experiences of older individuals with meningitis and relationships with their caregivers in Kaiama Local Government area of Kwara state, Nigeria. 15 participants, 6 men and 9 women, aged 65+ years were purposively selected, and in-depth interviews were conducted. Results indicated that most of the older adults believed that the disease is caused by spiritual or supernatural forces (such as witchcrafts, demons, evil spirits among others), and the treatment and management, using orthodox medicine of it has been hampered by certain socio-cultural beliefs. Due to beliefs about contagion, older adults are mostly left on their own, with adult children occasionally visiting their parents to provide care only to return to their own homes. Also, children visit with traditional healers who perform rites of purification and give older adults concoctions to use. The study concluded that meningitis is one of the leading causes of untimely death of some older adults in the study communities and it has been worsened by some socio-cultural practices. Based on this conclusion, the study recommended massive enlightenment of the general public about best practices in the treatment and management of the disease among the older members of the study communities.

Session 2395 (Symposium)

DIVERSITY, EQUITY, AND INCLUSION IN GERONTOLOGICAL RESEARCH MENTORING AND METHODOLOGIES

Chair: Ronica Rooks Co-Chair: Chivon Mingo Discussant: Chivon Mingo

With a rapid increase in our nation’s diversity and in particular the diversity of the aging population, research focused on the well-being and quality of life for all older adults is imperative. Within GSA, The Minority Issue in Gerontology Advisory Panel is charged with providing support to the membership that ultimately will yield an increase in the quantity and quality of research related to minority aging issues. Therefore, understanding best practices for minority-focused gerontological research and gerontological education curriculum is warranted. The advancement of the field is predicated on the ability to have trained professionals with skills and competencies that effectively meet the needs of a diverse aging population. This symposium will include a presentation highlighting practical strategies for strengthening gerontology research by intentionally incorporating anti-racist methodological approaches. The second presentation will consist of recommendations on how to support, promote, and advance gerontology education in a manner that increases the diversity of those pursuing a research or an applied career in this area of study. Presenters will share an overview of the literature, findings from program implementation focus groups, and recommendations for tailoring strategies to fit your intended audience. This session will prove beneficial as we make strides to ensure that diversity, equity, and inclusion remain a core value and an inherent practice of all gerontology professionals.

THE GSA NIA R13 DIVERSITY MENTORING AND CAREER DEVELOPMENT WORKSHOP: WHAT DID WE LEARN AFTER 3 YEARS?

Patricia D’Antonio,1 Keith Whitfield,2 and Patricia Heyn,3

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The goal of the GSA NIA R13 Diversity Mentoring and Career Development Technical Assistance Workshop (GSA Diversity TAW) is to support, promote, and advance the training of diverse students in aging research. The program’s main aim is to increase the number of early career scientists who are historically underrepresented in gerontological research. Thus, from 2018 to 2020, more than 60 trainees and 16 faculty from diverse backgrounds participated in this unique gerontological training that included peer mentoring opportunities and engagements at the GSA Annual Meeting. The workshop curriculum included scientific presentations, networking, NIH grant preparation, career planning, and effective professional communication. Trainees and faculty were involved in the evaluation of the workshop, which included electronic surveys and focus groups that informed the design and curriculum of subsequent workshops. This paper will discuss the curricular design and objectives of the GSA Diversity TAW and present a summary of the trainees’ feedback results about the program and the iterative changes made based on that data.

STRENGTHENING ANTI-RACIST GERONTOLOGY RESEARCH: DOES ONE SIZE FIT ALL?

Lyn Holley, University of Nebraska at Omaha, Omaha, Nebraska, United States

This paper is based on a scoping review and conceptual analysis of research literature about incorporating anti-racism into social science research practices. In his examination of how anti-racist research can effectively borrow key concepts such as “validation and “reliability” from traditional social science research, Denzyl concludes that these concepts must be reconsidered to address the main issues of anti-racism. (2005). A further critique of these concepts is that they do not account for differences among racism as it is applied to different minoritized groups. Public Health Nurses and other practitioners have long recognized the importance of understanding and taking these differences into account in their “culturally competent” practice. (Lipscomb, Culture Care) Although there is some literature about de-centering whiteness in research (e.g., https://libguides.umn.edu/antiracism ), little is available to guide research that acknowledges and addresses overlapping yet differing contours of racism as experienced by different “races”, e.g., Black-Americans, Native American Indians".

Session 2400 (Paper)

DIVERSITY, RACIAL MINORITIES, AND AGING I

AGE-FRIENDLY AS TRANQUILLO AMBIENTE: HOW SOCIO-CULTURAL PERSPECTIVES SHAPE OLDER LATINOS’ LIVED ENVIRONMENT

Melanie Plasencia, University of California, Berkeley, Albany, California, United States

Researchers have increasingly considered the importance of age-friendly communities to improve the health and well-being of older adults. Studies have primarily focused
on the built environment, such as community infrastructure, older adult behavior, and environmental expectations. Less attention, however, has been given to the role of cultural characteristics in shaping perceptions of age-friendly environments for Latinos. Using an ethnographic methodological approach, including participant observation in a Latino community near New York City and 72 semi-structured interviews, this study provides empirical insights into how older Latinos characterize age-friendly communities. Latino older adults described their community as age-friendly using Tranquilo Ambiente (TA), which translates to a calm or peaceful environment. According to older adults, a TA possesses the following: 1) a sense of personal safety, including protection of their body, 2) ethnic, social connectedness, including networks with other Latinos and important social and cultural events; and 3) a comparative understanding of their communities treatment of seniors versus other geographical and spatial locations. While much has been written on the role of the built and social environment in developing and implementing age-friendly communities, more research on the cultural significance and understanding of place among marginalized older adults is necessary. TA and its characteristics demonstrate that cultivating an age-friendly setting requires adapting structures and services to promote Latino older adults' social and cultural support and engagement.

AGING OUT OF PLACE: FACTORS RELATED TO QUALITY OF LIFE AMONG OLDER REFUGEES IN THE UNITED STATES

Jonix Owino, and Heather Fuller, North Dakota State University, Horace, North Dakota, United States, 2, North Dakota State University, Fargo, North Dakota, United States

Refugees flee their home countries, migrating to countries such as the US for safety. The psychological distress they experience may compromise their adaptation and well-being. However, little is known about quality of life among aging refugees who migrate to the US as adults, and in particular whether quality of life varies among refugees by sociodemographic factors such as age, sex, origin, and length of residence. Moreover, limited research exists examining the role of social connectedness for aging refugees' quality of life. The current study explores sociodemographic and social connection factors associated with quality of life among aging refugees (N = 108; aged 50+). Refugees from Bhutan, Burundi, and Somalia were recruited from a Midwestern small city to complete an in-depth survey assessing social factors and well-being. Hierarchical regression analyses showed that females, older individuals, and African refugees reported lower quality of life, while length of residence was not associated with quality of life. When controlling for sociodemographic factors, greater social integration and lower loneliness were significantly associated with higher quality of life. There was also a significant interaction between loneliness and sex in predicting quality of life, indicating that greater loneliness was associated with reduced quality of life for women but not men. Study findings will be discussed in light of cultural variations within refugee groups and with the goal of highlighting ways to best support aging refugees' well-being and develop social programs that can effectively cater to issues of aging among refugees.

IMPACT OF A PHARMACIST-LED DIABETES MANAGEMENT INTERVENTION TO IMPROVE HEALTH EQUITY

Renae Smith-Ray, Tanya Singh, Evie Makris, Jaime Horan, and Michael Taite, Walgreens Co., Deerfield, Illinois, United States, 2, Walgreens Co., Deerfield, Illinois, United States, 3, Walgreens, Deerfield, Illinois, United States

The COVID-19 pandemic and Black Lives Matter movement brought increased recognition to the need for health equity. Diabetes, the 7th leading cause of death, is one of many conditions where health inequities are evident. A higher percentage of Black (11.7%) and Hispanic (12.5%) U.S. adults are diagnosed with diabetes compared to non-Hispanic Whites (7.5%). To address this health inequity, a nationwide pharmacy chain implemented telephonic 'Advanced Care' (AC) outreach for patients with diabetes. During the AC call, pharmacists used motivational interviewing techniques to counsel patients on the importance of closing gaps in care and reducing barriers to medication adherence. Gaps included timely A1C testing, exams (eye, foot, kidney), immunizations (influenza, pneumonia, Hepatitis B), and recommendation of additional therapies for patients with multiple chronic conditions (ACE/ARB, statins). Medication fill gaps were compared between the Intervention period (8/1/20-1/31/21) and a pre-intervention period (2/1/20-7/31/20). The AC pilot occurred in 8 Chicago Walgreens locations that primarily serve Black and Hispanic patients. Eight control stores were matched on census block-level household income and race/ethnicity, patient volume, and insurance mix. A pre/post-test vs. control difference-in-difference (DID) analysis was conducted to compare on-time refill rates. Of the 1,009 older patients (age>50) called, 59.9% were reached. The DID analysis showed that patients in pilot stores had improved pre-post on-time refill rates compared to controls (p<0.0001). Diabetes self-management is key to reducing diabetes-related complications. Early findings from this pilot demonstrate that the Walgreens AC intervention improves medication adherence - an important step toward improving health equity.

INSTRUMENTAL ACTIVITIES OF DAILY LIVING DIFFICULTIES PREDICT COGNITIVE DECLINE IN OLDER PUERTO RICAN ADULTS

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Given the hypothesized bidirectional association between functional and cognitive decline, further characterization of the temporal association between the two is needed, especially in Latinx samples as they are the most rapidly growing demographic in the United States and at greater risk for Alzheimer’s disease. This study assessed bidirectional associations between instrumental activities of daily living (IADL) difficulty and cognition in older Puerto Rican adults. Participants included 2,840 community-dwelling adults (60+ years) without cognitive impairment who completed...