communication and speech the month prior to and during the lucid event. Pilot Study: 33 interviews with staff were conducted; 73% reported ever witnessing paradoxical lucidity. Among 29 events reported, 31% lasted several days, 20.7%, 1 day, and 24.1% less. In 78.6% the patient engaged in unexpected activity. 20% died within 3 days and 17% within 3 months after the event. Qualitative Analyses: To refine the measure, 10 family caregivers and 20 LTSS staff caregivers completed a web-based focus-group type exercise using Qualtrics XM. A content-thematic analysis with an inductive approach was applied to make qualitative inferences by analyzing the meaning and semantic relationship of words, phrases, and concepts. Using the reduction method of selection, conceptual content categories will be developed.

Session 1185 (Symposium)

ANNUAL REVIEW OF GERONTOLOGY AND GERIATRICS SYMPOSIUM: BLACK OLDER ADULTS IN THE ERA OF BLACK LIVES MATTER
Chair: Jessica Kelley
Co-Chair: Roland Thorpe, Jr.
Discussant: Linda Chatters

Our renewed urgency and engagement in a national dialogue on issues of systemic racism and racial justice provides a much-needed opportunity to expand the discourses, perspectives, and practices used in the study of aging. This symposium features contributions from the 2021 (Vol 41) Annual Review of Gerontology and Geriatrics focusing on the continued development and maturation of scholarship on the lives of older Black Americans. Building on the scholarship and research contributions of prior generations of eminent African American gerontologists, the volume asks: “What do we know about the lived experience of Black older adults and what is there still to be learned?” The contributing authors continue a tradition of research that examines the life histories and contemporary experiences of older Black adults within their relevant social and personal contexts. Symposium presenters from a range of social science fields (sociology, psychology, social work), explore aspects of physical health, stress, cognition, and social well-being in the context of intersecting social dimensions of marriage, family, gender, and neighborhood.

CANCER AND CAREGIVING AMONG OLDER BLACK AMERICANS AND FAMILIES
Katrina Ellis, University of Michigan, ANN ARBOR, Michigan, United States

Cancer disproportionately affects Black Americans and consequently, their families. In addition, cancer is often just one of the significant health concerns facing Black families at any one time. Research on family support after an adult cancer diagnosis overwhelmingly focuses on a single (i.e., primary) caregiver or spousal family caregivers, limiting understanding of the complexity of caregiving within family systems facing multiple health challenges. This presentation presents a framework for a broader focus on the role of family systems in providing cancer care, highlighting both the unique strengths and challenges facing Black families who provide care. A family comorbidity lens is used to underscore the need to better understand the nature and impact of concurrent health challenges within families. Ultimately, this perspective reflects the lived experiences of older Black adults and their families after a cancer diagnosis and has implications for future research and interventions to address health issues interdependently.

GENDER, STRESS, AND MENTAL HEALTH AMONG OLDER AFRICAN AMERICANS
Christy Erving, Vanderbilt University, Nashville, Tennessee, United States

Across studies on social stress exposure on the mental health of older African Americans, most investigate singular stress exposures (discrimination). Furthermore, this research rarely assesses gender differences in the psychological effects of specific stress exposures. I use the National Survey of American of Life to assess: (1) gendered patterns of stress exposure among older African Americans; (2) gendered nuances in the individual, collective, and cumulative effects of stress exposure on mental health. I find gender patterns of stress exposure differed by type of stressor. Women and men shared some stress predictors of mental health (everyday discrimination). Other stress predictors were specific to women (health-related mobility challenges) or to men (perceived neighborhood crime). Study findings challenge gerontologists to consider how race-gender groups are at distinct risks for stressors that elicit poor mental health and provide a call for tailored strategies for improving the psychological health of African American women and men.

MARITAL AND ROMANTIC SATISFACTION AMONG OLDER AFRICAN AMERICANS
Antonius Skipper,1 and Robert Taylor,2 1. Georgia State University, Atlanta, Georgia, United States, 2. University of Michigan, Ann Arbor, Michigan, United States

There remains a lack of knowledge on marital satisfaction of African Americans generally, but particularly older African Americans. In addition, only a handful of studies investigate satisfaction among couples who are unmarried. With data from the National Survey of American Life, this study examined the correlates of romantic and marital satisfaction among older African Americans. Findings reveal that married older African Americans were slightly more satisfied with their relationship than individuals who were either remarried or unmarried but in a romantic relationship. Among older African American married adults, older age was associated with higher marital satisfaction, and men had higher levels of marital satisfaction than women. Also, married older African Americans with lower family incomes reported higher marital satisfaction. Given the limited research on older African Americans couples, either married or unmarried, this study offers valuable implications for individuals and professionals engaging these couples in practical settings.

CONTEXTUAL CORRELATES OF COGNITIVE AGING IN BLACK OLDER ADULTS: EXAMINING THE NEIGHBORHOOD
Ketlyne Sol,1 and Tanisha Hill-Jarrrett,2 1. University of Michigan, Ann Arbor, Michigan, United States, 2. University Of South Florida Morsani College Of Medicine, Tampa, Florida, United States
Black older adults have a unique history that includes enslavement and legalized segregation. This history shapes the present-day experiences of older Blacks, in part, through the neighborhoods in which they live. The neighborhood is a reflection of both the physical and social contexts, and reflects the most natural and intimate context through which a person experiences life. Combined, the unique history and neighborhoods of Black older adults may contribute to their disproportionately experiencing impairments in cognitive function in older age. There is growing interest in how lived experiences across the life course affect cognitive trajectory and, ultimately, cognitive outcomes of older Black adults. In this presentation, we will review recent literature on psychosocial and physical contextual factors and their influence on cognitive aging in older blacks through the lens of the neighborhood.

Session 1190 (Symposium)

APPLYING PRINCIPLES OF IMPLEMENTATION SCIENCE TO AGING PROGRAMS AND POLICIES

Chair: Jaime Hughes Discussant: Nancy Morrow-Howell

Implementation science, defined by NIH as “the scientific study of the use of strategies to adopt and integrate evidence-based health interventions,” continues to grow within research, education, and practice-based settings. Building on principles from organizational psychology, intervention science, health economics, and health services research, implementation science aims to explore how, and under what conditions, evidence-based interventions are successfully implemented and sustained in real-world settings. Applying implementation science to aging programs and settings may help to accelerate the translation of effective programs and policies into practice. This interdisciplinary symposium will provide an introduction to key principles and applications of implementation science. The first three presentations will focus on largescale spread of interventions while the last two presentations will focus on broader applications of implementation science. The first two presentations will focus on adapting interventions from delivery in one setting or population to another. The third presentation will discuss the role of implementation strategies in scaling an intervention from a controlled research setting into a large integrated healthcare system. The third presentation will focus on the intersection of implementation science and policy. The final presentation will discuss the role of implementation science in alleviating health disparities and advancing health equity. Each presentation will utilize examples from ongoing research studies to demonstrate principles. The session will close with an interactive discussion on the role of implementation science within aging, including challenges and considerations for aging programs, policies, and populations as well as opportunities for further training and education.

ADAPTING NUTRITION PROGRAMMING FOR INTERGENERATIONAL IMPLEMENTATION

Shannon Jarrott,1 Rachel Scrivano,1 Jill Juris Naar,2 and Alicia Bunker,1 1. The Ohio State University, Columbus, Ohio, United States, 2. Appalachian State University, Boone, North Carolina, United States

Practitioners frequently tailor programming to meet participant characteristics and logistic constraints, or to incorporate diverse participants, such as intergenerational programming. Adapted programming may be responsive but reduce impact on outcomes. With growing interest in and limited availability of intergenerational protocol, implementation science guides program tailoring to ensure that youth and older adults mutually benefit from adapted programming. We integrated guidelines for tailoring interventions (Framework for Reporting Adaptations and Modifications-Expanded: FRAME) and evidence-based intergenerational practice. We illustrate how program fidelity can be supported in intergenerational settings using examples from an adapted USDA-approved preschool nutrition curriculum delivered intergenerationally. Program acceptability, appropriateness, and feasibility were rated favorably by program stakeholders, and observational implementation data suggest fidelity can be maintained using evidence-based intergenerational strategies. Our findings support the potential for protocol developed for one age group to benefit youth and older adults when it is adapted using implementation and intergenerational guidelines.

IMPLEMENTATION STRATEGIES FOR WIDESPREAD SCALING OF EFFECTIVE PROGRAMS INTO HEALTHCARE SYSTEMS

Jaime Hughes, Wake Forest School of Medicine, Raleigh, North Carolina, United States

Translation of effective evidence-based programs into practice is critical to promoting and preserving older adults’ function and independence. This presentation will provide an introduction to implementation strategies, defined as the “methods or techniques used to enhance the adoption, implementation, and sustainability of a clinical program or practice.” Some examples of implementation strategies include education