interdisciplinary healthcare teamwork. The physical therapy students observed dental students examining their patients and each discipline asked evidence based, pre-selected screening questions to aid them in identifying proper referral to each other’s discipline.

Results: CHIRP pre and post results highlighted that participants agreed with and acknowledged the importance of collaboration. Five of fourteen items showed increased awareness of interdisciplinary collaboration. Themes from open ended questions included increased knowledge of each profession and increased comfort with referral. **Conclusions:** Implications of this research emphasize the potential benefits of providing unique interdisciplinary opportunities between dentistry and physical therapy students. The authors recommend continued research in the area of interdisciplinary education with increased focus on integration of oral health knowledge into geriatric curriculum and practice.

An Examination of Student Perspectives of Careers in Aging Services and Faculty Perspectives of Teaching Topics on Aging

Student Paper Presentation

Ms. Bailee Ridlon ¹, Dr. Sandi Lane ¹

1. Appalachian State University

With a projected increase in the population of older adults as well as the prevalence of people reaching 100 years of age, the U.S. needs healthcare workers who know this population's needs. There is a current lack of interest among faculty and college-age students to participate in education that teaches healthcare about older adults. The purpose of this study is to gather students and faculty's views on careers working with older adults and including aging content in their courses and to identify the factors that influence those views. An anonymous, online survey was conducted using Qualtrics. One survey looked at the faculty's point of view and experiences and the other was designed for college-aged students. The majority of both the students and the faculty had previous experiences working with older adults and most selected that they would work with this population again. Both students and faculty considered educational content on older adults as important, however, the student survey had an even distribution of whether this topic is important or not for their field of study. Students indicated they are interested in working with pediatric and older adult populations. Overall, most of the participants indicated that they would continue their education in older adult healthcare. Additional research is needed across different academic settings to obtain a more diverse view of factors contributing to a faculty's desire to add aging content in their teaching and students' interest in aging content and careers working with the aging population.

An intervention for peer-led sexually transmitted infection education among older adults

Student Paper Presentation

Mrs. Sarah Tesar¹, Dr. Megan Smith¹

1. University of North Carolina at Charlotte

Older adults have sex, at rates varying from 73% (57-64) - 26% (75-85), and it is important to acknowledge this demographic when thinking about sexually transmitted infection (STI) education. The CDC reported that 15% of new cases of AIDS were in individuals fifty years and older. A study in the UK found that adults fifty years and older are one of the fastest-growing cohorts of those living with a diagnosis of HIV+. Sexual ageism leads providers and older adults themselves to not acknowledge the need for frank discussion on STIs. These statistics reveal the need for those in gerontological professions to create novel educational interventions.

To understand the root of the problem, the authors have reviewed the literature seeking to learn why STI rates in older adults are rising so rapidly. The literature indicates that most adults currently living in retirement communities or nursing homes do not have access to sex education that is tailored to their age and stage. Despite the lack of STI educational programs for older adults, we found comparable peer-led programs designed for young adults. We recognized that with some modifications, these could serve as a foundational model. While we do not have data on the efficacy of the peer-led programs for older adults, we are ready to conduct a pilot study to support a STI education and awareness peer-led program for older adults.

Approaching Balance: Considering Social Exclusion and Interdependence Frameworks in Research, Teaching, and Practice

Technique or Tool Demonstration Workshop

Dr. Cynthia Hancock¹, Dr. Tina Newsham², Dr. Lee Ann Ferguson³

1. University of North Carolina at Charlotte, 2. University of North Carolina Wilmington, 3. University of Maryland, Baltimore County

The authors are building upon a previous SGS presentation that questioned the common use of a binary understanding of independence/dependence in favor of a more balanced and holistic interdependence framework. Indeed, proponents of social exclusion perspectives argue that challenging environments (such as the spaces older adults often inhabit as most spaces are designed for young, able-bodies) often act in ways that create enhanced social solidarity and interdependence between those sharing that space. The presenters will offer an evidence based rationale for an interdependence framework incorporating ethnographic data from the recent nissology scholarship of the third author. Engaging in the workshop will help participants to uncover their implicit and explicit biases towards the binary framework and how these Eurocentric biases often hide the resiliency and strength of interdependence approaches. From there, drawing upon design challenge techniques, participants will work together to develop creative approaches for educating students, colleagues, and practitioners about the need to move away from the binary model that positions independence as a realistic and valuable goal - when in fact it is neither. This workshop will be informative and interactive and provide a space for students, researchers, educators and applied practitioners to question their own assumptions and develop new approaches to their work and the training and teaching of others all with the goal of providing a greater opportunity for healthy aging outcomes.

Artificial Intelligence and Aging

Professional Poster Presentation

Dr. Zahra Rahemi¹

1. Clemson University

Most older adults prefer living at home over other options, such as assisted living facilities. Typical characteristics of this fast-growing population include living alone, facing cognitive impairments, chronic diseases, and vision and hearing constraints, leading to decreased ability to live in homes independently. Recently, the use of Artificial intelligence (AI) has been considered a tool with the potential to improve aging in place. The broad use of AI is changing many aspects of everyone's life. However, there are concerns about the use of AI, such as how AI predictive models increase inequity and power imbalance in society through perpetuating racism, sexism, and classism and questions around explainability and transparency of AI algorithms. The purpose of this systematic review was to understand the challenges and opportunities of using AI techniques for older adults. A comprehensive literature search was conducted. Findings from 10 studies were critically analyzed and compared. Major strengths regarding AI applications for older adults included developing real-time data, healthcare management, and monitoring the physical and mental health of those living alone or in social quarantine. Regarding COVID-19, AI-based applications for early symptom detection (coughing, pain, and fevers) were beneficial. Major weaknesses included a need for human observation and skills transformation, overlooking social variables, security risks, lack of a sense of touch (haptics), data scarcity, and inaccuracies. Related studies were mainly conducted under ideal conditions, such as in labs. Our results can inform research and policy related to the use of AI in older adults' healthcare and daily life.

Association of Marital Status and Cognitive Function in Older Adults

Student Poster Presentation

*Ms. Negar Nik Bakht*¹

1. PhD student in Social Gerontology at Miami University

Background and Objectives: As the US population is aging rapidly, the number of older adults living with cognitive impairment increases. The impact of cognitive decline is substantial, affecting older adults, their families, and society at large. The purpose of this study is to investigate the variation in cognitive function by marital status in the United States.

Research Design and Methods: This is a cross-sectional study using data from the Health and Retirement Study, HRS 2018 Core. The sample included 7,632 older adults (3,072 men and 4560 women) aged 65 years and older. Cognitive functioning was assessed using the modified version of the Telephone Interview for Cognitive Status. Linear regression techniques were used to analyze data.

Results: Compared to their married/partnered counterparts, unmarried individuals (cohabiting, divorced/separated, widowed, and never married) tend to have a lower cognitive score by approximately 0.7 points, after controlling for age, gender, race, and level of education.

Discussion and Implications: These findings will be valuable for policymakers and healthcare professionals to develop programs and interventions for vulnerable subpopulations.

Keywords: Cognitive Impairments, Dementia, Cohabitation, Divorce, Marriage, Never-marrying, Widowhood

Awareness of pulmonary sarcoidosis in the older adult: A case study approach

Virtual Presentation (will not be live, must pre-record, will be included in Book of Abstracts and Conference Program, \$50 fee in place of conference registration)

Dr. Andrea Jennings¹

1. VA Northeast Ohio Healthcare System, Gerontology Research Education Clinical Center, Cleveland, Ohio, 44106

A. Jennings, VA Northeast Ohio Healthcare System, Gerontology Research Education Clinical Center, Cleveland, Ohio, 44106

Sarcoidosis is as an autoimmune disease and the exact cause is unknown. The causes may be linked to genetics, bacteria, viruses, infections, and environmental factors. Sarcoidosis can attack a variety of organs in the body; however, the lungs are quite commonly impacted by pulmonary sarcoidosis. In older adults, sarcoidosis is hard to diagnosis because the symptoms may mimic other chronic diseases. Thus, health care providers may not recognize sarcoidosis and implement an inappropriate treatment plan. This may be an overwhelming experience for older adults given the possibility of misdiagnoses and a battery of unneeded diagnostic tests. The purpose of this hypothetical case study is to highlight how pulmonary sarcoidosis can present in an older adult and how nurses specifically can develop a plan of care for patients. With a diagnosis of pulmonary sarcoidosis, continuing patient education, self-advocacy, and family support are all essential. Educational implications will be discussed as it relates to health care providers being able to identify and manage sarcoidosis in older adults more efficiently in both inpatient and outpatient settings.

Balancing caregiving and professional responsibilities: Descriptive Study of University Employees and Student Caregivers in a University in Appalachia. A Snapshot of Preliminary Findings

Student Paper Presentation

***Mr. Richard Mutua Kilonzo*¹, *Dr. Erin Mauck*¹, *Dr. Shimin Zheng*¹, *Dr. Jodi Southerland*¹**

1. East Tennessee State University

In the United States, family caregivers play an indispensable role in supporting aged individuals facing health challenges. However, the effort of these caregivers often goes unnoticed. This study addresses the unique challenges experienced by university employees and student caregivers as they navigate the role of balance between professional and caregiving responsibilities. The primary objective is to describe the characteristics and experiences of these caregivers. This cross-sectional study was conducted at an Appalachian university among employees and students who provided unpaid care to adult family members or friends within the last 90 days. Study participants, totaling 172 employees and 162 student caregivers, completed an online Qualtrics survey from November to December 2023. Preliminary analysis indicate that two-thirds of participants were female, with half aged >50 years old. Half of the respondents provided care for two years or less, and a majority anticipate continuing caregiving in the next two years. Most caregivers cared for a single person, a mother, father, or grandmother. Chi-square and t-tests will be used to explore differences among caregiver demographics. The study underscores significant challenges faced by university employees and student caregivers in balancing academic professional and caregiving roles. It emphasizes the essential need for tailored support mechanisms within academia to address their specific needs, foster inclusivity, contribute to a resilient academic community, and establish a foundational framework for future caregiver support initiatives at universities.

Brain Health: What We Know & Strategies for Getting the Word Out

Best Practices Presentation

Ms. Denise Scruggs¹

1. National Council of Certified Dementia Practitioners

Brain health is a rapidly expanding field and a concern for most older adults. Physical health, environment, social connections, and lifestyle habits can impact our risk for dementia. In this interactive program, we will talk about brain health and the latest research around brain health and the early signs of dementia, share the newest resources available for educating older adults and people of all ages about brain health and dementia, and discuss proven strategies for connecting with community members to provide brain health and dementia education.

Breaking the Chains of Ageism: Towards an Inclusive Society

Technique or Tool Demonstration Workshop

Dr. Corinne Auman¹

1. Winston Salem State University

Ageism, the pervasive and often unspoken bias against individuals based on their age, is a deeply entrenched social issue that affects people of all generations. This presentation, dives into the heart of ageism, shedding light on its insidious manifestations and exploring strategies for fostering an age-inclusive world.

The session begins with an examination of the root causes and consequences of ageism, emphasizing the profound impact it has on individuals, workplaces, healthcare, and societal norms. Through thought-provoking anecdotes and real-life examples, we'll unveil the hidden biases that permeate our daily lives and explore how ageism intersects with other forms of discrimination.

With a forward-looking perspective, the presentation navigates through practical steps to dismantle ageist beliefs and practices. It discusses the role of education, media, and policy in challenging ageist stereotypes and fostering a climate of acceptance. Participants will gain insights into the power of intergenerational collaboration, discovering how bridging generational gaps can lead to innovative solutions and emphasizing the vital contributions of every age group.

Throughout the session, we will also delve into self-reflection exercises that empower individuals to recognize and combat their own age biases. From the workplace to community advocacy, we will explore actionable strategies to promote age diversity.

Building a Strategic Partnership: Turning Workforce Challenges Into Student Opportunities

Best Practices Presentation

Ms. MaryLea Boatwright Quinn¹, Dr. Pamela Elfenbein²

1. Division of Aging Services, Georgia Department of Human Services, 2. University of North Georgia

The University of North Georgia's Institute for Healthy Aging (IHA) and the Georgia Department of Human Services, Division of Aging Services (DAS), have partnered to address critical workforce needs in the program areas of Elder Abuse, Neglect and Exploitation and Public Guardianship. Working together they have aligned requirements a new University System of Georgia degree, the Nexus degree, with the educational and experiential requirements of employment in these DAS program areas. The University System of Georgia's Nexus Degree, a new academic credential and the first new degree program in the United States since the 1890s when the associate's degree was added, was designed to help more Georgians access careers in high demand areas. Creation of this degree is in direct response to talent demand analysis with employers in high demand career areas. The Division of Aging Services faces many challenges that hamper finding and retaining the right workers for the difficult but rewarding roles in Adult Protective Services and Public Guardianship. This presentation will outline the DAS needs and UNG academic program, and how working together to meet the needs of at-risk elders, a direct pipeline to employment has been developed. This presentation will discuss and provide insight into this unique collaboration and newly created training approach.

Building community engagement through Advisory Boards for Inclusive research

Professional Paper Presentation

Dr. Ishan Williams¹, Dr. Travonia Brown-Hughes², Dr. Randy Jones¹

1. University of Virginia, 2. NC A&T State University

Approximately 40% of the U.S. population is a member of an underrepresented racial and ethnic groups, with African American or Black being 13.6% and Hispanic/Latino being 18.9%. However, less than 5% of underrepresented people participate in clinical trials. Community Advisory Boards (CAB) have become a key component to conducting culturally relevant and effective clinical and community-based research. Maintaining the voice of the community is crucial. The research aims to demonstrate the importance of community engagement in building an effective CAB that is responsive to the needs of those underrepresented in AD research. A brief survey was conducted, after a 2-year term, to elicit CAB members perspectives related to 1) their impact, 2) the most effective work completed, 3) most challenging, and 4) future goals. All members (N=8) completed an anonymous Qualtrics post-survey. Thematic and content analysis were used to identify relevant themes. Survey results suggest that the CAB made an impact. Key themes identified included the CAB's ability to raise awareness around ADRD, build strong connections within the group, and build academic and community partnerships. The challenges emphasized focused on how best to affect institutional change while maintaining strong community presence and engagement. Our findings suggest that a CAB can inform researchers/clinicians on how best to prioritize the voice of the caregiver and the person living with dementia in clinical and behavioral research. An effective and diverse CAB can be activated to build more sustainable and empowering relationships with communities who are underrepresented in clinical and behavioral research.

Buying into the Dirty Joke: A Discourse Analysis on the Use of Editorial Cartoons About Older Adults and Sex

Student Paper Presentation

Ms. Taylor Pope¹, Dr. Wendy Simonds¹

1. Georgia State University

This paper focuses on understanding how single-frame editorial cartoon images depicting older adults and sex are used online. Cartoons draw upon social stereotypes and reflect societal attitudes toward aging. The importance of sexuality across the lifespan is evident; however, ageist stigma is often directed at sexual activity in older adulthood. This study explores the use of single-frame editorial cartoons to further social, political, and capitalistic agendas. The location of these editorial cartoons on the internet indicates how the sexuality of older adults is used as a digital marketing strategy. We use the Google Lens search engine to conduct reverse image lookups (RIL) of cartoons to see where they are being published online. (These cartoons were initially collected for a paper titled, “‘Shout Dirty to Me’: A Discourse Analysis of Single-Cel Cartoons about Menopause, Erectile Dysfunction, and Old People Having Sex” [Simonds and Pope, in progress]). We use grounded theory to explore the use of pervasive stereotypes in editorial cartoons and the interesting juxtapositions we discovered with RILs. We explore the social and commercial implications of cartoon use on the sexuality of older adults. This study will contribute to the discourse surrounding age-targeted advertising and fill in the gaps around the use of age-related sexual stereotypes in mass media.

Carework Network Spotlight Session: Expanding Dementia Capability Across Health Care Settings

Panel Symposium

***Dr. Alexis Bender*¹, *Dr. Annie Rhodes*², *Dr. Cindy Cain*³, *Dr. Jennifer Craft Morgan*⁴**

1. Emory University, 2. Virginia Commonwealth University, 3. University of Alabama at Birmingham, 4. Georgia State University

As the prevalence of people living with dementia in the community continues to grow, we need increased dementia capability among workers across health care settings. This panel brings together four papers that examine this issue across setting and among stakeholders. The titles of the four papers are: 1) Comfort with and Knowledge of Dementia Care Among Interdisciplinary U.S. Dialysis Care Providers, 2) Informal Caregiver's Satisfaction with Dementia Primary Care in English-Speaking Populations, 3) Informal Caregiver's Satisfaction with Dementia Primary Care in Spanish-Speaking Populations and 4) Aligning Quality of Work and Quality of Care in Dementia Care Settings. Implications for outreach and education across health care settings will be discussed.

Carework Network Spotlight Session: The Direct Care Workforce Looking Backward and Moving Forward

Panel Symposium

***Dr. Christopher Kelly*¹, *Mr. Alfred Boakye*², *Mr. Ebenezer Martey*³, *Dr. Christina Barmon*⁴,
*Dr. Jennifer Craft Morgan*³, *Dr. Candace Kemp*³, *Dr. Antonius D. Skipper*³, *Mr. Jerome Deichert*⁵**

1. University of Nebraska Omaha, 2. University of Maryland, Baltimore and Baltimore County, 3. Georgia State University, 4. Central Connecticut State University, 5. University of Nebraska at Omaha

The direct care workforce has experienced low job quality (e.g. low wages, few benefits, heavy workloads), high turnover and long-term care employers continue to experience workforce shortages. The COVID 19 pandemic exacerbated many of the persistent issues for this workforce and, in many ways, made life more difficult for many older adults, particularly those in residential care. This panel symposium brings together four papers that examine these issues in greater depth and propose solutions. The titles of the four papers are as follows: 1) A Profile of the Direct Care Workforce: Before and After COVID 19, 2) Coping Strategies and Building Resilience: Using a Trauma-Informed Approach to Supporting Direct Care Workers, 3) Combatting Social Isolation Among Residents in Long-Term Care: The Role of the Direct Care Worker and 4) Scaffolding Direct Care Worker Skill Development to Support Quality Care and Quality of Life. Implications for research, policy, practice and dissemination will be described by the discussant.

Cerebrovascular Events Among Type II Diabetic Older Adults: A Systematic Review

Student Poster Presentation

Mr. Matthew Dear¹, Mr. Kameron Kishaba¹, Dr. TimMarie Williams¹

1. University of the Incarnate Word School of Osteopathic Medicine

Type II Diabetes Mellitus is a disease that affects 1 in 10 Americans and is very common in the geriatric population. This condition has severe complications including the risk of cardiovascular disease, such as myocardial infarction and stroke. There are multiple medications that are available to treat Type II Diabetes, with two of the oldest being metformin and a class of drugs called sulfonylureas. A systemic review was performed using PubMed and CINAHL evaluating how metformin and sulfonylureas compare in preventing stroke in patients 65 years or older after diagnosis with Type II Diabetes. Of the 121 articles found between the two databases using this search criteria, 3 articles were removed as duplicates. 85 articles were excluded after title and abstract review did not meet inclusion criteria. Another 20 articles were excluded following full text review. This left 13 articles that were included in the systematic review. The review showed that metformin decreases the risk of cardiovascular incidents as compared to sulfonylureas. Furthermore, it was found that sulfonylurea use is shown to increase all-cause mortality compared to metformin. Limitations of finding articles for the systematic review include limited research in the elderly population, lack of articles using metformin and sulfonylureas as monotherapy, and the lack of focus on stroke. Future research should evaluate how newer diabetic medications compare to metformin in cardiovascular risk reduction.

Characteristics of Returning Food-is-Medicine Program Participants

Student Poster Presentation

Mr. Jonathan Williams¹

1. Virginia Commonwealth University

Background: The Prescription Produce Program (PPP) is a community-based initiative designed to address health disparities among older adults in the Richmond community by leveraging the potential of diet in health promotion. Participants who were involved in the 2022 program returned for the 2023 program of the PPP, providing a unique opportunity to examine the health and behavior characteristics of returning participants.

Methods: A sample of 18 older adults who actively participated in both the 2022 program and the 2023 program of the PPP were selected for this investigation. The inclusion criteria ensure a consistent and sustained engagement with the program across both study periods. Demographic information and health measures were collected for each participant from both PPP iterations. A paired samples t-test was also conducted to determine directionality in health measures.

Results: A majority of the 18 returning PPP participants were African American (83.3%), female (77.8%), with a mean age of 70 years (SD = 8.32). The main medical diagnosis reported for joining the PPP was balanced between cardiovascular diagnoses (28.8%), weight-related diagnoses (28.8%), and diabetes diagnoses (28.8%). The paired samples t-test showed that the mean weight during 2022 enrollment ($M = 194.2$) and the end of the 2023 program ($M = 186.9$) decreased significantly ($t(17) = 2.055, p = 0.028$).

Conclusions: Returning participants of the PPP show clear trends in demographic majority and outcomes in weight loss, however participant intentions with the program varied.

Combating the Negative Narrative: Understanding and Decreasing the Impact of Ageist Stereotypes

Student Paper Presentation

***Ms. Lauren Arney*¹, *Dr. Erin Mauck*², *Dr. Jodi Southerland*¹**

1. East Tennessee State University, 2. East Tennessee State University

Ageism is one of the most common and yet underrecognized 'isms' in society. Ageist stereotypes play a powerful role in shaping how society thinks about and interacts with, older individuals, and how individuals within the stereotyped group see themselves. Stereotypes such as these increase the likelihood that ageism becomes the entrenched context in which older adults are viewed, judged, and treated. This presentation discusses the latest research on aging stereotypes using findings from three distinct age groups of participants over the age of 55. Focus groups were conducted with these three groups in which participants shared their experiences with aging and the stereotypes they have encountered. Participants also rated the aging stereotypes that had affected them and the stereotypes they felt were the most harmful, whether they had experienced them or not. The two most selected harmful stereotypes included: (1) older adults are a drain on society and contribute little to it (52%) and (2) mental and physical deterioration are inevitable in old age (45%). The two most selected stereotypes that participants experienced were (1) becoming set in their ways due to age (41%) and (2) mental and physical deterioration inevitable in old age (41%). Preliminary analyses of the focus groups suggest that aging stereotypes, discrimination, and misconceptions around aging are experienced in a variety of ways and can vary based on the age cohort of the individual.

Comfort, Care, & Companionship: Multidimensional Health Benefits of Social Robot Use in Memory Care

Student Poster Presentation

Mx. S.M. Cho¹

1. University of North Carolina at Charlotte

Socially assistive “pet” robots have increased in availability, affordability, usability, and amenability of user experiences in multiple settings. A growing body of research explores the range of functions and benefits of their application in aged care communities and inpatient clinical settings, as well as among community-dwelling older adults, promoting a demonstrated improvement of psychological well-being and social health. Phase I of this multi-stage investigation expands prior applications of social robots to their use as part of a holistic care team for persons living with dementia, employing semi-structured interviews with their care partners to collect, record, and analyze emergent narratives and additional affective responses as evoked by long-term & individual (I) and short-term group-setting (II) engagement with the small robotic Joy for All Golden Pup, “Geri.” In Phase II, a student will attend a regular luncheon at a memory care day program, where attendees will interact with and discuss their experiences with Geri. Interviews will be recorded and transcribed in full later for multimodal qualitative analysis and data consistency assurance. By coding and comparing responses with other researchers’ findings in both similar and disparate settings, this project aims to enrich and diversify the present literature on social robots’ efficacy, capacities, and perceptions in improving multidimensional health statuses of older adults, including the complementary role they can play as non-pharmaceutical interventions providing comfort, care, and companionship. This poster presents the promising results of Phase I, wherein thematic content analysis elucidated improvements in social interaction, positive affect, and self-perceived well-being for all participants.

Community-Based Group Screening for Alzheimer's: "Purple Sunday Program" Increases Clinical Trial Participation in the Black Community

Panel Symposium

Dr. Bahar Niknejad¹, Dr. Ethlyn Gibson², Dr. Hamid Okhravi¹

1. Eastern virginia Medical School, 2. Norfolk State University - School of Nursing

Clinical trial participants need to be representative of the broader population to ensure that the results can be generalized and applied to the wider population. We introduce a pilot randomized controlled clinical trial of group screening, that tackles recruitment challenges in the AHEAD Study—a multicenter Alzheimer's disease prevention trial aiming to achieve 20% recruited from underrepresented populations.

At the AHEAD site at Eastern Virginia Medical School, community informational sessions are conducted primarily in Black churches. Our current outreach program that employs a community-based participatory research strategy, in collaboration with Hampton University and community leaders, focuses on increasing Alzheimer's awareness and promotes research participation. In the first year, we participated in 35 events, mainly Purple Sundays at Black churches, reaching over 1600 potential research participants. Despite initial interest for participation, many lost interests during follow-ups, likely due to the lag time between the event and follow-up phone calls. To address this, we hypothesize that a modified process, enabling group screening in trusted community settings, can overcome barriers. This study evaluates if community-based group screening increases Black participation compared to standard individual screening.

In this session, we will explore lessons learned and challenges encountered in our ongoing outreach initiative. We will highlight the program's impact on our study and discuss how these experiences shaped the design of our new pilot study, tailored to address these challenges.

Community-Based Music Intervention: Preliminary Results and Best Practices

Professional Paper Presentation

Dr. Cassandra Germain¹

1. North Carolina A&T State University

Individuals with dementia and related cognitive disorders frequently experience behavioral and neuropsychiatric disturbances throughout the progression of the disease. Current pharmacological treatments are moderately effective and are often associated with negative side effects. Personalized music intervention has emerged as a viable alternative for ameliorating disruptive behavioral symptoms among persons with dementia and related disorders. The current project examines the feasibility and utility of implementing personalized music in adult-day programs that serve persons with dementia.

We have implemented a 4-week music intervention program in adult day centers in central North Carolina. Participants receive 20-30 minutes of one-on-one personalized music intervention twice per week for 4 consecutive weeks while in attendance at the center. Pre and post intervention assessments of well-being (CBI) and behavioral symptoms are collected from staff and caregivers.

The current paper discusses best-practices, challenges and preliminary results from the ongoing Music and Wellbeing Study community-based music intervention program. Preliminary results suggest 1) There are notable differences in rating of symptom severity and disruptiveness between caregivers and staff and 2) Staff and center directors report qualitative improvements in participants disposition and overall well-being and welcome implementation of site-based intervention programs. Additional considerations for implementation such as how to minimize staff and caregiver burden will be discussed.

Comparing Objective and Subjective Indices of Quality of Care between Medicare and Medicaid-Based Skilled Nursing Facilities: A Preliminary Qualitative Study

Student Poster Presentation

*Ms. Gracie Ellington¹, Dr. Tina Newsham¹, Dr. Elizabeth Fugate-Whitlock¹, Dr. Jean Gordon¹,
Dr. Angela Sardina¹*

1. University of North Carolina Wilmington

Skilled Nursing Facilities (SNFs) have long been scrutinized for their care quality, a situation exacerbated by the COVID-19 pandemic which highlighted severe issues such as understaffing, substandard care, and non-compliance with regulations safeguarding resident rights and welfare. Disparities in care quality between SNFs funded by Medicare/private pay and Medicaid persist. While previous research has emphasized objective measures (e.g., surveys) and stakeholder satisfaction, there's a paucity of studies investigating both objective (e.g., regulatory citations) and subjective (e.g., resident experiences) dimensions of care, particularly contrasting Medicare/private pay and Medicaid-funded SNFs. This study aims to bridge this gap by examining objective indicators of care quality and services in Medicaid versus Medicare/private pay SNFs and delving into resident perceptions of these elements within both contexts. Two SNFs in North Carolina were recruited to participate in this ongoing qualitative study. Objective data was collected from the North Carolina Department of Health and Human Services, Centers for Medicare and Medicaid Services, and site reviews (e.g., Google). An equal subsample of participants from each SNF will be recruited to participate in interviews pertaining to quality of care and services, and satisfaction. The Donabedian Model of structures, processes, and outcomes, which have been previously utilized in prior research exploring quality of care, guided the development of the interview questions. Initial results from objective (descriptive) and subjective (thematic) analyses in Medicare vs. Medicaid SNFs will be presented, with an interpretation of the findings through the lens of the Donabedian Model.

Continuing Issues in COVID-19 Research: Treatment, Vaccination and Effects

Panel Symposium

Dr. Lindsay Peterson¹, ***Dr. Nasreen Sadeq***¹, ***Ms. Natalia Babenko***¹, ***Dr. Hongdao Meng***¹, ***Ms. Linette Leng***

²

1. University of South Florida, 2. Brown University

While COVID-19 no longer poses an acute health threat to older adults, as it did in 2020-21, research continues on critical issues, such as COVID-19 vaccination rates, treatment challenges, and the pandemic's effect. Our proposed paper session will present findings from four varied research studies, all related to COVID-19. The first presents results from a 2021 survey of members of the National Senior Games. It focuses on respondents' COVID-19 vaccination status, socio-demographic characteristics, and health and functional status and discusses differences in sports participation and implications for age-related health. The second discusses the effect of pandemic-related stress, measured by the COVID-19 Pandemic-Related Stress Scale, on older adults' cognitive performance. It compares traditional and computer-based cognitive assessments. Results indicate an association between pandemic-related stress and lower performance on traditional cognitive measures (e.g. the Montreal Cognitive Assessment), but not as measured with newer computerized cognitive measures. The third study compares vaccination rates among staff of nursing homes and assisted living communities in Florida, finding differences among the settings potentially affected by policies encouraging vaccination in nursing homes before assisted living communities. The fourth study describes challenges in preventing the transmission of COVID-19 and provides recommendations for improving the mental health of health personnel in Central America and the Caribbean. It focuses on the need to provide resources to lower-income countries to improve the care of patients and to protect the well-being of overburdened healthcare providers. Overall, presenters will discuss what each study suggests concerning the response to pandemics of the future.

Conversation on Substance Use: Engaging Older Adults in the Community Setting

Best Practices Presentation

***Dr. Leland Waters*¹, *Dr. Mari Mackiewicz*¹, *Dr. Patricia Slattum*¹**

1. Virginia Commonwealth University

Substance use disorders (SUD) are highly stigmatized, often making productive conversations around SUD challenging regardless of the audience. Conversations can be a valuable way to understand different perspectives and learn from the lived experiences of people with SUD as well as loved ones and caregivers of those who suffer from this chronic disease. This presentation will explore the facilitators and barriers to engaging older adults in conversations around SUD. This presentation will discuss research results as well as lessons learned from the development, implementation, and analysis of a mixed-method study exploring perspectives on SUD from underserved, urban-dwelling older adults. The outlined study enrolled 64 low-income, urban-dwelling, older adults 50 years and older, with a history of substance use. Participants were asked to complete validated research instruments related to their lifetime history of substance use, recovery capital, SUD associated stigma and personal beliefs around SUD. Sixteen of the enrolled participants were invited to and completed semi-structured interviews to delve deeper into their views on SUD, in particular thoughts and perceptions related to SUD treatment and recovery. Our findings will be framed and presented within the context of age-related health and wellness and the evidenced based interventions outlined by Substance Abuse and Mental Health Services Administration's Tip 26.

Courage to Care; Perspectives of Home Health Nurses and Social Workers on Elder Abuse

Professional Paper Presentation

Dr. Meredith Troutman-Jordan¹, Dr. Boyd Davis¹, Dr. Lufei Young¹

1. UNC Charlotte

In phase one of a mixed-methods instrument development study, we conducted eight focus groups exploring home health nurses' and social workers' knowledge, experience, and confidence identifying signs of elder abuse. We transcribed recordings verbatim and conducted content analysis of transcripts. There were eight focus groups with a total 42 participants. An overwhelming majority of participants appeared to be foreign-born caregivers, as suggested by diverse accents, language and communication styles. Participants identified lack of basic needs being met and behavioral indicators that alerted them to potential abuse. An overarching theme was that of duty to the patient, sense of obligation and advocacy. Participants recognized neglect, most often attributing this to caregiver knowledge deficit and burnout. Despite their fervent emphases on advocacy and care, there was also a clear sense of hierarchy. Reporting to "superiors" and deference to authority figures were frequently referenced. An unanticipated finding was fear and trepidation; few participants would turn on their cameras or reveal the state where they were located. Feeling alone, wishing for support and resources were repeatedly identified as being needed by home health nurses and social workers. These findings will next inform development of an elder abuse reporting (EAR) questionnaire. We will validate the EAR and then examine correlations in factors related to EAR between nurses and social workers. We will examine moderating effects of healthcare professionals' socio-demographic factors on EAR. Our long-term goal is development of online resources and support for nurses/social workers, informed by this data.

COVID-19 Statuses of Long-Term Care Facility Residents with Dementia: Hospitalization Outcomes

Student Paper Presentation

***Mr. Cheng Yin*¹, *Prof. Elias Mpofu*¹, *Prof. Kaye Brock*¹, *Prof. Stan Ingman*¹**

1. University of North Texas

Background: COVID-19 and mortality have been associated with factors residence status, of which nursing homes and similar long-term care facilities carried the major burden. This study aims to identify how long-term care facility residents with dementia varied by hospitalization COVID-19 Infection status outcomes of emergency admission and length of stay over the pandemic. *Method:* This retrospective cohort study utilized the Texas Inpatient Public Use Data File (PUDF). This study included 3,108 patients aged over 60 years who were admitted to hospitals from long-term care facilities in Texas due to COVID-19 infection from January 2020 to October 2022. Potential risk factors included dementia status, patient demographics, health insurance, lifestyle and health conditions. Binary logistic regression was used to identify risks for emergency admission and length of stay in hospital adjusting for patient demographics, insurance type, and lifestyle. *Results:* dementia was an independent factor significantly associated with both emergency admission and length of stay. Being African American, Medicare Health Management Organization, type 2 diabetes and chronic kidney disease were found to increase the likelihood of emergency admission. Aged over 75 years, malnutrition, obesity and other neurological disorders (were found to be associated with hospital stay over 5 days. *Discussion and Conclusion:* Findings highlighted the relationship between long-term care facility residents with dementia and their emergency admission and length of stay related to COVID-19 infection over the pandemic. It indicates the importance of preparedness strategies to mitigate the impact of COVID-19 on this vulnerable population.

COVID-19 vaccine hesitancy and messaging among at-risk adults in the rural south

Professional Paper Presentation

Dr. Abby Schwartz¹, Dr. Alice Richman¹

1. East Carolina University

The impact of COVID-19 continues to highlight deleterious health inequities in the U.S., particularly among Black, Indigenous and People of Color (BIPOC), in addition to disparities by region and age. Rural adults remain disproportionately impacted by COVID-19. In the present study, four focus groups (N=40) were conducted in rural eastern North Carolina as part of a larger mixed methods study. The goal of the focus groups was to collect information regarding vaccine hesitancy and develop community accepted vaccination messages. Participants had a mean age of 57.1 (SD=11.8), and 88% identified as BIPOC. Focus group discussions included four areas: 1) Perceptions of COVID-19 vaccines (such as reasons to trust or mistrust), 2) Discussion of COVID-19 messages provided by the research team with message clarity and ideas for improvement solicited, 3) Free writes or stating aloud specific messages participants believed would encourage others to get vaccinated (such as use of the words “God” and “choice” in messages), and 4) Discussion on the format of message delivery (e.g., radio) and the best individuals to provide this information (e.g., pastors). Key themes alluded to above in each of these areas will be discussed including five COVID-19 vaccine messages developed by participants based on their feedback and free writing. Implications concerning the need to increase vaccine confidence and perceptions among at-risk populations, and the importance of working directly with community members for larger vaccine campaigns will be discussed. Applicability to other vaccines targeting adults as we age in addition to COVID-19 will also be discussed.

Creating Virtual Intergenerational Service-Learning Opportunities through the Arts

Technique or Tool Demonstration Workshop

Ms. Meghan Young¹

1. Miami University

Since 2007, Scripps Gerontology Center's Opening Minds through Art (OMA) program has transformed intergenerational visual art programming for people living with dementia by inviting college students to partner 1:1 with an older adult for weekly art-making sessions. Traditionally an in-person program, OMA created virtual opportunities to connect younger and older generations and combat social isolation during the COVID-19 pandemic. Research comparing in-person and virtual programming showed students' attitudes toward people living with dementia improved to a similar degree, suggesting quality virtual programs can achieve similar service-learning outcomes for students. After 3 years of virtual OMA success, ScrippsAVID (Arts-based, Virtual, Intergenerational, Dementia-friendly), a FREE video-chat platform, was developed to connect older adults, including people living with dementia, with younger adults to discuss and co-create art, music, poetry, and share stories. Over 75 prompts are provided to engage older and younger participants to ask questions and share stories based on their own experiences. The one-of-a-kind technical design of ScrippsAVID supports interpersonal connections so participants can chat with their partner and navigate the prompts with ease. The program addresses older adults' needs for social and creative engagement while providing younger adults opportunities to develop communication skills and build relationships with older adults, with and without dementia, outside their families. The presentation will include a showcase of ScrippsAVID, preliminary research findings from two semesters of pilot data, quotes from participants, an example activity, and Q&A.

Creativity and Aging: A Look at the Issues and a Proposal for a Comprehensive Model for Future Research and Practice

Professional Paper Presentation

Dr. Carolyn Adams-Price¹, Dr. Linda Morse¹

1. Mississippi State University

Ongoing creative activities may have psychological benefits for older people, but the potential for creativity in later life is poorly understood. Over the past 80 years of research on creativity, many theories have suggested how product and processes occur in general, but little consideration has been given to factors that foster interest and talent in creativity among older people. Some recent research has examined the impact of creativity across the lifespan, particularly in identity and also in the benefits of serious hobbies for older individuals.

Part of the difficulty with this area is the lack of a model incorporating life-span and environmental issues surrounding older individuals who engage in creative activities. Additionally, few models describe the role of culture and context in everyday creativity. This paper will examine the issues and research areas that are critical to understanding creativity across the lifespan. These include (a) definitions of what creativity is, (b) how affordances and opportunities are critical to creativity, (c) how culture values, or devalues various activities, as a function of context, (D) the role creativity may play across the lifespan, and (e) how creativity is a cognitive, problem-solving behavior, which can occur at any point in life. We propose a new model which addresses both the current inadequacies in the research on creativity and aging and provides a comprehensive look at what this means for older individuals of different backgrounds and functional ability. Suggestions for enhancing creativity and well-being will be included in this presentation.

Dementia and Death in Georgia: Changes over time

Professional Paper Presentation

***Dr. Adrienne Cohen*¹, *Dr. Miranda Moore*²**

1. Georgia Southern University, 2. Emory University

We conducted a retrospective observational study of all Georgia residents who died from 2010 to 2019. Using Georgia death certificates, we analyzed each individual's immediate cause of death to determine patterns of placement of dementia illness in death in Georgia. The death certificate allowed multiple causes of death. Primary and secondary causes were investigated. We calculated the percentage of deaths that listed Alzheimer's disease and related dementias (ADRD, including Parkinson's) in any of the immediate causes of the death fields. Additionally, we adjusted the data to obtain age-adjusted ADRD deaths per 100,000 individuals in each age group, using 5-year age brackets. Of the 100,731 death certificates analyzed between 2010 and 2019, 36,369 had ADRD cited as primary cause of death. Of those, the majority were aged 80 and over (77%), white (n=29,547), and obtained only a high school degree or GED (40%). The age-adjusted death rate with ADRD as a primary cause increased from 31.7 deaths per 100,000 in 2010 to 45.3 in 2019, and from 29.5 deaths in 2010 to 26.6 in 2019 for ADRD as a secondary cause. In 2010, the age-adjusted rate of death when ADRD was the primary cause of death was 27.3 in rural counties of GA versus 33 for urban counties (46.5 and 45.0 in 2019).

Developing and Delivering a Caregiver Support Mentoring Program

Panel Symposium

Dr. Matthew Peterson¹, ***Dr. Tina Newsham***¹, ***Ms. Tess Ryan***¹, ***Ms. Abrielle Leblanc***¹, ***Ms. Logan Elkins***¹

1. University of North Carolina Wilmington

Integrating community engagement in academic curriculum is a cornerstone of virtually all higher education institutions' missions. This symposium will detail the steps taken over the last two years to purposefully plan, deliver, and execute a community-engaged research program focused on aging issues in the Wilmington community. Most recently a design challenge event focused on caregiver support challenges was co-hosted on campus at the University of North Carolina Wilmington with community partners and members and student participants. Borne from this event was a caregiver support mentorship program concept that was moved forward and fully developed in a graduate level gerontology course. Panelists will include students, community partners, and faculty who will focus on 1) a general overview of the community engaged work as part of a larger research program, 2) planning and participating in a community engagement event from a student's perspective, 3) how the caregiver support mentor program moved from concept to action, 4) caregiver support program development from a student's perspective, and 5) event and program development from a community partner's perspective. Panelists will provide attendees with diverse perspectives on engaging students and community members together with academic partners to tackle important aging-related issues. We will highlight the curricular opportunities within community-engaged work, particularly as it relates to student and community member partnerships.

Digging in the Dirt: The Deeper Roots of Gardening and Supportive Programs

Technique or Tool Demonstration Workshop

**Dr. Lee Ann Ferguson¹, Dr. Laura Allen¹, Mrs. Karen Appert², Dr. LaVona Traywick³,
Dr. Graham Rowles⁴, Mrs. Yun-Zih Chen¹**

1. UMBC Erickson School of Aging Studies, 2. NC Division of Aging and Adult Services, 3. Arkansas College of Health Education, 4. University of Kentucky

As individuals age, engaging in gardening activities has emerged as a multifaceted approach to promoting overall well-being. However, the importance of “being in the dirt” is too often trivialized or minimized rather than being fully recognized for its many values. Studies have shown that gardening activities contribute to increased health benefits among older adults, and the stress-reducing effects of gardening and the connection to nature have been linked to improved mental health, including a decrease in symptoms of anxiety and depression. Beyond physical and mental health benefits, gardening fosters improved intergenerational social connections. Shared community gardens provide opportunities for social interaction, fostering a sense of belonging, and mutual support. Additionally, the exchange of knowledge and experiences within gardening communities creates a supportive environment that positively impacts mental and emotional well-being. This workshop will explore how a wide range of gardening activities may provide a holistic approach to enhance health and well-being. We will discuss programs including the Cooperative Extension Service Programs (i.e., Master Gardener Programs) and the Seniors Farmers’ Market Nutrition Program (SFMNP) which value horticultural activities (both flower and produce gardening) and seniors’ access to fresh produce. In addition, this workshop will guide participants to learn easily implemented universal design and adaptive gardening strategies and techniques applicable to all ages. The overall intent is to elevate the level of discourse on horticulture as a non-medical approach to enriching the lives of older adults.

Disaster Preparedness: Strategies to Enhance Readiness Among Older Adults

Best Practices Presentation

***Dr. Lee Ann Ferguson*¹, *Mr. Andrew Ferguson*²**

1. UMBC Erickson School of Aging Studies, 2. FEMA Community Emergency Response Team

The recent publication of the 2023 National Household Survey on Disaster Preparedness has reaffirmed the continuing trend of persistent lag in disaster preparedness among older adults (60+), revealing less disaster-readiness when compared to other age groups. This discrepancy poses significant risks to the well-being of older adults, as inadequate disaster preparedness can amplify vulnerabilities and hinder timely response both before, during, and after disaster events.

This presentation will delve into the key findings of the survey, highlighting the specific challenges faced by older adults in achieving optimal disaster preparedness. These challenges include contributing factors such as limited exposure to best practices for preparedness, mobility limitations, economic disparities, medical complexities, and social isolation. These compounding influences demand that our efforts to enhance preparedness be built utilizing comprehensive, multifaceted approaches and through strategic community partnerships.

The session will explore best practices drawn from successful existing interventions and programs aimed at improving disaster preparedness among older adults. These may include community-based initiatives, educational campaigns, and technology-driven solutions that empower older individuals to access or create comprehensive disaster preparedness plans. Insights from these best practices aim to inform policymakers, emergency responders, and community leaders and aims to foster collaboration for the implementation of sustainable strategies to improve disaster preparedness among older adults. By addressing the specific challenges faced by this demographic, we can build resilient communities that ensure the safety and well-being of our aging population during times of crisis.

Empowered Inclusivity: Wellness-Centered Allyship for Older Adults

Best Practices Presentation

Dr. Sara W. Bailey¹, Prof. Colby M Takacs¹

1. University of Lynchburg

By 2030 in the US, LGBTQIA+ adults 50 and older will number 7 million, but in contrast to the focus on allyship training on college campuses, older adults may not be exposed to such training, putting the wellness of older LGBTQIA+ adults in jeopardy. Framed within the Wheel of Wellness and informed by their collective experience leading Safe Space Ally Trainings on their university's campus, the presenters will offer effective strategies for cultivating allyship, bridging generational gaps, and creating environments that prioritize the holistic well-being of LGBTQIA+ older adults. Be part of the conversation as we uncover the keys to building affirming spaces and nurturing understanding within our diverse communities.

Evaluating the Impact of a Multidisciplinary Cognitive Support Clinic on the Quality of Life of Caregivers of People with Dementia

Professional Poster Presentation

Dr. David Hage¹

1. Misericordia University

The U.S. currently faces a rapidly aging population. There is a known connection between chronological age and the diagnosis of dementia. Dementia is linked to an increased need for dependent caregiving assistance. Challenges associated with caregiving introduce threats to caregiver quality of life. This research study aimed to evaluate the impact of a multidisciplinary cognitive support clinic on quality of life among caregivers of people with dementia. A quantitative pre-test post-test design was employed. Data for this study were collected from newly referred caregivers of patients with a dementia diagnosis to a physician-led multidisciplinary cognitive support clinic with multiple geographic locations. Subdomain and composite scores were not found to be statistically significant. However, the multidisciplinary cognitive support clinic intervention was found to positively directionally impact the Carers of Dementia Quality of Life (C-DEMQOL) composite score, and C-DEMQOL subdomains one, two, and five. These findings indicate the possible need for further scientific inquiry into this subject matter, potential updates to the C-DEMQOL tool, and the need for interdisciplinary health practice and policy focus on the needs of caregivers of people with dementia.

Evidence-Based Pedagogical Strategies to Promote Gerontological Education and Healthcare Outcomes

Virtual Presentation (will not be live, must pre-record, will be included in Book of Abstracts and Conference Program, \$50 fee in place of conference registration)

Dr. Tracy McClinton¹

1. University of Tennessee Health Science Center

Evidence-based practice is foundational in improving patient safety and healthcare outcomes. Utilizing evidence-based pedagogical strategies including evidence-based practice (EBP) itself, is vital in educating gerontological providers. Pedagogical guidance for instructors includes active learning (student interaction and engagement), authentic assessment (meaningful application of knowledge and skills via projects), experiential learning (project planning and implementation), flipping the classroom (exposing students to online EBP competencies prior to their application and hands-on classroom experience), inclusivity/diversity, and teamwork / and collaboration. The purpose is to inform gerontological educators, providers, and clinicians on the importance of teaching and implementing evidence-based practice competencies and how it will ultimately improve patient safety, health outcomes of our aging population, and healthcare outcomes. Assigning groups of Doctor of Nursing Practice (DNP) students with topics concerning gerontological health and wellness and educating them through mastery of EBP competencies, in addition to their expertise and patient preferences proved to be an innovative pedagogy within nursing education. DNP students were taught EBP competencies through a step-by-step approach utilizing specific tools. They demonstrated their knowledge and mastery of each competency as evidenced by individual assessments given by faculty. EBP competencies included: formulating a PICOT question, searching the databases for quality evidence, critically appraising the evidence, synthesizing the literature and outcomes, implementing the project, and disseminating the findings. Utilizing evidence-based pedagogical strategies and teaching EBP competencies in gerontological education increases the confidence for providers and clinicians to provide practice-informed care while increasing patient safety, improving care for our aging population, and positively impacting healthcare outcomes.

Examining the Socio-environmental Influences of Aging Among Bonacca Cay's Island Community of Guanaja, Honduras: Results from a Focused Ethnography.

Professional Paper Presentation

Dr. Lee Ann Ferguson¹

1. UMBC Erickson School of Aging Studies

This study was designed to investigate the socio-environmental influences on the aging experience of older adults in Bonacca Cay, Guanaja, Honduras, within the context of this being a distinctive island setting. The Bonacca Cay community, characterized as a potentially independent microcosm with minimal external influence, was explored using a focused ethnographic inquiry approach guided by the Old Age Exclusion and Age Space Exclusion Frameworks. The research revealed eight distinct themes, encompassing sociocultural commonalities and geographical/spatial environmental influences, which significantly contribute to shaping the lives of the elderly living on Bonacca Cay. Through direct fieldwork, active participation on the Cay, interviews, observations, and photographic journaling, this qualitative study highlighted the impact of island-linked socio-environmental factors on the unique aging experience of individuals within this population. This presentation will share the study's findings in an effort to engage a deeper understanding of the lived realities of older adults in this specific island context, filling a gap in existing literature on the experiences of life on the Cay.

Examining Undergraduate Students' Experiences with Hands-On Gerontology Research

Student Paper Presentation

***Dr. Abigail Stephan**¹, **Ms. Vanessa Martinez**¹, **Ms. Ashley Hertzfeld**¹, **Mr. W. Bennett Davis**¹, **Mr. Daniel Moss**¹, **Ms. Julia Bonetto**¹, **Mr. Seth Lynch**¹, **Ms. Madison Pollock**¹, **Mr. Samuel Roebuck**¹, **Ms. Tatum Steele**¹, **Ms. Morgan Thomas**¹, **Ms. Mary Walton**², **Ms. Ava McVey**¹, **Ms. Kalvry Cooper**¹, **Dr. Christy Phillips**¹, **Dr. Lesley laross@clemsn.edu**¹*

1. Clemson University, 2. Furman University

As the population ages, it is essential that professionals across disciplines have experience and competence working with older adults. Though the use of experiential learning opportunities such as service learning has been extensively documented as a tool to accomplish this goal, student engagement in gerontology research, another form of experiential learning, has not been examined in detail. This participatory case study highlights the perspectives of undergraduate student researchers involved in a hands-on pilot research study that explored connections between cognitive, physical, and everyday function in midlife and older adults and tested the feasibility of a mobile app for early detection of cognitive decline. As participants, students (N=11) responded to an online survey with both closed- and open-ended items about their experience and participated in one of four semi-structured focus group discussions. As researchers, students and faculty coded survey and focus group responses. This presentation will share our findings, which center around aspects of the experience that worked well (e.g., working with other students, feeling comfortable with material and process) and aspects of the experience that could be improved (e.g., streamlining technical processes, additional training opportunities). Student researchers will also share what they gained from their experience (e.g., leadership and communication skills, lessons to apply in future career). Although these findings reflect student perspectives in one case, they can be used as a guide to support future endeavors by faculty and staff who want to include undergraduate students in their research and by students who want to become involved in research.

Exploring Childhood Adverse Experiences as Precursor to Intimate Partner Abuse in Older Adults

Student Poster Presentation

Dr. Chivon Mingo¹, Ms. Constance Cromartie¹, Mx. Subashri Garimalla¹

1. Georgia State University

Adverse Childhood Experiences (ACEs), encompassing trauma and chronic stress such as abuse, neglect, and household dysfunction, have been identified as significant precursors to various adult health concerns, including Intimate Partner Violence (IPV). IPV (characterized by physical, sexual, and psychological aggression and stalking in romantic relationships) disproportionately impacts women and is often a continuation of abuse in childhood. This review investigates the long-term impact of ACEs on IPV in older adulthood, considering factors like cultural beliefs, economic status, and attachment traits.

A review was conducted, focusing on peer-reviewed studies linking ACEs with later-life IPV, the psychological and physical impacts of these experiences, and the factors influencing the persistence of IPV in older adults.

Research indicates a strong correlation between ACEs and increased risks of IPV in later life, with older adults experiencing compounded effects of complex trauma or complex posttraumatic stress disorder (CPTSD). Moreover, factors influencing the continuation of IPV in older adulthood include insecure adult attachment, economic constraints, and cultural norms.

This review underscores the critical need for increased education and support for IPV victims, and further research focusing on IPV victims among older adults is warranted. It is evident there is a need to consider childhood experiences in understanding and addressing IPV among older adults, emphasizing the urgent need for targeted interventions and policy changes to mitigate long-standing impacts. Moreover, it suggests that early intervention for individuals who have experienced childhood abuse could also be a plausible pathway to mitigating this psychological and public health issue among older adults.

Exploring the Benefits of Creative Art Therapies in Enhancing Well-being Among LGBTQ+ Older Adults: Insights from a Scoping Review

Student Poster Presentation

Ms. Scarlett A Peterson¹, Mr. Zach Salling¹, Dr. Chivon Mingo¹

1. Georgia State University

This literature review evaluates the efficacy of creative writing therapy, a subset of creative arts therapies, in improving the well-being of LGBTQ+ older adults, who face unique challenges such as social isolation, healthcare discrimination, and inadequate culturally competent care. Addressing these disparities is crucial for enhancing healthcare practices for this marginalized group.

The methodology involved a thorough search of EbscoHost and PubMed databases, focusing on studies published after 2000 that met specific inclusion criteria. This ensured a comprehensive analysis of relevant literature.

The analysis reveals that creative arts therapies positively influence the emotional, social, and psychological health of older adults. Notably, LGBTQ+ older adults benefit from these therapies by processing adverse experiences, building community ties, and engaging in queer generativity, although evidence regarding their impact on cognitive decline is scarce.

In conclusion, the findings underscore the importance of further research to clarify the role of creative arts therapies in the lives of LGBTQ+ older adults and to address the health disparities they face. This review highlights a general trend in current research and emphasizes the potential of future studies, policies, and therapeutic practices to improve the quality of life for LGBTQ+ older adults in various care settings. Further investigation is needed to fully understand the impact of these therapies.

Exploring the Determinants of Positive and Negative Marital Quality among Older Hispanic Adults 51+ Living in the United States

Student Paper Presentation

***Ms. Jaminette Nazario*¹, *Dr. Takashi Yamashita*¹, *Dr. Jennifer Roebuck Bulanda*², *Dr. J. Scott Brown*²**

1. University of Maryland, Baltimore County, 2. Miami University

Marriage is an integral part of Hispanic culture and is linked with the well-being of Hispanic older adults in the United States. However, relatively little is known about the determinants of multidimensional marital quality for older adults in general and those of Hispanic older adults in particular. Hispanic older adults tend to under-utilize healthcare services and experience lower acculturation to the mainstream U.S. culture than other racial and ethnic minorities. In addition, nearly one in three Hispanic older adults are immigrants, and their extended kin network may still be in their countries of origin. Hence, older Hispanic adults may rely more on their marital relationships for social and instrumental support than their counterparts. This study draws upon socioemotional selectivity theory, which depicts an increasing focus on narrower and more emotionally meaningful relationships in later life. The study analyzed the data of the nationally representative samples of older Hispanic adults aged 51 years and older ($n = 1,012$) in the 2016-2018 U.S. Health and Retirement Study (HRS). The results from the linear regression indicated that Mexicans ($b = 0.15, p < 0.05$) reported higher positive marital quality than other Hispanics. In addition, there was a statistically significant negative association between religion ($b = -0.21, p < 0.05$) and positive marital quality. Moreover, depressive symptoms ($b = 0.05, p < 0.05$) were associated with greater negative marital quality. The findings about the marital quality determinants help develop culturally sensitive (e.g., multi-language) public health interventions for Hispanic older adults in the United States.

Factors associated with completing preventive screening visits in Georgia: Medicare Initial Preventive Physical Examination and subsequent Annual Wellness Visit

Professional Paper Presentation

***Dr. Miranda Moore*¹, *Ms. Allison Griswold*¹, *Ms. Joanna Jungerman*¹, *Dr. Molly Perkins*¹, *Dr. Alexis Bender*¹**

1. Emory University

Early detection of Alzheimer's and other related dementia diseases could improve health outcomes and lower the heavy financial and caregiver burden on the US health care system and families. This study investigates, in the State of Georgia (GA), the percentage of Medicare fee-for-service beneficiaries eligible for an Initial Preventive Physical Examination (IPPE) in 2019 who (1) received their IPPE in their first 12-months of eligibility and (2) received a subsequent Annual Wellness Visit (AWV) in 2020-2021. Data collected from 2019-2021 Medicare fee-for-service outpatient visit claims were used in this analysis. The Healthcare Common Procedure Coding System (HCPCS) codes were used to determine who received an IPPE. We conducted logistical regression analysis of subsequent AWV visits controlling for beneficiary race, gender and IPPE completion. We found 5.7% of eligible GA beneficiaries received their IPPE in 2019, 20.9% received a subsequent AWV in 2020-2021, and those beneficiaries who had completed an IPPE had odds of receiving an AWV in 2020-2021 that was 2.7% higher than those who did not receive an IPPE (Odds ratio: 1.027, 95% Confidence Interval: 0.964,1.095). There is a low average statewide penetration rate of IPPEs in 2019, and patient demographic variables and IPPE explained little of the variation in beneficiary subsequent AWV completion rates. Further research is needed to determine which other factors are most associated with AWV completion.

Factors Associated with Sense of Community Among Older Adults Aging in Place in Northeast Tennessee: A Cross-Sectional Study

Student Poster Presentation

Mr. Tejan Mansaray¹, Dr. Erin Mauck¹, Dr. Shimin Zheng¹, Dr. Jodi Southerland¹

1. East Tennessee State University

Background: A vibrant community encourages healthy lifestyles. Belonging to a community reduces social isolation, especially among older adults. Communities provide emotional and practical support for aging well.

Objectives: The aim of the study was to examine factors associated with a sense of community (SOC) among older adults aging in place in Northeast Tennessee.

Methods: The survey was administered to 82 older adults living in senior apartment complexes in Northeast Tennessee from February to March 2023. The evaluation of SOC utilized the 8-item Brief Sense of Community Scale. Low SOC was defined as a score of 24 or less. We used logistic regression analysis to identify predictors of SOC.

Results: Nearly one in six (15.85%) experienced a very low or moderately low SOC. Not having a caregiver quadrupled the odds of reporting a low SOC compared to individuals with a caregiver (AOR=4.41; 90% CI: 1.05-18.52, p=0.09). Similarly, experiencing barriers to aging-in-place increased the odds of low SOC compared to without barriers (AOR=6.63; 90% CI: 1.57-27.97, p=0.03). Older adults who had a low leisure time activities score and who rated their community livability as fair to poor were also more likely to report a low SOC (AOR=16.99, 90% CI: 3.20-90.20, p=0.005; AOR=16.67, 90% CI: 3.43-81.52, p=0.003, respectively).

Conclusions: These findings can be used to develop tailored strategies to promote SOC among the region's aging population. The findings should be interpreted with caution, given the small sample size and the extremely wide confidence intervals. Larger studies are needed to confirm the findings.

Factors that Influence Older Adults' Online Self-Efficacy

Professional Paper Presentation

***Dr. Amy Schuster*¹, *Dr. Shelia Cotten*¹**

1. Clemson University

Information and communication technology (ICT) use by older adults can increase their feelings of social connectedness and alleviate feelings of loneliness. Older adults' ICT use is increasing; yet some older adults still lack confidence in their ability to use ICTs. A lack of confidence may negatively affect their ICT use. To improve older adults' ability to confidently use ICTs, we need to know which factors influence online self-efficacy. Data were collected using an online survey with a representative sample of U.S. Internet users, aged 65 and older (N = 1,171). OLS regression was used to assess the association of five types of technology supports, hedonic motivation, Internet use, and social supports with online self-efficacy. Fixing the problem themselves, finding help online, enjoyment going online, time spent online, and social support were positively associated with online self-efficacy. Receiving help from family and help from friends were negatively associated with online self-efficacy. While family and friends often play a large role in helping older adults initiate use of technology, their role as a source of technology support may hinder older adults' feelings of confidence in using the technology. However, we are not able to determine a causal relationship as the data is cross-sectional. Importantly, being able to correct/fix technology issues independently is vital for older adults to feel confident in their ICT use. Interventions are needed that help train older adults to use and to resolve ICT issues, which will hopefully help enhance their online self-efficacy.

Finding the Right Note: How to Meaningfully Use Music with People Living with Dementia

Best Practices Presentation

*Mrs. Tara Jenkins*¹

1. Harmony in Dementia

Music connects us from our first moments in the womb to our last moments in life. Music stimulates most areas of the brain and neurons continue to fire until a connection is made. This is why someone living with dementia may be able to sing even if they cannot speak.

Older adults have strong emotional responses even when they are no longer verbally communicating or responding to typical methods of care. Providing people living with dementia a way to access experiences and express a range of emotions can substantially improve their quality of life.

Music can bridge the gap for those who are losing the ability to interact with the world around them in a meaningful way. This is why access to meaningful music experiences is such a beneficial and powerful tool in dementia care.

This workshop will share best practices, practical tips, and resources on how to use music with people living with dementia. Attendees will learn the benefits of music for older adults, how to set up a comfortable music listening environment, how to maximize engagement with music, and how to share in a meaningful experience with those they care for.

Gentle Caregiving

Technique or Tool Demonstration Workshop

***Dr. Deneisha Scott-Poe*¹, *Mrs. Khushbu Patel*²**

1. Converse University, 2. Virginia Tech

Roughly 53 million caregivers provide unpaid care to family members and friends in the United States and about 19% of these caregivers care for older adults (National Alliance for Caregiving & American Association for Retired Persons, 2020). This number is expected to increase over the next decade as the baby boomers reach 65 years old (Census Bureau, 2019). There is a plethora of research detailing the impacts of caregiving on family systems; the more negative impacts of caregiving have been thoroughly studied (National Alliance for Caregiving, 2020; Dooley & Hinojosa, 2004; Smith et al., 2001). One way to help caregivers and older adults navigate their caregiving relationship is through the use of gentle caregiving. Gentle caregiving borrows from the concepts of gentle parenting, which aims to raise children who are more compassionate and competent as adults (Ockwell-Smith, 2016). Gentle caregiving works to incorporate similar concepts of empathy, respect, understanding, and boundaries to mend the loss of autonomy experienced by some older adults with dementia and to help alleviate the stress that caregivers feel by allowing them to have honest conversations about their feelings and to set realistic expectations for their loved one with dementia. Gentle caregiving bridges the gap between older adults and their caregivers to create a holistic/more encompassing experience of aging for the entire family.

GSU H.O.P. E. lab combines warm calling programs to lessen social isolation, loneliness, and elevated suicidality (SILES) among the older adult community in a partially nested randomized control trial

Student Paper Presentation

Ms. Chanel Reid¹

1. Georgia State University

Introduction: The impacts of COVID-19 protocols, social messages of being disposable, the lack of socialization, and aloneness have diminished older person's mental and physical well-being and increased suicidal ideation (Sheffler et al., 2021). Twenty percent of older adults who receive home and community-based services have been found to meet clinical criteria for suicide risk (Fullen et al., 2021). When older adults believe they do not belong and are a burden to others, a desire for suicide emerges (Conwell et al., 2011 & Joiner, 2005).

Method: The Georgia State University H.O.P.E. lab utilized a successful model in supporting social connection by "training nontraditional groups to provide "psychological first aid" (Cook & Bickman, 1990). Older adult participants are stratified and randomly assigned to 1 of 3 conditions: (a) "BE" (**B**elongingness and **E**mpathy) condition in which they receive treatment from trained caregivers (b) the BE WITH (**B**elonging and **E**mpathy, **W**ith **I**ntentional **T**argeted **H**elping) condition, in which they receive treatment from caregivers trained in BE as well as in LivingWorks Applied Suicide Intervention Skills (ASIST) training, or (c) a control group (no treatment). Data were collected from 600 older adults five times (baseline, every 2 weeks during the 8-week treatment).

Results:

Growth modeling results revealed the mental health of those receiving treatment in BE condition significantly improved, those receiving treatment in BE WITH improved with higher effect sizes when compared to those not receiving treatment.

Discussion:

BE and ASIST training would be an asset to the National Council on Aging Evidence-Based Registry (NCOA).

Health and Wellness Contributors to Cognitive Health

Professional Paper Presentation

Dr. Cynthia Williams¹, Dr. Corinne Labyak², Dr. Andrea Arikawa², Ms. Anna Waterman², Ms. Paige Courtier², Ms. Addison Buck², Dr. Wanyun Chou¹, Dr. Shalini Jain³, Dr. Hariom Yadav³

1. University of Central Florida, 2. University of North Florida, 3. University of South Florida

Background: The purpose of this study is to examine demographic and lifestyle attributes that contribute to decrease cognition.

Methods: Prospective study using convenience sampling was employed for patient meeting the inclusion criteria; study period April 2022 to November 2023. Data collection included demographics, family, medical and health behavior history, anthropometrics, and the Montreal Cognitive Assessment (MoCA). Regression were performed to examine study objectives. Normal and decreased cognition was defined as MoCA \geq 26 and <26, respectively.

Results: Cognitive impairment (MoCA<26) was identified in 83 patients (30.6%); they were more likely to be older (average age was 74), and female (56%)(p<0.05). In univariate regression, MoCA<26 was associated with increased age (OR=1.06, 95% CI=1.02-1.09, p=0.001). After adjustment by multivariate regression, MoCA<26 was associated with increased age (OR=1.09, 95% CI=1.03-1.15, p<0.001), increased waist circumference (OR=1.08, 95% CI=1.02-1.14, p=0.007), and with decreased hip circumference (OR=0.93, 95% CI=0.89-0.98, p=0.009), and diagnosed with heart failure (OR=0.04, 95% CI=0.001-0.63, p=0.023), while not significant for diabetes mellitus (OR=3.70, 95% CI=0.80-17.08, p=0.093). Education, physical activity, and economic status were not significant (p>0.05) contributors to cognitive status.

Discussion: Modifiable risk factors such as waist and hip circumference and heart failure could contribute to decreased cognition; however diabetes was not significant. Particular attention should be paid toward females mitigate modifiable risk factors.

Conclusion: To mitigate decreased cognition among older adults, it is imperative that healthcare professionals support healthy lifestyle habits. By enacting early intervention, professionals can decrease the burden of cognitive impairment in our aging society.

Health, aging, and dying among older African immigrants: Challenges and possible solutions.

Professional Paper Presentation

Dr. Ami Moore¹

1. University of North Texas

Older immigrant population in the United States is significantly growing. Aging immigrants are confronted with new realities as retirement is nearing and some health challenges are creeping up on them. Some may have been thinking about retirement and where to reside post-retirement and may have been planning for old age. However, others may not seriously plan for retirement, health challenges, what to do post-retirement, and/or planning for death and dying.

This study uses a phenomenological approach to examine the aging process of 30 Black African immigrants aged at least 50 years in the US, with an emphasis on health-related challenges, retirement and planning for death and dying. It also uses the Schlossberg's transition theory to understand how African immigrants have fared with aging and health challenges in the US, a country with record numbers of chronic disease prevalence.

In-depth interviews show that most of the participants reported at least one chronic health condition and were not financially prepared for retirement. They will be depending mainly on Social Security in their retirement. Consequently, most of the participants will return to their home countries to take advantage of the lower costs of living. They have not been planning for their death either as most did not have a living will. While participants agree that it's important to prepare for one's death, ironically, most did not want to entertain the thought of dying. Few recommendations are made to different stakeholders such as the immigrants and families, employers, and people who work with immigrants.

Healthcare Utilization in Older Adults with Cognitive Impairment: Exploring Disparities Across Sociodemographic Identities

Professional Paper Presentation

***Dr. Zahra Rahemi**¹, **Dr. Swann Adams**²*

1. Clemson University, 2. University of South Carolina

As life expectancy rises, cognitive impairments pose a significant public health concern. Socioeconomically disadvantaged groups face increased vulnerability due to elevated rates of underlying conditions and cognitive impairments. The progression of cognitive impairments presents challenges, such as increased healthcare costs, for patients, families, and healthcare systems. Our purpose was to examine the relationships between sociodemographic variables and healthcare utilization in older adults with cognitive impairment. The Health and Retirement Study (HRS), Rand data (2014), were used to understand predictors of healthcare utilization, including hospital stay, nursing home, home care, and number of doctor's visits. Of the 3,924 older adults from the HRS sample, 22% had a diagnosis of dementia, and 78% had impaired cognition. Hispanics and those with lower education and younger were less likely to use long hospital stays than others. Black and Hispanic respondents, men, and married and younger respondents were less likely to stay long in nursing homes. Black and younger respondents were less likely to have long home care utilization. Black and Hispanics respondents, rural residents, men, those with lower education, and younger had fewer doctor's visits. Race, ethnicity, and education were consistent predictors across utilization types. This study provides evidence of the need to understand how older adults with cognitive impairments and multiple marginalized identities (i.e., age, gender, race, ethnicity) can access and use healthcare. This study is important to provide the groundwork for further studies to explore the intersectionality of healthcare utilization disparities and socioeconomic status in patients with cognitive impairments.

Hearing Loss and Cognitive Decline and Dementia: What We Know and Where We Need to Go: Literature Review

Student Poster Presentation

Mr. Girish Hemrajani¹, Dr. Jennifer Craft Morgan²

1. MA Student of Gerontology Institute at Georgia State University, 2. Georgia State University

Hearing loss is the third most common health condition in older age. Hearing loss in midlife has been estimated to account for 9% of cases of dementia, a huge – but potentially reversible – disease burden given that dementia affects 47 million people worldwide (Livingston et al., 2017). Acquired hearing loss is mostly caused by cochlear damage, while dementia is due to cortical degeneration that typically begins in the multimodal cortex. This immediately begs the question of how the two are linked. This is a crucial question from a theoretical perspective, as multiple biological and psychological pathways may link peripheral auditory function to broad-based cortical changes associated with dementia. It also has critical practical implications because while it is difficult, if not impossible, to remediate cortical degradation, hearing loss is widely treatable with hearing aids or cochlear implants. Thus, an understanding of the mechanisms linking the two could have wide-ranging public health importance. This literature review aimed to investigate whether hearing interventions were found to reduce cognitive decline in cognitively healthy older adults with hearing loss. Research has consistently reported an association between hearing loss and cognitive decline, including dementia. Data suggests that interventions like hearing aids positively affect long-term cognition and slow down the progression of cognitive decline, though more research is necessary to confirm this statement and confirm how long after using the aids will it take to record improvement. The study highlights the importance of addressing hearing loss as a preventive measure in dementia prevention strategies.

Higher Education's Role in Supporting Successful Statewide Aging Plans

Panel Symposium

Mr. Jayson Wright¹, Mrs. Amy Riedesel¹, Ms. Sarah Ekart¹, Mrs. Babs Hall¹

1. Guidehouse

With the critical planning efforts states embark on to manage the demands of an aging population, higher education's role has never been more opportunistic and critical. The newest initiative catching fire is for a state to develop a Multisector Plan for Aging (MPA). What it is and could an MPA benefit you and your state? What does it mean for your organizations specifically, but also the role of gerontology? Our presentation on this new and exciting concept in strategic planning discusses how MPAs can impact public policy, advocacy, and research in a state. You will learn about the current status of MPAs, hear updates on how these plans can address current and future challenges and support the changing landscape, including the Older Americans Act 2024 Final Rule.

By the end of the session, you will be able to effectively discuss MPAs, their impacts on multiple areas of study and some of the early successes MPAs have had in recent years.

How is your abstract related to Domain 6: Advocacy for or By Older Adults

MPAs focus on "changing the conversation" around aging through expanded stakeholder engagement into sectors not typically exposed to aging-related concepts. Through expanded exposure, knowledge, and understanding of aging, the MPA can reframe the conversation around aging. MPAs can also advocate and support initiatives that address workforce challenges, ageism, access to services, cultural changes driven by the demographic trends, and how older adults can self-advocate to create the world in which they want to live.

How do Indonesia Women Experience Guilt and Stress as Transnational Caregivers Living in Taiwan

Student Paper Presentation

Mrs. Suei DiPaola¹

1. MA Student of Gerontology Institute at Georgia State University

This study explores the experiences of guilt and emotional stress among Indonesian women who work as transnational caregivers in Taiwan. Transnational caregivers are individuals who provide care services to older adults with disabilities in a country other than their own. They can experience cultural differences, lack of support, impacts on mental health, guilt and emotional stress due to factors such as separation from families, poor working conditions, and the demanding nature of caregiving. This study uses qualitative methods and semi-structured interviews with Indonesian women who are working with caregivers in Taiwan. This study highlights the prevalence of guilt and emotional stress and identifies coping strategies to manage these challenges. The findings reveal that guilt arises from separation from families and loved ones, cultural differences that conflict with traditional family values, language barriers leading to isolation, poor working conditions characterized by long hours, low wages, potential abuse, and the emotional burden of caring for others. The study concludes that guilt and emotional stress are common experiences among Indonesian women who work as transnational caregivers in Taiwan. The study recommends that more support be provided to these women, including access to mental health services and counseling. The study also recommends that employers and the receiving government of transnational caregivers be more aware of the challenges that these women face and that they take steps to create a more supportive work environment.

Keywords: Transnational caregivers, foreign caregivers, Indonesian women, guilt, emotional stress, coping strategies.

How to Publish: Discussions with Journal of Applied Gerontology and Gerontology and Geriatric Medicine

Technique or Tool Demonstration Workshop

Dr. Debra Dobbs¹, Dr. Tamatha Arms², Mr. Jonathan Krebs³

1. University of South Florida, 2. University of North Carolina Wilmington, 3. Sage

Journal of Applied Gerontology (JAG) provides an international forum for information that has clear and immediate applicability to the health, care, and quality of life of older persons. *Gerontology and Geriatric Medicine (GGM)* is an interdisciplinary, peer-reviewed, open access journal focusing on the psychological, behavioral, social, and biological aspects of aging. Join Dr. Debra Dobbs, Editor-in-Chief of JAG and Dr. Tamatha Arms, Co-Editor of GGM as they discuss the process for getting published in these two well respected journals. Get your questions answered and get helpful tips to help you with your next submission. Jonathan Krebs from Sage will also provide helpful insights on trending topics.

Human-Animal Interaction and Meaningful Engagement among Assisted Living Residents with Dementia

Student Poster Presentation

***Ms. Erreannau Zellous*¹, *Dr. Candace Kemp*²**

1. MA Student of Gerontology Institute at Georgia State University, 2. Georgia State University

Human-animal interaction (HAI) is a potentially valuable form of meaningful engagement among persons living with dementia, including those in assisted living (AL). It has important implications for quality of life and quality of care but has received very little research attention, especially among AL residents with dementia. Our research addresses this knowledge gap by: 1) examining opportunities for HAI among AL residents with dementia; 2) seeking to understand their experiences with HAI and its significance for meaningful engagement; and 3) identifying influential factors that shape their HAI experiences. We present analysis of qualitative data from the grounded theory study, “Meaningful Engagement and Quality of Life in Persons Living with Dementia in Assisted Living.” Data consisted of semi-structured interviews and fieldnotes documenting participant observation in a diverse set of six AL communities, each studied over a one-year period. Residents’ opportunities for HAI were variable, involved live and lifelike-robotic or plush animals, and were largely facilitated by care partners through AL programming and visits by family and friends. HAI represented a significant form of meaningful engagement for many residents with dementia by promoting social and emotional connections with animals, fellow residents, care partners, and their surrounding environment. HAI experiences were shaped by resident and care partner factors (e.g., preferences and history with animals) and AL community influences (e.g., resources, policies, and practices). Findings have implications for research and practice, including and where appropriate, the use of HAI as a non-pharmacological strategy to enhance quality of life and care for persons with dementia.

Impact of an Intergenerational Book Club on Cross-Generational Attitudes: A Mixed-Methods Study

Student Paper Presentation

Ms. Cara Vandergriff¹, Dr. Jean Neils-Strunjas¹, Ms. Jamie Plummer¹, Ms. Katlyn Nguyen¹

1. University of South Carolina

Abstract: This mixed-methods study explores the impact of an intergenerational book club, Pages Across Ages, on cross-generational attitudes between older adults and college-aged students. Amidst growing concerns over ageism and demographic shifts, the study investigates how structured dialogue around selected literary works can facilitate understanding and empathy across generations. Pages Across Ages comprised weekly in-person and virtual meetings to discuss Kristin Hannah's *The Four Winds*, a novel selected for its potential to foster point-driven conversation about relevant issues across the age continuum. Employing a combination of qualitative and quantitative measures, including the Aging Semantic Differential scale, the study reveals significant shifts in attitudes post-participation. Qualitative data from focus groups corroborate these findings, highlighting themes of mutual learning, changing perspectives, and social justice discussions as a result of intergroup contact. This research underscores the potential of book clubs, which have a rich history in America for their ability to act as vehicles for social change, as platforms for fostering intergenerational engagement and addressing age-related prejudices. Our paper explores the viability of book clubs as an effective medium for reducing ageist biases and enhancing mutual understanding between older adults and individuals in the "young adult" age demographic. It not only extends the conversation surrounding the role of intergenerational associations beyond familial interactions, but also suggests a practical framework for implementing such a program that incorporates a literary circle as its basis, offering insights for community and educational initiatives aiming to bridge generational divides and foster social inclusivity.

Impact of Social and Physical Isolation During the COVID-19 Pandemic on Falls Among Older Adults Residing in Assisted Living Communities

Student Poster Presentation

Ms. MaryRose Cohn¹, Dr. Louise Murray¹

1. University of Maryland, Baltimore County

The physical and psychological impacts of falls among the older adult population are well documented on both population and individual levels (AHR, 2021; Liu et al., 2021). The COVID-19 pandemic and the social and physical distancing measures implemented in assisted living communities in response to the pandemic added further complexity to the incidence and prevalence of falls and fall prevention measures among this population (Jenq, 2020). Physical activity among older adults was shown to decline significantly during the first 10 months of the COVID pandemic (Gavin, 2021) and a lack of physical activity has been associated with increases in fall rates among older adults (Akosile et al., 2021; Schoene et al., 2019). The question to be addressed in this study is: How did social and physical isolation measures during the COVID-19 pandemic impact the incidence of falls among older adults in assisted living communities? This mixed-methods study will explore the Assisted Living Administrator's perspective of the impact of these measures on both the incidence of falls and the ability to prevent falls within their communities. Data was collected using qualitative (open-ended survey questions and in person interviews) and quantitative (closed-ended survey questions) methodology. Analysis of the descriptive quantitative data and a thematic analysis of the qualitative data will be provided. The findings of this study may be useful in identifying the impact of social and physical distancing measures among this population and in developing and adapting strategies to mitigate the impact, should the need arise again.

Impact of the Autonomy versus Beneficence Dilemma in Long-Term Care: Nursing Assistants' Experiences of Moral Distress

Student Paper Presentation

Mr. Blake Peebles¹, Dr. Lindsey Jacobs¹, Dr. Rebecca Allen¹, Dr. Lynn Snow¹

1. University of Alabama

Person-centered care is the foundation for the culture change movement in long-term care. Although leadership plays an important role in culture change, nursing assistants (NAs) are integral to the day-to-day implementation and practice of person-centered care. Therefore, understanding the challenges NAs experience with supporting residents' autonomy while upholding their beneficent duty is vital to the success of culture change. The findings presented are part of a larger grounded theory study conducted at a Veterans Affairs Medical Center. Data was collected via semi-structured interviews with eight NAs and approximately 80 hours of observation. A theme that emerged from the larger study was the experience of moral distress. Moral distress occurs when NAs are tasked with performing a duty that does not align with what they believe is ethical, leading to a sense of powerlessness. Thematic analysis was used to identify the sources of NAs' moral distress, which included: 1) institutional policies, 2) resident behaviors, 3) personal values, 4) fear of punishment or blame, and 5) lack of knowledge and training in determining residents' capacity to make everyday decisions. Future work should explore interventions to reduce the frequency and intensity of NAs' moral distress in nursing homes.

Improving Care through Improv

Technique or Tool Demonstration Workshop

***Dr. Candace Kemp*¹, *Dr. Jennifer Craft Morgan*¹, *Ms. Amanda Lee Williams*², *Ms. Emerald Anglin*¹, *Ms. Celeste Greene*¹, *Ms. Andrea Hill*¹, *Dr. Joy Dillard Appel*¹**

1. Georgia State University, 2. Dad's Garage Theatre Company

Dementia care can involve burden, stress, and emotional strain, all of which negatively influence care interactions and relationships. Interventions that bolster care partners' ability to succeed in their care roles, especially in ways that are fun and engaging, show promise for improving dementia care experiences. This presentation introduces, "Improving Care through Improv: Promoting Mastery in the Moment," a pilot project funded by Emory's Roybal Center for Dementia Caregiving Mastery. This study builds on an existing partnership supported by Georgia Gear and involves Georgia State University's Gerontology Institute and actors and educators from Dad's Garage, an improvisational theatre company located in Atlanta, Georgia. Begun in 2023, this one-year project involves refining and pilot testing a training program designed for unpaid care partners of persons living with moderate dementia. The program teaches communication techniques used in improvisational (improv) theatre and provides dementia care education. After learning about the study's hypothesis, methods, and preliminary findings, the session shifts focus to engage the audience by demonstrating key improv techniques, discussing application, and illustrating the power of "Yes, And..." Get ready to laugh and learn.

Improving Dementia Care with BOLD Grants – Best Practices and Lessons Learned

Panel Symposium

***Dr. Annie Rhodes*¹, *Ms. Paulita Edwards-Childs*², *Ms. Emma Kennedy*³, *Ms. Chloe Hale*⁴**

1. Virginia Commonwealth University, 2. Mississippi State Department of Health, 3. SC Department of Health & Environmental Control, 4. GA Department of Public Health

The BOLD Infrastructure for Alzheimer’s Act was passed into law on December 31, 2018. The activities outlined in BOLD are designed to create a uniform national public health infrastructure with a focus on issues such as increasing early detection and diagnosis, risk reduction, prevention of avoidable hospitalizations, and supporting dementia caregiving. There are currently 43 award recipients of CDC-RFA-DP23-0010 “BOLD Public Health Programs to Address Alzheimer’s Disease and Related Dementias”. Recipients will use a public health approach to Alzheimer’s Disease and related dementias (ADRD) using CDC’s Healthy Brain Initiative State and Local Public Health Partnerships to Address Dementia: The 2023-2027 Road Map, the Road Map for Indian Country (RM Series), as well as future updates, as guides to expand and improve the response to ADRD in their jurisdictions. This exciting closing panel will share how four states – South Carolina, Georgia, Mississippi, and Virginia – have addressed state and regional challenges, created new collaborations, and developed innovative ways to meet their goals. Attendees will gain a better understanding of this exciting work and how they can become more involved in supporting, promoting, and advancing these initiatives.

Improving Older Adult Nutrition in NC: The Seniors Farmers' Market Nutrition Program (SFMNP)

Best Practices Presentation

Mrs. Karen Appert¹

1. NC Division of Aging and Adult Services

The Seniors Farmers' Market Nutrition Program (SFMNP) is a USDA Food and Nutrition Service (USDA-FNS) grant-funded program for older adults at least 60 years of age with household incomes of no more than 185% of federal poverty income level. SFMNP provides eligible older adults in participating areas with benefits to purchase fresh fruits and vegetables at certified farmers markets.

The program is designed to improve the nutrition of older adults, increase business for local farmers, and help revitalize rural areas with increased use of farmers markets. Program implementation varies, based on guidelines established by state agencies that manage the funds and program coordination. According to the USDA-FNS, in FY 2022, the program served over 750,000 participants in 57 state agencies, U.S. Territories, and federally recognized Indian Tribal Organizations (ITOs).

All states in the SGS region participate in the SFMNP. Through the lens of the North Carolina SFMNP, this presentation will help attendees gain an understanding of the program, its benefits, and the ways it works to improve nutrition and reduce food insecurity in older adults in participating areas.

Innovative Approaches to Facility Design and Funding of “Place” to Serve Active, Engaged Older Adults

Best Practices Presentation

Ms. Andrea Smith¹

1. Senior Action

The senior center of old days is much more than a building in a community, it is a sense of identity and place for the aging population. Is he building a left-over building that has reached the end of its usefulness, so the community turns it into a senior center? Too often that is the case, and such a metaphor of how older adults are viewed. This session will demonstrate the importance of creating a sense of place for the aging population that instills value and pride and engages the community in redefining what healthy aging looks like. It will also include information on creative funding solutions when there is seemingly no funding available for these types of projects. Attendees will leave encouraged to engage with similar programs in their communities.

Integrated primary care approach decreases risk for high-risk medication use in people living with dementia

Professional Poster Presentation

Dr. Carolyn Clevenger¹, Mrs. Anjali Khakharia¹, Mrs. Laura Medders¹, Dr. Miranda Moore¹

1. Emory University

Harmful care including the prescribing of high-risk and potentially inappropriate medications for older people is widespread among older adults, including people living with dementia (PLWD). Integrated Memory Care (IMC) is a comprehensive dementia care model where patients can access dementia-sensitive geriatric primary care.

We conducted a retrospective observational study of adult patients of IMC, Cognitive Neurology (CN), and Primary Care (PC) clinics aged 65 and older with a diagnosis of dementia in 2019-2021. We matched patients by age, gender and race and measured the hospitalization, rate of deprescribing and inappropriate screening test referrals using logistic regressions controlling for clinic. Additionally, we conducted a regression adjusted for state of illness (proxied by ADLs) for the IMC and CN clinics.

Overall, 509 patients seen in IMC were matched with 490 CN patients and 509 PC patients. Most patients were female and aged 70-85. IMC patients had higher ADL scores indicating more functional dependence.

IMC patients had higher odds of deprescribing high dose Antipsychotics (OR: 4.383, CI:1.405,13.677), benzodiazepines (OR: 3.338, CI: 1.541,7.231) and Opiates (OR: 1.004, CI: 0.415, 2.431) when compared to CN patients. After adjusting for ADL scores, the odds ratios were 4.952 (1.509,16.25), 3.434 (1.573, 7.494) and 0.991 (0.408, 2.404) respectively.

IMC also had higher odds of deprescribing high dose Antipsychotics (OR 5.538 CI: 1.21,25.359), benzodiazepines (2.632, CI: 1.297, 5.341) and Opiates (1.424, CI: 0.571, 3.55) when compared to PC patients.

Patients managed in a dementia-sensitive primary care practice were deprescribed high-risk medications after one-year of management, reducing avoidable adverse events.

Introducing the Safety Connector! Innovations for Making Virginia a Safer Place to Grow Old

Technique or Tool Demonstration Workshop

Dr. Sarah A. Marrs¹, Ms. Courtney O'Hara¹, Ms. Aisling Clardy¹, Ms. Shannon Arnette¹, Ms. Maddie McIntyre¹

1. Virginia Commonwealth University

To date, much of the research on elder mistreatment has focused on adequate skills for recognizing, screening, and reporting abuse. While knowing how to recognize when abuse has occurred is critical for effective response, coupling these skills with knowledge of ways in which we can build a more just society for older adults will lead to greater efforts in prevention of elder mistreatment. In this multi-media session, we will begin by briefly defining and describing elder abuse. Next, we will highlight and discuss the link between ageism and elder abuse. Finally, we will spend the majority of this session discussing community approaches to reduce and prevent elder abuse. Specifically, we will introduce and demonstrate the use of Virginia's new Safety Connector, an online tool for linking systems of care. This tool will better connect older adults and their caregivers to local resources and systems of care that meet their specific needs. We will also introduce the various other resources available on the Safety Connector's website.

Jefferson Area Board for Aging (JABA) Community Centers and Respite and Enrichment Centers

Best Practices Presentation

***Ms. Kelsie Short*¹, *Mrs. Hope Harlow*¹**

1. Jefferson Area Board for Aging (JABA)

Jefferson Area Board for Aging (JABA) has been serving individuals and caregivers along the journey of aging since 1975. We are the gateway for information and support for seniors, adults with disabilities, and their families throughout central Virginia. In 1986, JABA created JABA, Inc., a 501(c)(3) non-profit, to raise funds from private sources to enhance our programs and better serve the growing number of seniors in our area. Our mission is to promote, establish and preserve sustainable communities for healthy aging that benefit individuals and families of all ages.

JABA offers a multitude of services to older adults, including Aging Service Coordinators, Home Delivered Meals, Companion Support Services, Medicare Counseling, VIM Counseling, LTC Ombudsman Support, Affordable Senior Housing, Senior Helpline, At Home with JABA, Community Center Services, Respite and Enrichment Centers (REC), and Friends in School Helping (FISH).

At JABA, we strive to provide a variety of supports to Seniors in our community to allow them the opportunity to age gracefully in their home. Not only does JABA provide supports to Seniors, JABA also focuses primarily on providing support to the family and/or caregivers. JABA understands that providing care for a loved one can become overwhelming, to say the least. Through our partnerships with local healthcare providers, we are able to provide reputable resources to families and/or caregivers in their times of need.

Lifelong Learning Post COVID-19 Pandemic Closures: How Directors of Osher Lifelong Learning Institutes (OLLI's) Create Successful Strategies to Reduce Social Isolation

Student Poster Presentation

Mrs. Kami Batchelder¹

1. Florida Atlantic University

Social isolation among seniors, exacerbated by the COVID-19 pandemic, has been identified as a critical public health concern. This study, employing a sequential explanatory mixed methods design, aims to explore strategies employed by Osher Lifelong Learning Institute (OLLI) directors to mitigate social isolation among lifelong learners. Before the pandemic, over 42 million older adults experienced chronic loneliness, emphasizing the urgency of effective interventions. The research questions seek to uncover OLLI director actions predicting successful strategies and assess their understanding of how these actions reduce social isolation. Utilizing a political economy perspective of critical gerontology, the study combines quantitative and qualitative methods to comprehensively address the research problem. The first phase involves purposeful sampling of OLLI directors, focusing on internal and external factors contributing to successful strategies. A self-developed questionnaire will be employed in this cross-sectional survey to gather quantitative data. The second phase employs qualitative methods, specifically in-depth interviews with purposefully selected directors, to interpret experiences and meanings associated with their strategies. The goal is to provide a nuanced understanding of the directorial actions that effectively reduce social isolation. The study's outcomes aim to offer OLLI directors insights and a foundation for creating successful strategies, particularly in situations where face-to-face interaction is challenging. This research contributes to the broader discourse on addressing social isolation among seniors, emphasizing the role of lifelong learning programs in promoting social connectivity.

Living in Harmony: Music & Self-Care for Caregivers

Self-Care Wellness Workshop

Mrs. Tara Jenkins¹

1. Harmony in Dementia

Often as caregivers, the majority of your time and energy is dedicated to those you care for. This leaves little time for yourself. This can result in caregiver burnout, which can impact your physical, emotional, and mental health, as well as the health of the people you are caring for.

Self-care is an intentional action that is used to support or fulfill an area of your life. It is essential for your well-being and your productivity and can be easily overlooked when caring for others.

Research has shown that music can activate diverse brain networks, including those for cognition, emotion, motor control, and attention. Because music can influence your thoughts, feelings, and behaviors incorporating it into your self-care routine can be extremely beneficial for both you and those you care for.

During this workshop, you will further understand the benefits of health and music, identify the categories of self-care, and incorporate practical skills to use music during self-care activities. Attendees will have the opportunity to try musical instruments as well as apply in-the-moment breathing techniques.

The more you take care of yourself the better you will feel mentally, emotionally, and physically and the better you will be able to care for others.

Long-Term Care System: Comparison of Taiwan and USA approaches

Student Poster Presentation

Mrs. Yun-Zih Chen¹, Dr. Lee Ann Ferguson¹

1. University of Maryland, Baltimore County

The escalating aging population in both Taiwan and the United States, propelled by prolonged life expectancy and declining fertility rates, has intensified the demand for long-term care (LTC) services. This paper conducts a thorough literature review comparing various aspects of LTC between Taiwan and the United States, encompassing the historical evolution of long-term care, the types of services provided, delivery systems, and potential challenges in implementation. Specifically, the analysis focuses on Taiwan's Long-Term Care 2.0 and the USA's Home- and Community-Based Services. The findings underscore the divergent trajectories in the development of LTC systems in Taiwan and the USA, primarily influenced by distinct political factors and legislative and policy developments. Despite these differences, both countries share common challenges, prominently exemplified by budgetary constraints. The proposed recommendation involves the establishment of universal long-term care programs to address these challenges. Notwithstanding these overarching similarities, unique implementation hurdles surface during the implementation of services. For instance, Taiwan's LTC 2.0, designed for service integration, encounters notable gaps in implementation. Conversely, the U.S. government contends with intricate challenges, including workforce shortages and the intricate shift from institutional to community-based care. Recommendations related to their challenges will be discussed. The implications stress the importance of adapting and continuously improving LTC provisions to support the well-being of older adults within their communities during late adulthood.

Look for the Purple Flower Symbol: Dementia Training Benefits Hospital Staff, Persons Living with Dementia, and Their Family Caregivers

Best Practices Presentation

Dr. Christine Jensen¹, Mrs. Denise Butler¹, Mrs. Elisa Mangosing-Lemmon²

1. Martha W. Goodson Center at Riverside, 2. Riverside Doctors' Hospital Williamsburg

This workshop will address a Martha W. Goodson Center at Riverside (formerly the Riverside Center for Excellence in Aging and Lifelong Health) initiative to deploy a large-scale education and skills-building program for our hospital staff. This program, the Purple Flower Program (PFP), promotes dementia awareness in the Emergency Department and inpatient settings and will soon expand to primary care. Many of the acute care staff have limited, if any, training opportunities to advance their understanding of dementia and how to engage most effectively with and care for persons with memory loss. The PFP is a multi-faceted approach that includes: 1) All team members in the facility are receiving training (online and in-person) to promote person-centered dementia care and increase sensitivity while working with patients living with dementia; 2) A purple flower symbol is placed at the patient's door which indicates to team members, including the clinical team and other staff, (e.g., dietary, environmental services) to utilize their person-centered approaches when caring for this patient; 3) Resource cards are provided to family caregivers to build awareness of the PFP and linkage to internal and community-based resources including Memory Care Navigation and support groups; and 4) Engagement items (e.g., therapeutic baby doll, activity apron) are offered to patients based on need. Additional measures of tracking program referral and involvement have been added to the EHR. Fortunately, the PFP has been met with corporate-level support and team members have expressed appreciation for this opportunity to advance their skills, citing personal and professional gain.

Make Some Noise: Empowering Family Caregivers Through the Journey

Panel Symposium

***Dr. Christine Jensen*¹, *Dr. Jodi Teitelman*², *Dr. Ethlyn Gibson*³**

1. Martha W. Goodson Center at Riverside, 2. Virginia Commonwealth University, 3. Norfolk State University - School of Nursing

Oftentimes, caregivers report feeling overlooked or hidden as they walk the journey in providing care for a family member. Caregivers are learning to advocate for themselves and they are making “noise” and are being heard. Now more than ever, caregiving, as a lived experience, with its inherent challenges and rewards, is on the radar screen of the Federal Government and national and regional programs and funders. Panelists will provide an overview of the national landscape on caregiving programs and policies, specifically addressing the RAISE Report, Administration for Community Living Lifespan Respite Care Grants program, and Geriatric Workforce Enhancement Program grants to southern states. Emphasis will be placed on reports and advocacy targeting Alzheimer’s disease and dementia care, and on initiatives such as the Age-Friendly Health System managed by the American Hospital Association. How older adults and caregivers interact with and receive support from community-based organizations including health care systems will be addressed. Ways in which this interaction with community organizations can be improved and strengthened will be emphasized. Further, structural racism and its impact on caregivers will be highlighted as well as ways to engage specifically in the Black community to empower family caregivers in their journey providing care. Attendees will be encouraged to reference programs and reports that support elder care and dementia care in their communities and to offer examples of where they are seeing caregivers making noise.

Meet Me at the Gardens: Creating and Implementing a Collaborative Garden-Based Intervention Designed for Caregiver-Dementia Care Recipient Dyads

Best Practices Presentation

*Ms. Lydia Burton*¹, *Ms. Cora Keber*², *Ms. Hannah Huff*³, *Mr. Cameron Wysocky*³, *Mrs. Brianna Hasty*⁴,
*Ms. Annaleesa Rogers*³, *Ms. Ciara Page*³, *Dr. Lisa Renzi-Hammond*³, *Dr. Jennifer Cruse-Sanders*², *Dr.*
*Jenay Beer*³

1. CARE Center / Institute of Gerontology, 2. State Botanical Gardens of Georgia, 3. CARE Center / Institute of Gerontology, UGA, 4. Institute of Gerontology, UGA

Family caregivers of persons with Alzheimer's disease or a related dementia (ADRD) are often subject to high mental and physical demand, creating imbalance and strain within familial relationships. These imbalances progressively increase as individuals with ADRD progress through the disease. Research shows that exposure to nature and plant life reduces stress, improves quality of life, and provides a social outlet. Meet Me at the Gardens (MMATG) was designed to promote caregiver-patient dyad interpersonal and external closeness in a public garden setting. Four dyads were recruited from a local clinic to participate in the pilot MMATG program, which consisted of four sessions including a botanically-themed workshop, a sensory garden walk, and a hands-on nature-inspired activity. After each session, perceived quality of life, perceptions of caregiving, engagement with activities, and dyadic interconnectedness were assessed using mixed-methods. Although each participant with ADRD noted an increase in dementia-related behaviors as the disease progressed, caregivers did not report otherwise predictable increased caregiving burden. Dyads reported that MMATG facilitated closeness within their relationship and with other attendees. Qualitative feedback on content, session structure, activities, and overall quality was overwhelmingly positive. Nature-based ADRD programming is known to improve quality of life and reduce stress for caregivers, yet many caregivers avoid social interaction with partners with ADRD. That MMATG was successful in a public garden setting suggests that communities without dedicated space for positive dyad interactions in natural settings may still be able to implement the program.

Mental Health and Cognitive Functioning in Older Adults with Chronic Pain: The Role of Pain Management in Promoting Healthy Aging

Professional Paper Presentation

Dr. Kim Coddington¹, Dr. Donna Washburn¹, Ms. Alicia Cooper¹, Ms. Adrienne Hollowell Eldridge¹, Dr. Anna Ord¹, Ms. Genevieve Maksad¹, Dr. Shannon Kuschel¹, Dr. Susan Braud¹, Dr. Anna Magnante¹, Ms. Emily Purcell¹, Ms. Jaline Israel¹, Dr. Scott Sautter¹

1. Regent University

Research suggests that chronic pain is associated with psychiatric symptoms as well as lower cognitive functioning in older adults. This study examined the relationship between chronic pain, depression, anxiety, cognition, and functional capacity in older adults (ages 56-96) in the Coastal Virginia region who completed an outpatient neuropsychological evaluation (N = 468). Psychometrically sound and validated measures were used to assess depression (Geriatric Depression Scale [GDS]), anxiety (Beck Anxiety Inventory [BAI]), and cognitive functioning (the Mini Mental Status Exam [MMSE] and the Mattis Dementia Rating Scale-2 [DRS-2]). Independent-samples t-tests were conducted to examine differences between individuals who reported chronic pain concerns and those who did not. Results indicated that participants who endorsed chronic pain complaints displayed higher levels of depression (M = 6.31, SD = 4.76) and anxiety (M = 13.64, SD = 13.04), as well as lower levels of cognitive functioning (MMSE M = 24.45, SD = 4.81; DRS-2 M = 124.85; SD = 14.15), when compared to those who denied chronic pain complaints (GDS M = 3.26, SD = 3.51; BAI M = 4.16, SD = 6.52; MMSE M = 26.21, SD = 4.05; DRS-2 M = 129.40, SD = 12.13). All differences were statistically significant with $p < .001$. Effect sizes ranged from medium to large. Clinical implications of the findings, study limitations, and directions for future research will be further discussed in this presentation. Pain management strategies will also be discussed to help promote healthy aging in older adults with chronic pain.

Meta-Analysis of Holistic Healthy Aging Practices and Interventions

Professional Paper Presentation

*Dr. Ann Marie Kopitzke*¹, *Dr. Moushumi Roy*²

1. Hampton University, 2. Virginia State University

Introduction: According to the Administration for Community Living (2020), those aged 85 years and above are expected to increase by 118 % from 2019 to 2040 (from 6.6 million to 14.4 million). It is imperative that holistic, evidence-based, healthy aging practices are used to reduce morbidity and mortality for aging populations. **Methods and Analysis:** A meta-analysis of healthy aging practices was conducted to determine which aspects were presently addressed and where gaps or improvements could be made. The review focused on approaches to healthy aging that included holistic approaches of mind, body, spirit and environment. From the literature, evidence-based best practices employed: holistic community/individual approaches; disparity centered and technology-based interventions. Some applications targeted individual behaviors while others addressed community-based experiences. Several managed technology-based approaches (e-health interventions) that could be used for technology savvy populations. Other approaches reviewed literature for randomized and non-randomized clinical trials of m-health interventions. This meta-analysis will be used to develop a holistic healthy aging research study.

Keywords: holistic approaches, healthy aging, evidence-based practices

MIRROR, MIRROR ON THE WALL, HAVE WE PREPARED FOR OLD AGE AT ALL? Financial Preparations for Retirement among Older Adults in Jamaica

Professional Paper Presentation

Dr. Julian McKoy Davis¹

1. The University of the West Indies Mona Ageing and Wellness Centre

Introduction

Post-retirement life expectancy is on average 15-20 years. Financial security in retirement is a key determinant of financial freedom. There are a myriad of costs associated with preparation for retirement. One of the challenges of retirement is that in the absence of substantial financial preparations, some retirees may fall into poverty.

Methodology

Secondary data analysis was used to examine preparation for retirement among respondents of the 2012 Older Persons in Jamaica Study (n=2943).

Results

Most of the sample 77.7% (n = 2264) reported primary level education and below as their highest level of education. More than forty percent of respondents had not prepared for retirement (43.6%). Females were 26.0 percent less likely than males to have prepared for retirement. Self-employed respondents were 74 percent less likely than public sector employees to have made preparations. Respondents with 1 - 3 children alive were almost two times as likely to have prepared as those who were childless.

Mobile Health and Resource Fairs for Adults in Subsidized Housing are a Valuable Applied Learning Opportunity: An Account of College Students' Experiences

Student Poster Presentation

*Ms. Lauren Saurbaugh¹, Ms. Alexis Hernandez¹, Ms. Abby Kennedy¹, Ms. Cassidy McFadden¹,
Ms. Anna Rubin¹, Dr. Alyssa Gamaldo², Dr. Angela Sardina¹*

1. University of North Carolina Wilmington, 2. Clemson University

Prior empirical observations have observed that applied (“hands-on”) learning activities are complementary to lectured classroom instruction and are essential for developing essential skills (e.g., leadership, communication, and professional competencies) for college students preparing to go into health-related fields. These applied learning experiences are valuable tools that provide college students with opportunities for immersion into various environments and providing services to persons of diverse background (e.g., race and socioeconomic status) and contexts (e.g., low-income, subsidized, housing). Mobile Health and Resource Fairs (MHRF; e.g., federally sponsored affordable housing) were planned to address racial and socioeconomic disparities to health for middle-aged and older adults residing in four different subsidized housing communities in Wilmington, NC. Five college students majoring in health-related fields (e.g., Recreation Therapy, Applied Gerontology, and Exercise Science) were hired as under/graduate research assistants to assist with planning and implementation for four, two-day, MHRF events held throughout 2023. The primary purpose of this student poster session is to discuss the experiences of the under/graduate research students as it pertains to 1) personal motivations to apply for this position; 2) experiences of planning community outreach events for subsidized housing communities; 3) increased awareness of health disparities, cultural sensitivity, and cultural competencies; and 4) impacts of their experience on their future career paths. MHRF events provide rich, immersive, learning opportunities for graduate and undergraduate college students who are seeking to expand personal and professional competencies to address health disparities faced by diverse adults aging in subsidized housing communities.

Navigating the Dementia Spectrum: A Balanced Approach to Brain Health

Best Practices Presentation

Dr. Leland Waters¹

1. Virginia Commonwealth University

The dementia spectrum covers a range of disorders affecting memory, thinking, and behavior. This presentation aims to foster a deeper understanding of brain health while encouraging a balanced approach that considers both established knowledge and ongoing exploration. By critically examining nonpharmacological interventions for the dementia spectrum, we strive to contribute to the advancement of effective strategies for promoting cognitive well-being. Nonpharmacological evidence-based practices, success stories, and research findings will be shared as we delve into a systematic review of systematic reviews of these interventions.

Older Adults and Opioids: What they know and perceive

Professional Paper Presentation

Dr. Tamatha Arms¹, Dr. Stephanie Duea¹, Dr. Noell Rowan¹, Dr. Mathew Peterson¹

1. University of North Carolina Wilmington

Opioid overdose deaths in older adults (OAs) across the U. S. have increased 1886% between 1999 - 2019. An increase of 54% in those 55+ seeking opioid treatment was noted between 2013-2015. The number of outpatient opioid prescriptions increased almost “9 fold” between 1995 – 2010. The purpose of this cross-sectional descriptive study was to describe OA’s knowledge, attitudes, and beliefs regarding opioids. An electronic Qualtrics survey invitation was sent to all members of American Association of Retired Persons (AARP) across a southeastern state via a postcard invitation. N=343 OA’s, 59% women, 92% white, with a mean age of 68.1+6.4 years responded to the survey. Most respondents strongly/agree (96%) that people taking pain medications can become addicted; prescription pain meds have similar effects as heroin (78%) and can cause problems with concentration and remembering (90%). Forty-six percent indicated they would be reluctant to get a prescription for an opioid medication due to worry of becoming addicted. Women and those with graduate education had better attitudes toward opioids, as they were less likely to feel that young and poor people are more likely to abuse or misuse opioids compared to men and those with lower levels of education ($p<0.05$). Primary implications include clinical practice, patient education, and healthcare student education highlighting older adults’ perceptions of opioids. The potential for addiction may have OAs avoiding pharmaceutical treatment that improves chronic disease and pain management, functionality, and quality of life.

Older veterans were able to use technology during COVID-19 despite challenges

Professional Poster Presentation

Ms. Saanvi Lamba¹, Mr. Pranjal Tyagi², Ms. Diana Ruiz², Dr. Stuti Dang³

1. Flinthill school, 2. Miami VA, 3. University of Miami Miller School of Medicine

Background: To describe the self-reported experiences during the COVID-19 pandemic of older Veterans regarding technology.

Methods: We conducted the HERO CARE survey of 20,000 community-dwelling Veterans. Veterans were asked an open-ended question to, “share anything else that you would like us to know about your experience with COVID-19”, to which we received responses from 1,992 (95.8%) males and 88 (4.2%) females. Of these, 25 comments from both male (n=18, 72%) and female (n=7, 28%) veterans were related to technology.

Open-ended responses were classified through inductive coding into emergent themes. We describe demographics and COVID-19 experiences of the veterans and their and actual quotes for each theme associated with technology.

Findings: Among technology related responses, female respondents were 75.8±14.0y on average and were composed of mostly (42.9%) non-Hispanic White and (42.9%) non-Hispanic Black veterans. Male respondents were 79.2±10.2y on average, and mostly (66.6%) non-Hispanic White veterans.

The most common emergent themes from regarding technology were trouble with technology access, technology-related usability challenges, using technology for communication during isolation, using technology for healthcare/appointments, and an inability/preference to see providers in-person.

Conclusions: Older veterans were able to use technology to continue to access care through the VA and for communicating with friends and family, despite technology access and usability challenges, and sometimes a preference for in-person visits. Assisting older adults with technology access and providing tools and training to address usability challenges may allow the more wide-spread use of technology for improving healthcare access and addressing social isolation.

Oral Health, Denture Wearing and Respiratory Conditions in Older Adults: A Scoping Literature Review

Professional Poster Presentation

Dr. Mary Helen McSweeney-Feld¹, Dr. Nadine Braunstein²

1. Towson University, 2. Sacramento State University

Older adults experience barriers in access to oral care and maintaining good oral hygiene, and those who are edentulous, approximately 17 percent according to the CDC, may experience significant challenges. Wearing dentures can improve jaw function and allow individuals to masticate and raise nutrition levels, but complications can ensue if they wear their dentures at night or do not clean them adequately. Denture wearers may also experience a greater incidence of respiratory conditions which can lead to higher emergency room visits and hospital re-admissions. A comprehensive search strategy was developed to review the scope of the literature pertinent to denture-wearing and respiratory disease in older adults using 6 databases from 2010 to 2023 with a combination of keywords relevant to denture use and respiratory conditions. Key themes in the research showed that denture wearers, especially those who wore dentures at night, had higher rates of denture-associated bacteriome and reduced lung function that could lead to increased risk of pneumonia and other respiratory illnesses. In addition, infrequent denture cleaning also exacerbates pneumonia incidence and increases the risk of hospitalization. Our review identified that the extent of the literature in this research area is sparse and scarce and needs wider studies with more representative samples of older adults to obtain a more comprehensive understanding of the connection between denture-wearing and respiratory disease incidence. In addition, the need for greater health education on denture hygiene for older adults is also needed to prevent emergency room visits and hospitalization.

Patient portal intervention for enhancing shared decision making and healthy behaviors

Student Poster Presentation

Ms. Roshni Singh¹, Ms. Diana Ruiz², Dr. Fei Tang², Dr. Stuti Dang²

1. University of Miami Miller School of Medicine, 2. Miami VA

Background: Perimenopausal women would benefit from a better understanding of symptoms, associated conditions, and appropriate therapy, in order to participate in shared decision-making (SDM) with providers. We implemented a quality improvement pilot educational intervention called “My HealtheVet to Enable And Negotiate for Shared decision-making” (MEANS) using the Veterans Affairs (VA) patient portal MyHealtheVet (MHV), in the Miami VA Healthcare System (VAHS). The guiding framework for this quality improvement educational intervention was the modified “Three Talk Model of Shared Decision Making for Clinical Practice”.

Purpose: Here, we examine the effect of the MEANS intervention on SDM and MHV use.

Methods: Intervention participants received weekly Secure messages via MHV with information on perimenopause. 269 women at Miami VAHS enrolled in the intervention, and 160 of them completed a six-month questionnaire regarding their perception of impact on SDM and satisfaction with the intervention. Participants average age was 53.2 years; 42.4% white, 43.1% black, and 24.2% Hispanic; 63.2% had a college education, and 95.9% already used MHV.

Results: 57.5% reported that MEANS allowed them to get information that would otherwise be difficult to obtain, 79% said it increased their understanding of menopause and its treatments, 80% felt more confident to discuss these treatments with their provider, 39% reported they had discussed hormone therapy with their provider, and many had adopted positive health behaviors.

Conclusions: This pilot patient portal intervention shows that patient portals may offer a feasible tool to enhance SDM regarding menopause and promote healthy behaviors among racially and ethnically diverse women.

Perceived vaccine production speed as a deterrent to the COVID-19 vaccine: Discussions with older African Americans

Professional Poster Presentation

*Dr. Antonius D. Skipper*¹, *Dr. Tangela Towns*², *Dr. Daniel Rose*², *Dr. Richard Moye*², *Mr. Foster Osei*¹,
*Mrs. Victoria Huebner*¹

1. Georgia State University, 2. Winston-Salem State University

Older African Americans experienced disproportionately high rates of morbidity and mortality due to COVID-19. However, with a focus on vaccine access, scientists and researchers made little effort to understand the factors contributing to COVID-19 vaccine hesitancy among older African Americans. Existing research notes that African Americans are generally more likely to resist vaccines, in comparison to their White counterparts. In addition, medical and scientific distrust are commonly cited as relative to vaccine hesitancy within African American communities. In an effort to understand the nuances of COVID-19 vaccine hesitance among an at-risk population, this study conducted in-depth interviews with 22 vaccine-hesitant, older African Americans. Data were analyzed using a thematic coding procedure, and perceived vaccine production speed emerged as a significant contributor to vaccine hesitancy. This study utilizes the narratives of older African Americans who believed the vaccine was produced too fast to discuss implications relative to researchers and medical professionals. Important aspects of overcoming vaccine hesitancy among older African Americans include educating underserved populations and making efforts to overcome the race-related distrust associated with institutions that have historically exploited African Americans.

Peri-menopausal women Veterans face complex multi-domain social challenges

Professional Poster Presentation

Ms. Roshni Singh¹, Ms. Diana Ruiz², Ms. Saanvi Lamba³, Dr. Stuti Dang², Dr. Ana Palacio²

1. University of Miami Miller School of Medicine, 2. Miami VA, 3. Flinthill school

Background: We sought to describe the social needs of peri-menopausal women veterans and assess the association between them.

Methods: We conducted a mail survey of women and performed appropriate statistical tests.

Results: Survey respondents included 95 women, mean age 45 ± 4 ; 74.7% Non-Hispanic, 25.3% Hispanic; 43.2% White, 49.5% Black; 57.9% were employed; 94.7% had more than a college education. Twenty-eight (29.5%) women lived alone, 32.6% with a spouse/domestic partner, 36.8% with family members/friends.

Forty-three (45.3%) of the respondents found it at least somewhat hard to pay for basics like food, housing, medical care, and heating. Eighty-one (85.3%) experienced some level of stress. Fifty-seven women (60.0%) were most socially isolated while 38 (40.0%) were less socially isolated. Ninety-four (98.9%) had used computers and internet before. Sixty-nine (72.6%) of the women reported using the Veterans Affairs secure messaging MyHealtheVet technology ≥ 1 in the last 30 days. Forty-nine (51.6%) had delayed getting needed medical care in the past 12 months. There was no difference in food and housing insecurity nor in use of secure messaging between blacks and whites. Food and housing insecurity was significantly associated with the level of stress ($p=0.01$). More socially isolated women were less likely to have used MHV in the last 30 days (11/55, 25.0%) compared to less socially isolated women (15 out of 38, 39.5%), p -value=0.04.

Conclusions: Peri-menopausal women Veterans face complex social determinants of health challenges. Bolstering women Veteran's social supports and addressing social needs may reduce stress and enhance use of secure messaging technology.

Potentially Preventable Hospitalizations in a Statewide Medicaid Home and Community-Based Services Population

Professional Poster Presentation

Dr. Julie Robison¹, Dr. Ellis Dillon¹, Dr. Richard Fortinsky¹, Dr. Lisa Barry¹, Dr. Chae Man Lee¹, Ms. Martha Porter¹, Ms. Deborah Migneault¹

1. University of Connecticut

BACKGROUND: State Medicaid programs address the needs of people with disabilities or chronic illnesses through a range of home and community-based services (HCBS) and aim to prevent adverse health outcomes. This study determines rates of potentially preventable hospitalizations (PPH) for Connecticut residents receiving Medicaid-funded HCBS and compares rates across HCBS programs.

METHODS: This retrospective cohort analysis linked Medicaid and Medicare fee-for-service claims, Medicaid administrative data, and uniform clinical and functional assessment data for 33,688 Connecticut residents. PPH rates between 4/1/2022-9/30/2022 were compared across six HCBS programs via logistic regressions adjusted for the 8-point InterRAI Risk of Hospital Use Scale (Hosp-RiskHC) score.

RESULTS: Rates of PPHs ranging from 0.8% (Autism Waiver) to 15.7% (Personal Care Attendant Waiver, PCA). Overall, individuals with PPHs represented 55.6% of the total hospitalization rate. PCA participants were more likely (OR=1.3, 95% CI:1.13-1.58) and Acquired Brain Injury Waiver participants were less likely (OR=0.7, 95% CI:0.48-0.93) to have a PPH versus Elder Waiver recipients (reference group). Likelihood of experiencing a PPH increased with each successive Hosp-RiskHC score (OR=1.2, 95% CI:1.16-1.22).

CONCLUSIONS & IMPLICATIONS: Even accounting for risk factors, rates of PPH varied across HCBS programs, potentially due to the nature of their disabilities, differing services provided by each program, or a combination of individual and structural factors. Identifying variations in PPH rates is a critical step toward building a Value-Based Payment (VBP) program for HCBS providers, who have historically been excluded from VBP opportunities, and identifying systemic gaps and opportunities for coordinated interventions across healthcare providers.

Public Health Strategies to Address Social Isolation and Loneliness Among Rural Older Adults. A Mini-Review of the Literature

Student Poster Presentation

Dr. Grace Ijitade¹, Dr. Erin Mauck¹, Dr. Jodi Southerland¹

1. East Tennessee State University

Background: Social isolation and loneliness (SI/L) are significant public health challenges that impact the well-being of older adults. Evidence-based strategies to address SI/L have emerged slowly, particularly in rural communities. Identifying best practices can help guide public health intervention efforts in rural communities.

Objective: This literature review describes strategies and actions the public health sector can use to address SI/L among older adults in rural communities.

Methods: We conducted a literature review using MEDLINE and PsycINFO from August 2023 to January 2024 to identify studies on social isolation and loneliness interventions targeting rural older adults in the United States. Two qualitative, four systematic reviews, and seven quantitative studies published in English between January 2019 - December 2023 were included. The review process was guided by PRISMA.

Results: The most effective strategies are promoting social engagement, implementing intergenerational programs, and improving transportation and digital connectivity. Healthcare providers can contribute by offering regular telephone outreach and screenings. Community-defined policy-level interventions are required to ensure accessible and affordable housing and funding for home maintenance. Implications and recommendations for future research and practice are also discussed.

Conclusion: There is limited research on effective strategies to address SI/L among rural older adults. Despite these limitations, our literature review identifies promising approaches that public health professionals can use to proactively identify, prevent, and mitigate the risk of SI/L in this population.

Racial Disparities in the Prevalence of High Body Mass Index and Hypertension among elderly residents in the Central Savannah River Area

Professional Poster Presentation

***Dr. Benjamin Ansa*¹, *Dr. Biplab Datta*¹, *Dr. Ashley Saucier*¹, *Dr. Malika Adams*¹, *Dr. Racquel Puranda*¹,
*Prof. Janis Coffin*¹**

1. Augusta University

High body mass index (BMI) and hypertension are major risk factors for many chronic health disorders. This study analyzed the electronic health records of individuals 55 years and older residing in the Central Savannah River Area (CSRA) for the prevalence and odds of having high body mass index (BMI > 25.0) and hypertension based on race. Among individuals (N=3,794) included in the analysis, the majority were Black (54.7%), followed by White (39.6%). Asian, Hispanic, and other race were 2.6%, 2.0%, and 1.1% of the study population respectively. The prevalence of high BMI was 81.1%, 77.8%, 55.1%, 78.2% and 82.5% for Black, White, Asian, Hispanic, and other races respectively. Also, the prevalence of hypertension was 78.2%, 64.1%, 60.2%, 56.4% and 59.0% for Black, White, Asian, Hispanic, and other races respectively. Compared to White, statistically significant odds ratios were observed only for Black and Asian in the association between race, BMI, and Hypertension. The odds of having a high body mass index were higher for Black (OR=1.22; p-value = 0.02) and lesser for Asian (OR=0.35; p-value <0.001). Compared to White, the odds of having hypertension were higher for Black (OR=2.0; p-value = <0.001). Elderly black individuals, compared to other racial groups, that are resident in the CSRA are disproportionately affected by high body mass index and hypertension. Policies and interventions that promote healthy lifestyle in this population are warranted, such as providing safer neighborhoods for physical activities as well as reducing the number of food deserts.

Recruitment Strategies for Underrepresented Research Participants: Lessons Learned from the HANDLS Sleep Study (Healthy Aging in Neighborhoods of Diversity Across the Life Span Sleep Study)

Professional Poster Presentation

***Ms. Marsha Hampton-Jarmon*¹, *Ms. Lena Simon*¹, *Ms. Alexa C. Allan*², *Ms. Junyan Tian*², *Ms. Tracy Davis*³, *Ms. Ann Myers*³, *Ms. Catherine Billington*³, *Dr. Orfeu Buxton*², *Dr. Jacqueline Mogle*¹, *Dr. Lesley laross@clemson.edu*¹, *Dr. Christopher Engeland*², *Dr. Roland Thorpe*⁴, *Dr. Alan Zonderman*⁵, *Dr. Michele Evans*⁵, *Dr. Alyssa Gamaldo*¹**

1. Clemson University, 2. Pennsylvania State University, 3. Westat, 4. John Hopkins University, 5. National Institute on Aging

COVID-19 pandemic public health restrictions greatly impacted recruitment and enrollment efforts across active research projects, particularly projects recruiting underrepresented populations. Within this context, the current study explored (a) the effectiveness of strategies to overcome recruitment and enrollment challenges, and (b) themes attributed to adults' interest in enrollment. This was done in conjunction with the HANDLS Sleep Study ($n=192$; 57.5% Black adults; 68% females; age range: 46-82), which commenced during the pandemic and explored psychosocial and contextual factors related to sleep and cognition. The present study monitored enrollment numbers across time and the extent to which enrollment changed due to strategies (e.g., personalized mailings [letters/note cards], text messages, newsletters, incentive participant options) that were implemented at various time points to address recruitment/enrollment challenges. Our findings indicated an increased enrollment rate when various strategies were used. The average 2 to 3 person a week recruitment rate increased to averages of 5 or more weekly when more personalized touches like mailed note cards and newsletters which were used because they increased comfort amongst prospective participants. Common themes of disinterest were participants' time constraints and dissatisfaction with study compensation. These findings highlight the need for continuous monitoring of recruitment and enrollment strategies of underrepresented populations. To maximize enrollment, we propose study models that encourage a tailored recruitment approach specifically designed for the intended participant sample community.

Retaining Older and Experienced Nurses in the Workforce

Professional Poster Presentation

***Dr. Francine Sheppard*¹, *Dr. Kia Countess*¹, *Ms. Katherine Rush*², *Dr. Ratchneewan Ross*³**

1. Western Carolina University, 2. Atrium Health Cleveland, 3. University of Louisville

Problem: The purpose of this study was to examine intent to leave the nursing profession and perceptions of workplace environments in nurses aged 50 and older to inform ways of retaining experienced nurses to care for populations, including the expanding geriatric population.

Methods: This descriptive study included Registered Nurses (RNs) age ≥ 50 years, registered with the North Carolina (NC) Board of Nursing, and English-speaking. Recruiting occurred using an online survey. Intent to leave the nursing profession and workplace environment descriptions (including high or low patient acuity) were measured in addition to questions about workplace culture.

Results: The sample included 195 RNs employed throughout NC. Mean participant age was 59.81 ± 6.78 years with 31.4 ± 11.4 years of RN experience. Most participants (70%) had considered leaving the nursing profession. Only 36.1% of study respondents worked in high acuity patient population facilities. No correlation existed between patient care acuity environment and intent to leave (Pearson $r = .01$). Some RNs described a desire to continue working if ageist workplace policies and/or workplace scheduling flexibility were addressed.

Conclusions/Implications: Sufficient nursing staffing, experienced caregiving, and mentorship of newer nurses can be achieved when older nurses remain in the workforce. A loss of experienced RNs will impact all patients, including the growing older adult population. Intent to leave the RN profession is not limited to high acuity patient settings, such as hospitals. This study can help inform ways for healthcare delivery systems to retain experienced, older RNs for improved health outcomes.

Self Care for Older Adults and Caregivers Experiencing Loneliness

Self-Care Wellness Workshop

Dr. Megan Smith¹

1. University of North Carolina at Charlotte

Loneliness is the most problematic health issue of our time. Loneliness affects all social groups. We often know we feel “off,” but can’t determine if the issue is due to physical or mental health issues. We’re also not entirely sure who to talk to about how we’re feeling. Others of us are deeply aware of our social isolation and loneliness, but are limited in our resources in how to care for ourselves in these contexts. Unfortunately, loneliness affects our physical and mental health in very problematic ways. The effects of loneliness range from hypertension, strokes, heart disease, diabetes, weakened immune systems, cognitive disorders, Alzheimer’s disease, to depression/anxiety. Fortunately, strategies are available to care for ourselves while experiencing loneliness. Older adults, their caregivers, and health care workers self report high levels of loneliness (second only to Gen Z). Caregivers of older adults and older adults consistently report high levels of loneliness.

This workshop focuses on 1) education and awareness of loneliness, 2) presentation of multiple strategies to alleviate loneliness, and 3) signs and steps to prevent future loneliness and isolation. Confidently knowing the terminology, statistics, and information allows us to speak to our health care professionals, community workers, and stakeholders to reduce loneliness for ourselves and caregivers (or ourselves as caregivers). The workshop focuses and provides realistic takeaways on the topic and practical strategies that we can immediately put into place for ourselves, those we know and love, and those we support informally and formally.

SEXUALITY AND DEMENTIA: DOES LACK OF FORMAL POLICIES INFLUENCE BARRIERS TO RESIDENTS' SEXUAL NEEDS

Student Paper Presentation

Dr. Josephine Misaro¹

1. Georgia State University

Intimacy is an important human need even in assisted living (AL) communities. These communities provide support with activities of daily living (ADL) without the level of medical care typically found in nursing homes. Apart from care, AL provide an environment where social relationships, intimacy, and sexuality for residents will develop. Although much attention has been devoted to aging studies, there is very little research on policies negotiating sexuality issues in AL. I examine how AL administrators and direct care workers negotiate residents living with dementia's needs for sexuality and intimacy. Using semi-structured interview guide, I interviewed three levels of administrators within seven diverse Atlanta AL communities to understand the formal and informal policies and other strategies AL administrators use to negotiate residents' sexual needs. I employed qualitative thematic analysis to analyze the data. Findings suggest that AL administrators face difficult decisions on balancing the sexual needs of older adults living with dementia with concerns over the residents' health, safety, and consent, yet there are no formal policies regarding sexuality in these communities. This leads to over-surveillance (watchful oversight) of the residents resulting in a lack of privacy, dignity, and respect.

Sigma Phi Omega: International Honor and Professional Society in Gerontology

Best Practices Presentation

***Dr. Diane Martin*¹, *Mr. Alfred Boakye*², *Ms. Arnesia Calk*³, *Dr. Cynthia Hancock*⁴**

1. University of Maryland, 2. University of Maryland, Baltimore and Baltimore County, 3. Concordia University of Chicago, 4. University of North Carolina at Charlotte

Sigma Phi Omega, the International Academic Honor and Professional Society in Gerontology was established in 1980 to recognize the excellence of those who study gerontology and the outstanding service of professionals who work with or on behalf of older persons. The goals of SPO are achieved primarily through activities of local chapters as well as through the efforts of the international officers. Local chapters provide opportunities for personal and professional interaction, sharing of concerns, discussion of issues, and service activities. SPO also annually recognizes student and chapter excellence through the President's Student Paper Award, Video Award, and Service Project Award. In the spirit of "A Balanced Approach," this year SPO is pleased to once again partner with the Southern Gerontological Society. While SGS is a regional organization focusing on aspects and challenges of aging within the south, their membership composition has national representation, and their academic journal has international participation. The primary focus of SGS is to bridge research and practice in aging together and this organization places a high priority on the mentorship of students and the inclusion of older adults. The goals of SPO and SGS are perfectly paired to offer multiple opportunities and resources. This workshop is designed to share the history of SPO, introduce the leadership and leadership opportunities, demonstrate how to start a local chapter, and share the many benefits of membership to students, professionals, faculty, and alumni. Please join us to discover what Sigma Phi Omega has to offer!

Social quality environment and health in aging societies: Evidence from Switzerland

Professional Paper Presentation

Dr. Yang Li¹, Prof. Dario Spini¹

1. University of Lausanne

The concept of social quality has garnered increasing attention as a composite indicator of the well-being of societies and individuals. Research suggests four domains of social quality: socio-economic security, social cohesion, social inclusion, and social empowerment, based on the assumption that these domains influence health and well-being. Framed within the social quality model and the ecology framework, this study investigates whether and to what extent social quality environments defined with reference to the cross-cutting social quality domains reliably predict types of health, using data collected in a municipality in Switzerland. We found that social inclusion had the highest predictive power for mental health and functional health, while economic security had the highest predictive power for overall health and physical capacity. Findings suggest that social quality environments effectively distinguish between population segments with varying levels of health. Social quality represents a promising avenue for policy and intervention development in aging societies, as it jointly captures the multiple domains of social well-being relevant to population health.

Storytime: Intergenerational Relationships in Children's Literature

Professional Poster Presentation

Dr. Meldrena Chapin¹

1. University of Maryland, Baltimore County

Stories have long been a fascinating way to learn. I am sure each one of us can remember a favorite storybook from our childhood. But how many of you remember reading a story featuring an elder? This presentation takes us on a quick trip through the timeline of children's literature to see how elders have been represented in the past and compare those representations with works by contemporary authors and illustrators of children's literature. This presentation explores how intergenerational relationships are presented in today's stories. The benefits of intergenerational relationships for both young and old featured in today's stories will be presented. Contemporary children's literature will be examined to understand the status of diversity and representation of culture, ethnicity, and race. This presentation will have you rushing to the library to catch up on your reading, or to checking out a book or two for your own intergenerational story time.

Suspecting domestic abuse by relatives of a person with dementia - Acts and reasoning by health and social care staff

Professional Paper Presentation

Prof. Jonas Sandberg¹

1. Sophiahemmet University

The purpose of the study was to explore how staff act and reason when suspecting domestic abuse perpetrated by relatives caring for persons with dementia. Eight semi-structured group interviews were conducted with staff (n=39) working with persons with dementia living in their ordinary homes. A thematic analysis generated two themes; *Missing a map for guidance* and *Being left to one's own inner compass for direction* indicating that staff experienced a lack of guidelines and protocols to work according to when suspecting abuse. This resulted in staff taking actions based on their own norms, values, and experiences when suspecting domestic abuse. Not knowing how to act risks leading to staff ending up doing nothing or being unable to identify effective interventions, accompanied by feelings of guilt and ethical stress. The results highlight the necessity of providing staff with tools for how to act when they suspect domestic abuse, such as collaboration with others, colleagues, and other organisations where different options for interventions can emerge.

Systematic Review of Prophylaxis Treatment in Sexually Transmitted Infections

Student Poster Presentation

***Ms. Cristina Caldera Garza*¹, *Ms. Faith Hopkins*¹, *Mr. Carlo Martinez*¹, *Ms. Alaina Mgbere*¹,
*Dr. TimMarie Williams*¹**

1. University of the Incarnate Word School of Osteopathic Medicine

Background: The effectiveness of prophylaxis treatment interventions on sexually transmitted infections (STIs) is vague in the older population. This systematic review aims to examine the impact of prophylaxis treatment interventions on STIs in older adults.

Methods:

A systematic review was conducted per PRISMA 2020. PubMed and Cochrane Library relevant databases were analyzed for studies published between 2013-2023. Inclusion criteria were: 1) inclusion of older populations, 2) STIs, 3) prophylaxis use, 4) outcome. Exclusion Criteria include: 1) participants under 50 years old, 2) lack of prophylaxis use, 3) study publication date prior to 2013.

Results:

Three studies met all required criteria and were used for synthesis out of 117 articles found. One article discussed safe sex with older adults and educated them on prophylaxis. Another study looked at prophylaxis use in an HIV-positive group and an HIV-negative group and found that prophylaxis use was more common in the HIV-negative group. The last study looked at prophylaxis use in geriatric non-Catholic women. Studies found an increase in STIs in older adults. The studies analyzed highlight the importance of education of older adults as well as the use of prophylaxis to prevent the spread of infection in this demographic.

Discussion:

This review was anticipated to yield clinically meaningful insight on the benefits of prophylaxis treatments on STIs for older adults. Evidence was limited due to lack of studies focusing on sexual health in older adults that met the criteria. Further research would allow for better evidence-based decision making.

Taking our Seat at the Table: The Role of a Gerontologist as a Member of Geriatric Interprofessional Care Teams

Best Practices Presentation

***Mr. Alfred Boakye*¹, *Dr. Diane Martin*², *Ms. Min Kyoung Park*¹**

1. University of Maryland, Baltimore and Baltimore County, 2. University of Maryland, Baltimore

Interprofessional collaboration is recognized as a national priority to optimize health and social well-being of older adults and their families. Interprofessional education (IPE) is an approach to health and social care training that emphasizes the importance of team-based care. It is the cost-effective cornerstone of providing quality, person-centered care. A variety of IPE training models exist to support health and social care students as they develop knowledge and assessment skills and learn how to effectively collaborate with team members from outside their discipline. These shared learning opportunities increase confidence in and ability to effectively understand and manage clinical problems, including those that manifest in later life. Missing from the team-based approach to providing care to older adults is the gerontologist. Gerontology trainees can contribute to IPE programs, and ultimately to the team-based approach to care, in a variety of ways. In addition to assisting medical and social care trainees understand the dynamics of the aging process, gerontology trainees can educate on topics not explored by other disciplines, including (1) functional abilities that differentiate between young-old, old-old, and oldest-old age groups; (2) the impact of ageism in healthcare decision making, and (3) the bio-psycho-social-spiritual paradigm that influences that influences well-being in later life. In this session, gerontology students and faculty participating in geriatric IPE training activities will share lessons learned from their experiences and feedback received from health and social care trainees and faculty and discuss the value of integrating gerontology into geriatric IPE education.

Teranga: A Multicultural Perspective on Counseling that Nourishes the Whole Person

Best Practices Presentation

***Dr. Gloria Cissé**¹*

1. Southern Center for Choice Theory

It is generally accepted that the practice of mental health care is provided in multiple ways using a variety of interventions but from a Euro-American perspective. While yoga, dance, music and other interventions that include some forms of non-Western techniques are included in some practitioners' work, there may not be an attempt to fully and intentionally fuse multiple theories into a holistic practice. Relationships in the therapy room are critical but sometimes not treated as interdependent. Teranga is a perspective that is culturally sensitive, trauma-informed, and open to diverse practitioners so they can better nourish and honor the whole person in their environment. Teranga uses a fusion of therapeutic principles and techniques to create a psychologically safe environment for both the person providing care and the person receiving care. Its focus is on building a relationship that supports change for the helpee. It is also a departure for the traditional medical model in counseling, which relies heavily on standardized instruments. In this workshop participants will be introduced to Teranga, and an explanation of counseling, psychology and psychiatry that supports the timeliness of this perspective. Teranga principles and the language associated with the use of Teranga in counseling will be covered, as well as how it can be applied in practice with aging/older adults.

By the end of this workshop, participants will have:

1. An introduction to Teranga
2. Understand the significance of Teranga with aging/older people
3. Begin to apply the language and practice structure used in Teranga

The Actual Effects of Evaluation and Management Payment Policy Changes in Medicare Payment of 2021

Professional Poster Presentation

Prof. Jennie de la Cruz¹

1. Mercer University

The evolution of healthcare payment policies plays a pivotal role in shaping the delivery of care and the financial sustainability of healthcare organizations. The Evaluation and Management (E/M) payment policy changes implemented by Medicare in 2021 have been a subject of considerable discussion and debate within the healthcare community. Employing a systematic literature review, adhering to PRISMA 2020 guidelines, and spanning publications from 2020 to 2023, the study identified three key themes: financial sustainability, administrative burden/workflow, and quality of care/patient outcomes. Findings revealed a nuanced impact on the financial stability of medical practices, with disparities among specialties and implications for older adults receiving specialized care. The transition to new payment structures prompted varied experiences, from improved reimbursement to increased financial constraints. The emphasis on preventive care, while positively acknowledged, raised concerns about potential trade-offs in the quality of patient care, especially for older adults.

The Advantages of Program Evaluation in Gerontology Programs

Virtual Presentation (will not be live, must pre-record, will be included in Book of Abstracts and Conference Program, \$50 fee in place of conference registration)

Ms. Jessica McCarty¹

1. University of South Alabama

This paper presents an in-depth overview of program evaluation models tailored to gerontology. It delves into various approaches that assess the effectiveness and impact of programs designed to serve the aging population. The abstract explores the unique considerations and challenges in evaluating gerontology programs, including the multifaceted needs of older adults, the ever-changing nature of aging-related services, and the importance of incorporating holistic perspectives on well-being. Furthermore, the abstract discusses the application of quantitative and qualitative research methods and the significance of ethical and culturally sensitive evaluation practices. Overall, these abstracts aim to provide practitioners and researchers with comprehensive insights and recommendations for program evaluation models in gerontology.

The Effects of Physical Activity on Cognitive Function in Rural Communities: A Systematic Review

Student Poster Presentation

Mr. Kyle Copp¹, Mr. Tyler Larkin¹, Dr. Celina Salcido¹, Dr. TimMarie Williams¹

1. University of the Incarnate Word School of Osteopathic Medicine

Background: The global population of individuals aged 60 and above is projected to reach 22% by 2050, suggesting the importance of addressing the well-being of older adults, particularly in rural areas. Cognitive function is crucial for maintaining quality of life in later years, but research on the impact of physical activity on cognition in rural settings is limited.

Objective: This systematic review aims to assess the relationship between physical activity and cognitive function in older adults living in rural communities in hopes to inform interventions and policies for healthy aging.

Methods: A search on PubMed and CINAHL, utilizing keywords “cognitive function,” “rural communities,” and “physical activity” or “exercise” was conducted. Inclusion criteria included studies assessing physical activity on cognitive function and involving participants aged 60 or older in rural settings. Non-English articles were excluded.

Results: Of 86 identified articles, 12 met the inclusion criteria. Remarkably, 11 studies showed a significant association between exercise and cognitive function in rural adults over 60.

Discussion: These findings suggest a unique link between exercise and cognitive function in rural older adults, highlighting the possibility of exercise interventions reducing risk of cognitive decline. However, limitations including limited external validity due to non-U.S. study locations, potential mediating factors in different populations, inconsistent cognitive function definitions, and possible bias from unpublished non-significant results must also be considered. Thus, development of interventions and policies to promote healthy aging and cognitive well-being in rural communities should be created to further assess the effects of physical activity on cognition.

The Forgotten: Prisoners with Dementia in the American South

Professional Paper Presentation

Dr. Boyd Davis¹, Dr. Meredith Troutman-Jordan¹

1. UNC Charlotte

The U.S. has more prisoners than any other country in the world, a sizeable percentage of whom are aging: indeed, the *Physician's Weekly* estimates that “by 2030, people over the age 50 will comprise one-third of the U.S. prison population”.¹ More than 1.5 million persons were housed in state and federal prisons in 2020.² The Southern Poverty Law Center identifies the Deep South as “the epicenter of mass incarceration.” Dementia is largely underdiagnosed^{4,5}, and it is a higher risk than for people who are not incarcerated. Brooke⁶ notes the increase in peer support volunteer programs for aging prisoners. Our presentation reviews written statements from the American Prison Writing Archive in which prisoners discuss their perceptions of dementia care in prisons, frequently from the perspective of how the prison system warehouses its aging men and women. These are blunt, sometimes horrifying comments about the uneven processes of diagnosis and care. Writers position themselves as knowledgeable about rights and duties in aging and dementia⁷⁻⁸ and frame their comments to identify concerns about a prison system that cannot deal with losses of cognitive ability and memory.

Complete references available on request:

1. Bernstein (2018)
2. Dolovich (2022).
3. SPLC (2021).
4. Baillargeon (2023).
5. Maschi (2021).
6. Brooke (2021).
7. Harre' (2012).
8. Yousefi (2020).

The Healthy Aging Curriculum for Older Adults and its impact on residents of care facilities

Professional Paper Presentation

Prof. Miriam Watts¹

1. California State University Long Beach

The “Healthy Aging” curriculum covers aging-related topics and was designed to increase knowledge and improve attitudes about aging for older adults residing in skilled nursing facilities. The purpose of this study was to assess the effectiveness of a six-session “Healthy Aging” curriculum by evaluating 150 older adult (122 women and 28 men) knowledge, attitudes, and motivation to change behavior related to their own aging, before and after the curriculum. The Theory of Planned Behavior provided a framework for this study and a pre-and post-test design used the Philadelphia Geriatric Center Morale Scale to test participants’ attitudes about their own aging. A scale specific to the curriculum tested knowledge. Upon curriculum completion, knowledge and attitude scores improved and all participants said they were more likely to change their behavior to age in a healthier manner. This study suggests that a curriculum promoting healthy aging increases knowledge, which impacts attitudes about one’s own aging, leading to positive behavior changes.

The Impact of Daily Lived Environments on Health, Well-being, and Activity Engagement

Panel Symposium

***Dr. Angela Sardina*¹, *Dr. Jacqueline Mogle*², *Dr. Mijin Jeong*², *Ms. Junyan Tian*³, *Ms. Alexa C. Allan*³,
*Dr. Alyssa Gamaldo*²**

1. University of North Carolina Wilmington, 2. Clemson University, 3. Pennsylvania State University

Increasing research supports the meaningful connection between contextual factors and health. Contextual environments (immediate home and neighborhood environments) are modifiable factor(s) supporting/constraining physical, cognitive, and psychosocial health and well-being. These health domains are imperative to supporting independence and the ability to age-in-place with advancing age. This symposium includes presentations from two projects conducted to explore (a) how perceptions of immediate housing and neighborhood characteristics relate to health and well-being and (b) strategies to engage and disseminate health resources within neighborhood environments across diverse adult populations. The objectives of the proposed symposium are the following: (1) discuss the constructs identified from a scale that explores perceptions of immediate housing and neighborhood social and physical built environmental characteristics (2) discuss how perceptions of immediate housing and neighborhood social and physical environmental characteristics relate to health and well-being (3) discuss practices and challenges with engaging older adults within their preferred community settings. Jeong and colleagues explored relationships between perspectives of each home living space to the satisfaction with these specific spaces. Tian and colleagues explored the association between leisure constraints and cognitive function, and whether this association varied by depression severity. Allan and colleagues explored the association between perceived housing quality and social engagement. Gamaldo and colleagues explored sleep quality as it relates to the physical built environmental characteristics of the bedroom space versus the neighborhood. Lastly, Sardina and colleagues explored the feasibility of a mobile health and resource fair designed to mitigate health disparities experienced by older adults residing in subsidized housing.

The Importance of Mentorship Networks for Professionals in Gerontology

Panel Symposium

Dr. Christine Jensen¹, ***Ms. Denise Scruggs***², ***Dr. Lee Ann Ferguson***³, ***Dr. Leland Waters***⁴,
Ms. Morgan Alexander⁴

1. Martha W. Goodson Center at Riverside, 2. National Council of Certified Dementia Practitioners, 3. UMBC Erickson School of Aging Studies, 4. Virginia Commonwealth University

As gerontology programs in higher education institutions and the aging network of service providers have experienced periods of change over the last 25 years, one constant has been the collaboration and mentorship of academics and practitioners both within and across organizations. In this panel discussion, SGS President, Bert Waters, will facilitate a conversation among SGS members with diverse experiences and career trajectories to highlight examples of these collaborations, the important of social networks, and the need for mentors at all stages of their careers. The panelists will discuss different ways and methods of mentorship that are not defined by institutional or organizational boundaries. This discussion is intended to illuminate how social and mentoring networks have helped professionals at multiple career stages achieve professional growth while making substantial contributions in the base of knowledge in a still-emerging discipline. Attendees will also be introduced to how the Southern Gerontological Society can provide opportunities to build these social networks and mentoring opportunities.

The influence of a caregiver's social support on nursing home placement of Alzheimer's patients: A case-control study

Professional Paper Presentation

Dr. Caitlin Torrence¹, Dr. Brian Witrick², Dr. Lior Rennert², Ms. Hannah Gorman¹

1. Western Carolina University, 2. Clemson University

Background and Objectives: Few studies have explored the intrinsic value of social support for caregivers of people living with dementia outside of interventions and educational programs. Even fewer studies have examined how the presence of social support factors into a caregiver's decision to institutionalize their loved one. The objective of this study is to investigate the association between the presence of social support and a caregiver of a person living with dementia's decision to institutionalize.

Research Design and Methods: This was secondary data analysis of a case-control study that conducted interviews with caregivers of participants who had a diagnosis of Alzheimer's disease, had or were receiving service through a Medicaid home and community-based waiver. The caregivers were classified as cases (n=351) if their loved one was institutionalized within six months of the interview. Controls (n=290) were caregivers who's loved one lived in the community. Caregivers were asked if they turned to social and or professional support if assistance was needed. Conditional and unconditional logistic regressions were used to model the relationship between type of social support and institutionalization status.

Results: Of the 641 persons with dementia matched on age, gender, race, and long-term care assessment data, the conditional model did not find statistically significant differences in institutionalization status among caregivers who reported informal support or professional support. However, the unconditional model did produce statistically significant differences between institutionalization status and if the caregiver reported receiving professional support.

The Influence of Social Relationships among Caregivers and Non-Caregivers and the Impact on Mental Health: Findings from the Health and Retirement Study

Student Paper Presentation

Ms. Jessica Yauk¹, Dr. Debra Dobbs¹, Dr. Hongdao Meng¹

1. University of South Florida

This study investigates the association between the number of close social relationships and health outcomes for both caregivers and non-caregivers. Social support may alleviate some of the strains of caregiving and help caregivers cope during difficult times. A total of 2,974 participants from the 2016 wave of the Health and Retirement Study were included in the analyses. Results reveal that caregivers report a lower overall number of close social relationships compared to non-caregivers. Furthermore, when focusing on caregivers (n=614), evidence indicates that depressive symptoms increased as the reported number of close friends decreased. However, life satisfaction was not significantly related to the number of close friends reported by caregivers. Findings demonstrate that the number of close social ties was lower for caregivers than for non-caregivers, and caregivers reported higher depressive symptoms when they had fewer close friends. Future studies should focus on types of caregivers to understand the association between social support and caregivers' mental health.

The Power of Elderhood: Connecting with our Authentic Selves in an Ageist Society

Panel Symposium

***Dr. Jenny Inker*¹, *Dr. Althea Taylor Jones*², *Dr. Ed Rosenberg*³, *Dr. Jodi Teitelman*¹**

1. Virginia Commonwealth University, 2. Independent Gerontologist Consultant, 3. Appalachian State University

The concept of elderhood is contested in the gerontological literature (spanning the disciplines of sociology, psychology, anthropology, and the humanities) and everyday life. As Settersten (2005) points out, academics have shied away from recognizing the potential conceptual and theoretical utility of elderhood, unlike the discipline of childhood studies, which eagerly embraces the idea that childhood is a diverse experience individually, but one with conceptual clarity overall. Instead, the discipline of gerontology has embraced the “microfication” of the aging experience, slicing it into its individual bio-psycho-social and (sometimes) spiritual dimensions with little attention to the overall integration of the multidirectional changes across these dimensions and what this means both for society and individuals living in a youth-obsessed, and therefore ageist, culture. Similarly, in everyday life, attempts are often made to dismiss discussions of elderhood as simply the renaming or euphemization of old age. In this panel symposium, we will explore the evidence for the construct of elderhood, both as a societal role and an individual experience (Jenny Inker), interrogating the issue from a sociological perspective by taking a symbolic interactionist perspective, asking “Is It Ageist to Ask Someone’s Age?” (Ed Rosenberg) and suggesting some alternative terminology being used in communications with diverse audiences by exploring the practice of “Acknowledging and Honoring ‘Seasoned Citizens’ to Combat Ageism” (Althea Taylor Jones). Participants can expect a lively, interactive discussion on these topics as we seek to explore and push the boundaries of our understanding of elderhood and its significance in modern society.

The Relational Perspective among Older Sexual and Gender Minorities in Long-Term Care

Professional Paper Presentation

Dr. Jeffrey Lentz¹

1. Emory University

Autonomy is a vital element of quality of life in long-term care (LTC), especially for older sexual and gender minority (SGM) older adults. Older SGM have a higher risk of requiring long-term care. Key risk factors include a lack of family of origin and a higher prevalence of chronic conditions and disabilities. Many older SGMs fear congregate care for various reasons (i.e., fear of discrimination and mistreatment by administrators, staff, and other residents and a need to be forced back into the closet). This presentation aims to apply Perkins et al.'s (2012) relational perspective to older SGM adults in LTC and to prepare LTC staff for the increase in this population to reduce invisibility and increase quality of life and care. The relational perspective allows for a critical way for researchers and practitioners to assess their communities to cultivate the quality of life and quality of care for older SGMs in LTC. An important component of the relational perspective is to develop interventions at multiple levels to ensure all older adults residing in assisted living have the best quality of care and quality of life, especially older sexual and gender minority adults. Suggested interventions at the individual-, LTC-, and wider community levels are explored and discussed.

The Relationships Between Information Sources, Perspectives on Public Health Policies, and Ageism

Student Poster Presentation

Ms. Cherrie Park¹

1. The Ohio State University

Global concerns over heightening ageism have been raised throughout and after the pandemic. While it was presumed that age-based public health policies at earlier stages of the pandemic contributed to inter-generational tension, little evidence was available about these concerns. In response, this study aimed to understand younger adults' ageism in the context of public health crises by examining the relationships between younger adults' perspectives on health policies, sources of health information, and the intensity of their ageism. For a quantitative inquiry, survey data were collected in the United States from 317 individuals ages 18 to 44. Multiple hierarchical regression analysis revealed that benevolent ageism was more intense than hostile ageism among the survey respondents. The respondents' intensity of ageism was significantly associated with their beliefs about safety measures and the prioritization of older adults in distributing medical resources, as well as with their choice of information sources (e.g., social media) to receive health information. These findings inform those doing advocacy work for older adults, including those in the helping profession, about future directions for combating ageism in times of public health crises. They are encouraged to guide younger adults to accept health information critically and to use various information sources for health information. At the macro-level, policy decisions on safety measures should be made, based on individualized medical assessment, ethical standards, and scientific data rather than age thresholds only.

The unification of activity and disengagement theories

Professional Paper Presentation

Dr. Stephen M. Marson¹, Dr. J. Porter Lillis¹

1. University of North Carolina at Pembroke

The intent of this theoretical analysis is to demonstrate that gerontologists have been distorting the central notions found within activity theory and disengagement theory. We show that disengagement and activity are not individual constructs but rather part of a single conceptual framework that follows an evolutionary pattern within the individual's life course. Individually, activity theory and disengagement theory are static. However, combining their central concepts into a unified whole, the theoretical framework becomes dynamic and more useful to practicing gerontologists and researchers. The commonality or bonds between the two theories include: (a) shared concepts and variables; (b) theoretical propositions; (c) intellectual history; (d) causal relationships; (e) preconsciousness; and (f) locus of control. A single theory emerges.

Key Terms: Activity Theory, Disengagement Theory, Theory Unification, Role Theory, Theory Construction

The Value of Collective Impact in Addressing the Complex Direct Service Worker Training and Credentialing Challenges in North Carolina

Student Poster Presentation

***Ms. Caroline Yoon*¹, *Ms. Zavera Basrai*¹, *Dr. Sandi Lane*², *Dr. Kezia Scales*³, *Mrs. Trish Farnham*⁴, *Ms. Erin Carson*⁵, *Dr. Nathan Boucher*¹**

1. Duke University Sanford School of Public Policy, 2. Appalachian State University, 3. PHI National, 4. NC Coalition on Aging, 5. National Domestic Workers Alliance - NC Chapter

The demand for direct service workers (DSWs) in home- and community-based services (HCBS) is advancing rapidly with the aging population's growth and preferences to age in place. In North Carolina (NC), the direct service workforce (approximately 113,000 workers), are often underprepared, underpaid, and inadequately supported in this essential work. The Workforce Engagement with Care workers to Assist, Recognize, and Educate (WECARE) project aims to modernize NC's direct care training and credentialing (TC) to increase the pipeline of workers, build career pathways, elevate their skills and recognition, and improve job quality and retention using Collective Impact (CI). CI builds on the perspective that multiple organizations across multiple sectors must combine efforts in order to achieve a common goal. For WECARE we integrated community wisdom and lived experiences of the direct service workforce, care recipients and their families in a collaborative backed by a common agenda, shared measurement, mutually reinforcing activities, continuous communication, and "backbone" support (dedicated coordination team). WECARE participants came from multiple and diverse organizations, including regulatory, training, and credentialing agencies, providers, direct service workers, care recipients, and their families. Recognizing critiques of the CI approach's potential to perpetuate structural inequities, WECARE emphasizes an inclusive strategy centered around community engagement by incorporating individuals with lived experiences into its core team. Systematic challenges are addressed through intentional planning and implementation, with a focus on equity and inclusivity among all stakeholders, as well as continuous communication and idea sharing across sectors through monthly workgroup meetings.

The Virginia Memory Project: An Innovative Epidemiological Brain Health Registry with Direct Pathways to Services.

Best Practices Presentation

Ms. Ashley Staton¹, Dr. Annie Rhodes¹, Ms. Andrea Price¹

1. Virginia Commonwealth University

The Virginia Memory Project (VMP) is a statewide epidemiological registry that catalogs diagnoses of ADRD (Alzheimer's Disease and Related Disorders), caregiving (CG), and subjective memory decline (SMD) across the Commonwealth of Virginia. Unlike traditional epidemiological registries, the VMP operates on a responsive philosophy, namely that the data housed in the registry should be foundational to immediate service and education efforts, as well as the more traditional long-term and higher order functions of a registry such as public health surveillance, resource allocation, and policy formation. The VMP was founded in 2021 and launched in 2022 via a sub-award from the Virginia Department of Health (VDH) and Centers for Disease Control (CDC).

While traditional registries have focused on the singular aims of enrolling participants in research trials, evaluating the quality of dementia care, or tracking the prevalence of dementia in a cohort (epidemiological registry), the VMP addresses these issues holistically, not only housing data but leveraging the findings to offer recommendations in public health and policy arenas. Additionally, the VMP offers a self-enrollment tool, which allows the registry to go beyond traditional data sources to provide education, caregiver support, and other vital resources needed by those impacted by the disease. This presentation educates attendees on brain health registries; significance, leveraging data for advocacy and service improvement, data governance best practices, and sustainability strategies.

The “Best Kept Secret”: Ashland Terrace as a Model for Culture Change in Residential Independent Living

Best Practices Presentation

***Dr. Graham Rowles*¹, *Ms. Kelly Weber*²**

1. University of Kentucky, 2. Ashland Terrace Independent Senior Living Community

Ashland Terrace, established in 1849 during a cholera epidemic in Lexington, Kentucky, celebrates 175 years of existence this year. A non-medical residential community that is “home” to 35 older women, Ashland Terrace is a “community” within its local community with an extended record of resilience and constant adaptation. Often characterized as the city’s “best kept secret”, it provides an affordable alternative in an era of proliferating corporate “for profit” residential options including shared housing, cohousing, and assisted living, that are beyond the means of many older adults. In this presentation we describe the characteristics of Ashland Terrace in comparison with other contemporary residential options, focusing on what makes it unique. A core underlying motif in the resilience of this residential community over many generations is the ability to facilitate a sense of “being in place”, a fundamental human aspiration, for both residents and staff. Defining and elaborating on the construct of being in place, we explore the confluence of six themes—scale, physical plant and environmental attributes, deeply ingrained historical values and identity, internal “community”, external community engagement, and constant adaptation—as key elements in the success of this community. We consider barriers, including cost, to widespread implementation of this model and ways in which they might be addressed. Our overall objective is to contribute to discourse on needed culture change in conceptualizing and developing independent living alternatives for less affluent older adults.

Trans/Gender Non-Conforming Adults Experiences With Access to Healthcare in GA

Student Poster Presentation

Ms. Tatiyana Spence¹

1. Georgia State University

The demographic shift in the United States towards an aging population underscores the critical need to examine healthcare access for older adults, particularly those who identify as transgender and gender non-conforming (TGNC) within the LGBTQ+ community. Despite an expanding body of research on LGBTQ+ older adults, there exists a pronounced gap in understanding the specific barriers and challenges TGNC individuals face when accessing healthcare services, including end-of-life (EOL) care.

By employing an intersectional approach, the review seeks to uncover the intricate barriers contributing to disparities in healthcare access and quality for this marginalized population, especially within the context of Georgia's healthcare landscape. Sexual orientation, gender identity, race, ethnicity, and socioeconomic status, impact the healthcare access experiences of TGNC older adults. Emphasizing the importance of creating inclusive and culturally competent healthcare services, the review underscores the need to address challenges faced by TGNC individuals in navigating healthcare settings. The findings underscore the urgent need for targeted interventions and policy initiatives aimed at enhancing healthcare access for TGNC older adults.

By addressing these critical gaps in understanding, this review advocates for a comprehensive approach to healthcare that recognizes and addresses the specific barriers and challenges encountered by TGNC older adults. Ultimately, this research contributes to informing policy and practice initiatives aimed at promoting equitable access to quality healthcare services for all members of the LGBTQ+ community as they age, including those residing in Georgia.

Trends in Mortality and the Effect of Education among Persons with Alzheimer's Disease in South Carolina

Professional Paper Presentation

***Dr. Candace Brown*¹, *Dr. Xi Ning*², *Mrs. Amy Money*¹, *Ms. Mauriah Alford*³, *Dr. Yinghao Pan*¹, *Dr. Margaret Miller*⁴, *Dr. Matthew Lohman*⁴**

1. University of North Carolina, Charlotte, 2. Colby College, 3. University of North Carolina Wilmington, 4. University of South Carolina

A 2021 report by the Alzheimer's Association stated that 19.1% of people ages 76-84 and 34.6% of people aged 85 and older have Alzheimer's disease (AD). Multiple factors report an increased diagnosis risk, while modifiable risk factors potentially prevent or delay dementia in up to 40% of cases. Mortality is strongly associated with the rate of cognitive decline and level of education is reported as a modifiable factor to decrease the risk of developing dementia whereas the higher number of completed years of education has a positive causal impact on health.

We used a comprehensive Alzheimer's Disease and Related Dementia South Carolina (SCADR) registry to examine the demographics and survival probabilities of decedents between the years 2014-2019. Cases were obtained from death certificates by linking the SCADR with vital records. Turnbull's method estimated survival probabilities by level of education. Cox proportional hazards models were fitted and hazard ratios (HRs) computed, adjusting age at diagnosis, education level, gender, and race.

We found 94.6% of descendants were diagnosed with AD at age 61 or older. Higher educational levels were associated with increased mortality risk (HR >1). Black/African American AD decedents (HR = .87) had the smallest mortality risk compared to others (HR \square .98-1.08). Male decedents, as opposed to female decedents, faced a higher risk of death. This study demonstrates outcome variability based on death certificate data. Further research, with additional data, may better inform research how data from death certificates from AD descendants impacts how we interpret the effect of education.

Understanding intersectional disparities in late-life material hardship

Professional Paper Presentation

Dr. Yang Li¹

1. University of Lausanne

Older adults' inability to afford necessities such as food and housing is associated with a range of negative health outcomes. Material hardship captures the experience of such economic deprivation in the form of unmet needs. Prior research shows that older women bear higher risks of economic disadvantage compared to older men. Yet, our understanding of how late-life material hardship varies across intersectional identities such as age and gender remains limited, restricting the development of targeted and precise interventions to reduce material hardship among the most vulnerable individuals. Using data from the Understanding America Study, the present research examined how five types of material hardship varied at the intersection of age and gender among adults aged 65 or older in the United States. Findings indicate that while women experienced higher levels of hardship than men overall, the prevalence of hardship decreased as age increased. Importantly, older women experienced higher levels of hardship at an earlier age (65-69) relative to older men, highlighting the intersectional disadvantage experienced by older women. Further, the chance of experiencing any hardship for older women was significantly higher than that for older men during 2021-2022, the period concurring with recent rises in inflation and cost-of-living. Interventions to alleviate economic deprivation and enhance well-being in later life would benefit from an intersectional perspective that target individuals who experience multiple economic disadvantages at the same time, with attention to older women's disproportionate experience of material hardship.

Understanding Older, Low-Income Homeowners and their Home Environments for Aging in Place

Professional Paper Presentation

Dr. Sung-Jin Lee*¹, *Ms. S. Renee Robinson*¹, *Dr. Elizabeth Hopfer*¹, *Dr. Minyong Lee*¹, *Dr. Kathleen Parrott

²

1. North Carolina A&T State University, 2. Virginia Tech

Older homeowners may have increasing difficulties as they age if/when they encounter health deterioration with insufficient finances and live in homes where limited universal design/accessibility features (i.e., environmental press) are present. This study aimed to understand older, low-income homeowners and their home environment in the context of their aging-in-place (AIP) practice.

Using a qualitative phenomenological study approach, researchers conducted in-home and personal interviews with 11 urban low-income, older homeowners ($M = 73$ years old) in community-dwelling units. A nonprofit housing organization providing supportive services to older adults with lower incomes than the current county area median incomes assisted with sample recruitment. Content analysis was employed with home assessment data and photos taken during home visits, qualitative data transcribed from interviews, and interviewers' notes. From the analysis, personal elements affecting quality AIP are living alone (i.e., loneliness, unsafe feelings), informal support (e.g., receiving care), limited financial resources (e.g., mortgage payment), and technology adoption levels. Home environmental elements are home accessibility features (e.g., steps), interior textile condition (e.g., old, uncleaned carpet), residing in an old home (i.e., continuous home improvement needs), and clutter (i.e., downsizing needs).

This study is meaningful in providing an opportunity to understand older, low-income homeowners aging in place and their home environments that have been less examined with a qualitative approach. This research presentation is based on data collection in 2023 and its ongoing analysis and will be supported by photos of home environments and qualitative comments from study participants.

Ungrading: An Innovative Pedagogy for Assessing Competency-Based Gerontological Learning

Best Practices Presentation

***Dr. Jenny Inker*¹, *Dr. Michael Forder*², *Dr. Leland Waters*¹**

1. Virginia Commonwealth University, 2. Virginia Commonwealth University - College of Health Professions

This session will introduce participants to a set of innovative pedagogical practices known as ungrading. The session will explain why and how ungrading can be a powerful support to both students and instructors in developing proficiency with regard to the AGHE gerontological competencies. Examples from ungrading pilots at Virginia Commonwealth University's Master of Gerontology program will be shared.

Unlocking Learning Through Case-Based Strategies

Best Practices Presentation

Prof. Jennie de la Cruz¹, Dr. Leslie Taylor¹, Dr. David Taylor¹, Dr. Susan W Miller¹, Prof. Arlene Salmon¹

1. Mercer University

In the dynamic landscapes of education, healthcare and community-based work, the efficacy of lecture-based teaching methods is continually being challenged. This mini-workshop delves into the transformative potential of including case-based learning (CBL) across diverse educational domains and educational platforms, including synchronous, asynchronous, in-person, and distance delivery options. This session will illustrate how CBL can address increasingly complex aspects of the cognitive, affective, and psychomotor educational domains of learning. This evidence-based interactive session invites participants to explore the possibility of integration of case-based methodologies into their own context, whether in academia, healthcare, or community-based work. Attendees will engage in practical activities, and guided discussions, gaining firsthand experience with the transformative impact of CBL. The mini-workshop aims to provide participants with actionable strategies to enhance learning outcomes, foster learner engagement, and promote real-world application across diverse educational contexts. Join us in this exploration of case-based learning as a catalyst for meaningful and impactful education.

Unraveling Gender Disparities in Migraine Care and Pain Outcomes in Aging Individuals

Student Paper Presentation

Ms. Tanjina Jalil¹, Dr. Nasreen Sadeq¹

1. University of South Florida

Migraine disease, a neurological disorder characterized by recurrent headaches often accompanied by symptoms like nausea, vomiting, and sensitivity to light and sound, affects approximately 1 in 7 individuals worldwide. It is a condition that significantly impacts an individual's well-being, leading to disability, absenteeism from work, and limited participation in social and family activities. Despite its prevalence, migraine care experiences are not uniform, and gender disparities in healthcare access, diagnosis, and treatment contribute to varied outcomes for individuals. This literature review seeks to investigate how gender-related disparities in care impact the experience of migraine pain, with a specific focus on aging individuals. It poses critical questions: How do gender discrepancies affect the identification and management of migraines in older individuals? What distinct gender-related encounters are associated with migraine pain among older people? What are the repercussions of unequal healthcare access for aging individuals dealing with migraines? Understanding the connection between gender-based healthcare disparities and migraine disease is vital for improving healthcare outcomes and reducing inequalities in the elderly population.

Using Collective Impact Framework to Assess Home- and Community-Based Services Worker Training and Credentialing in North Carolina

Student Paper Presentation

***Ms. Zavera Basrai*¹, *Ms. Caroline Yoon*¹, *Dr. Sandi Lane*², *Dr. Kezia Scales*³, *Mrs. Trish Farnham*⁴, *Ms. Erin Carson*⁵, *Dr. Nathan Boucher*¹**

1. Duke University Sanford School of Public Policy, 2. Appalachian State University, 3. PHI National, 4. NC Coalition on Aging, 5. National Domestic Workers Alliance - NC Chapter

The demand for direct service workers (DSWs) in home- and community-based services (HCBS) is advancing rapidly with the aging population's growth and preferences to age in place. In North Carolina (NC), the direct service workforce (approximately 113,000 workers), are often underprepared, underpaid, and inadequately supported in this essential work. The Medicaid-funded Workforce Engagement with Care workers to Assist, Recognize, and Educate (WECARE) project aims to modernize NC's direct care training and credentialing (TC) to increase the pipeline of workers, build career pathways, elevate their skills and recognition, and improve job quality and retention using Collective Impact (CI). CI integrates community wisdom and lived experiences of those for whom policy changes are meant to impact through diverse collaborations backed by a common agenda, shared measurement, mutually reinforcing activities, continuous communication, and "backbone" support (dedicated coordination team). WECARE's state-wide landscape analysis, driven by five listening sessions with HCBS workers, support recipients, and family caregivers, and numerous discussions with agency leaders, qualified professionals, and regulatory agencies revealed: lack of flexibility in TC requirements; limited portability of credentials; limited person-specific knowledge among DSWs supporting new clients; and the need for expanded core competencies training, particularly in planning, self-care, cultural humility and role delineation. Additionally, minimal funding incentives for crucial training hinder DSWs from pursuing professional development and career advancement. These identified challenges underscore the need for comprehensive reforms in the training and credentialing system for DSWs in HCBS to meet the increasing demands of an aging population, including quality of care and support.

Working with Sexual and Gender Minority Older Adults

Best Practices Presentation

Dr. Jeffrey Lentz¹

1. Emory University

The sexual and gender minority population continues to age and is at risk for utilizing long-term care services, among other challenges. This poses an issue for long-term service administrators and staff as they are not prepared to provide inclusive quality care for sexual and gender minority older adults. In order to give quality inclusive care to older sexual and gender minority adults, long-term care administrators and staff need to have a basic understanding of terms, history, trauma, and intolerance sexual and gender minorities experienced throughout their life course. In addition, they learn how to make their communities safe, welcoming, and inclusive for sexual and gender minority older adults. This workshop will give participants an overview and best practices for working with older sexual and gender minority adults in personal care homes, assisted living communities, and nursing homes. Topics include terms, historical trauma, discrimination, prejudice, dementia, statistics, and resources to make communities safe, welcoming, and inclusive. This professional development will implore elements of an holistic approach to promote healthy aging in long-term care for SGM older adults.

“The New ‘Doctor’s Orders’: Arts on Prescription as a Healthcare Tool for Older Americans”

Professional Paper Presentation

*Dr. Sudha Shreeniwas*¹, *Ms. Shayna Gleason*², *Ms. Joy Birabwa*¹

1. UNC Greensboro, 2. University of Massachusetts Boston

A holistic approach to health and wellbeing for older adults includes arts participation of any type, distinct from art therapy. We examine whether Arts on Prescription (AoP) increases older adults’ access to and participation in arts programs and improves wellbeing, especially for marginalized and underserved groups. What funding and support mechanisms enhance access to AoP? To address these questions, we conducted (1) a scoping review of the literature, and (2) interviewed 24 key informants in countries overseas that have AoP programs and 11 counterparts in the US.

Results indicate diverse definitions of AoP within and across countries. Conditions most often referred for AoP include anxiety and depression. Benefits of AoP include access to a social network and to arts activities. Funding mechanisms are diverse with a focus on containing costs. Health practitioner visits are not separately funded. Some countries fund link workers who are the key to the system. There is almost no systemic funding for arts programs - these are covered by donations, grants, etc. Programs are not always free to patients. Questions include how long an arts prescription should run, and how to ensure ongoing access after the prescription ends.

Challenges include geographic variation in access, quality, and provider training. There is high turnover among link workers. There is a need to show program benefits to get funding, but limited funding for program evaluation. Evaluations of AoP tend to be small scale and qualitative, leading to limited quantitative evidence. The literature on underserved and marginalized groups is limited.

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