GRASSROOTS APPROACHES TO COMMUNITY-BASED REPRESENTATIVE RECRUITMENT IN MULTIDOMAIN TRIALS
Marcus Hill, Division of Gerontology and Geriatric Medicine, Winston-Salem, North Carolina, United States

U.S. POINTER is a randomized, controlled, multidomain clinical trial to slow the progression of cognitive decline within the American population via tailored and culturally-appropriate healthy lifestyle interventions. For findings to be broadly relevant across the American population, incorporating an inclusive and robust recruitment effort has been essential to form a diverse and properly representative participant cohort. As such, the trial’s inclusive enrollment goal is 30% from traditionally underrepresented communities that include those at elevated risk for Alzheimer’s disease and related disorders. To accomplish this goal, U.S. POINTER developed and deployed a grassroots recruitment strategy in partnership with outreach specialists at each site that includes a mix of evidence-based and innovative community engagement approaches. While the COVID-19 pandemic continues to present unique challenges for recruitment, our team has been able to strategize ways to continue working within the community to support trial recruitment. An overview of these methods will be presented.

HARMONIZING DATA COLLECTION AND ANALYSIS IN WORLDWIDE FINGERS TRIALS
Markku Peltonen, Population Health Unit, Helsinki, Uusimaa, Finland

One of the goals of the World-Wide FINGERS (WW-FINGERS): A Global Approach to Dementia Prevention network is to prospectively facilitate data sharing and joint analyses across clinical trials on prevention of cognitive impairment and dementia. The aim with prospectively harmonizing studies in different countries and settings regarding interventions, outcomes, measurements, data collection, and establishing best practices for responsible data sharing and access to data for remote joint analyses, is to increase the use of clinical trial data. By utilizing federated database systems which connect multiple autonomous, decentralized databases and enables data-analyses to be conducted without individual level data being transferred, could be a feasible and acceptable technical solution for countries around the world, given wide variations in data protection and sharing regulations. Ultimately, prospectively harmonizing clinical studies and establishing a culture of harmonization and sharing, will promote international joint initiatives to identify globally implementable and effective preventive strategies.

MAINTAINING INTEGRITY OF WORLDWIDE FINGER CLINICAL TRIALS DURING THE COVID-19 PANDEMIC
Susanne Roehr, Institute of Social Medicine, Occupational Health and Public Health (ISAP), Leipzig, Sachsen, Germany

The COVID-19 pandemic presents challenges to the conduct of randomized clinical trials of lifestyle interventions. World-Wide FINGERS international network convened a forum for researchers to discuss statistical design and analysis issues they faced during the pandemic. We report experiences of three trials that, at various stages of conduct, altered designs and analysis plans to navigate these issues. We provide recommendations for future trials to consider as they develop and launch behavioral intervention trials. The pandemic led researchers to change recruitment plans, interrupt timelines for assessments and intervention delivery, and move to remote intervention and assessments protocols. The necessity of these changes add emphasis to the importance, in study design and analysis, of intention to treat approaches, flexibility, within site stratification, interim power projections, and sensitivity analyses. Robust approaches to study design and analysis are critical to negotiate issues related to the intervention.

Session 1265 (Symposium)

INTEGRATING HUMANITIES AND ARTS INTO GERONTOLOGY AND GERIATRICS CURRICULA
Chair: Desmond O’Neill Co-Chair: Dana Bradley
Discussant: James Powers

Humanities, Arts and Cultural Gerontology (HACG) has been an integral element of GSA for over 4 decades, and is included as a notable feature of AGHE guidelines on curricula for gerontology and geriatrics. However, as with many interdisciplinary areas, the degree to which HACG has been successfully inserted into curricula, the extent to which this has involved engagement of faculty in arts and humanities, and the facilitators and barriers of such deeper joint working are unknown. The HACG Advisory Panel and AGHE would like to convene a round-table/symposium at the 2021 Phoenix GSA Meeting to consider the range of experiences of educators of programs in gerontology/geriatrics, from those who can relate success stories in integrating HACG into their curricula, to those who can give insights into challenges and opportunities in attempts to develop such elements in their curricula. Co-convened by Des O’Neill, Chair HACG AP and Dana Burr Bradley AGHE Program Chair, we invite lively discussion which we consider will aid in the development of a road map towards substantive and rewarding initiatives in incorporating scholarship and education in HACG in gerontology and geriatrics educational program.

A DECADE OF TEACHING THE COURSE AGING & THE ARTS: REFLECTING ON OPPORTUNITIES AND CHALLENGES
Jacqueline Eaton, University of Utah, University of Utah, Utah, United States

In 2010, the University of Utah Gerontology Interdisciplinary Program first offered GERON 5240/6240: Aging and the Arts. This course was developed to enrich program curricula by addressing a gap in content specific to the arts and humanities. The purpose of this presentation is to focus on identifying the opportunities and challenges experienced teaching this course over the past decade. Opportunities will highlight competency mapping, internal and external partnerships, the benefits of bridging disciplines, and innovation in teaching and problem-solving. Challenges experienced include addressing various needs.
The role of Humanities, Arts and Cultural Gerontology in gerontology and geriatrics curricula finds a metaphor in the rapidly evolving field of medical and health humanities, with which this author has been involved for three decades. Behind the call for increasing humanities and arts scholarship in the pedagogy of both fields lies the challenge of establishing an interdisciplinary nexus of scholarship that avoids the challenges of dilettantism and gestures such as providing lists of novels and movies. This presentation draws on the presenter’s bibliometric research in the medical and health humanities which indicates authorship in the majority to be either solely from the humanities or from healthcare, with little indication of joint working in either authorship or acknowledgements (the scholar’s courtesy), and explores the background issues of academic culture with a view to proposing solutions to elevate the inclusion of humanities and arts as a significant element of gerontology education.

Session 1270 (Paper)

LONG-TERM CARE I (BSS PAPER)

FACTORS ASSOCIATED WITH THE QUALITY OF STAFF-RESIDENT INTERACTIONS IN ASSISTED LIVING

Anju Paudel,1 Elizabeth Galik,2 Barbara Resnick,3 Kelly Doran,3 Marie Boltz,4 and Shijun Zhu,2 1. University of Maryland, University of Marland, Maryland, United States, 2. University of Maryland, Baltimore, Maryland, United States, 3. University of Maryland School of Nursing, Baltimore, Maryland, United States, 4. Pennsylvania State University, University Park, Pennsylvania, United States

Care interactions are essential to understand and respond to resident needs in assisted living (AL). The factors that influence care interactions in AL have not been directly examined. In this study, we explored the factors associated with the quality of care interactions in AL. It was hypothesized that resident functional status, agitation, depression, and resistiveness to care as well as facility size and ownership would be significantly associated with the quality of care interactions in AL after controlling for resident demographics (age, gender, marital status), comorbidities, and cognition. To test the hypothesis, we utilized baseline data including 379 residents from the second and third cohorts recruited in a randomized trial titled ‘Dissemination and Implementation of Function Focused Care for Assisted Living Using the Evidence Integration Triangle’. Regression analysis was performed using a stepwise method. The care interactions were mostly positive (mean=6.3; range = 0-7). Resident agitation and facility ownership were significantly associated with care interactions and accounted for 8.2% of the variance. Increased resident agitation was associated with negative or neutral interaction while for-profit ownership was associated with positive interactions. To promote positive care interactions, staff should be educated about strategies to minimize resident agitation (e.g., calm posture and respectful listening) and encouraged to engage with residents using resident-centered care and communication approach. Findings also suggest the need to work towards optimizing care interactions in

INTERDISCIPLINARY GERONTOLOGY IN HIGHER EDUCATION: A CASE STUDY FROM SOUP TO NUTS

Justine McGovern, Lehman College, City University of New York, Bronx, New York, United States

Through the lens of a multi-year joint project initiated by faculty in Social Work and Digital Arts at Lehman College, the City University of New York’s senior college in the Bronx, NY, this paper provides a guide on how to initiate, implement and evaluate interdisciplinary collaborations in gerontology. The paper also suggests ways to ensure that these collaborations can support tenure and promotion processes, funding initiatives, and pedagogical enhancements. The paper focuses on how to make use of campus resources, including departmental Chairs, research offices, and campus-wide committees to identify appropriate collaborators and funding sources; how to nurture productive interdisciplinary relationships, such as clarifying disciplinary expectations and participants’ professional needs; and how to maximize return on the effort for tenure and promotion, such as producing publishable content, identifying appropriate opportunities for interdisciplinary publishing and presenting, advocating for interdisciplinary collaborations, and developing interdisciplinary syllabi, an example of evidence-based high-impact pedagogy.

COMING SOON TO A CLASS NEAR YOU: CINEMATIC INSIGHTS ON LATER LIFE

Candace Brown,1 and Margaret Perkinson,2 1. University of North Carolina, Charlotte, Charlotte, North Carolina, United States, 2. University of Hawaii at Manoa, Honolulu, Hawaii, United States

Cinema can enhance gerontological education by reinforcing a variety of learning styles, connecting course content to current culture, and providing an alternative, tangible view of what students are learning. The presenters discuss their use of film to teach gerontological concepts in the classroom. In an Introduction to Aging course, the films, “Young at Heart” and “Sunset Story” were used to break through ageist stereotypes, examine examples of resilience at the end of life, and convey the impact of residential context on the experience of aging, i.e., within a retirement home “retired rebels.” In a course on Health and Aging, movies such as “Red,” “Driving Miss Daisy,” and “Somethings Gotta Give” are used to compare the social and psychological aspects of aging of the characters to learned concepts in the classroom. Students expressed how watching and writing about the films increased their understanding by bringing abstract gerontological concepts to life.

LESSONS FOR HUMANITIES AND ARTS IN GERONTOLOGY AND GERIATRICS CURricula FROM THE MEDICAL AND HEALTH HUMANITIES

Desmond O’Neill, Trinity College Dublin, Dublin, Dublin, Ireland

(online learning, undergraduate and graduate levels, multiple disciplines), tuition differentials, and varying levels of enrollment. A stand-alone course is one method of increasing humanities, arts, and cultural gerontology within curricula. It has the potential of enhancing student interest in gerontology while also demonstrating how the arts and humanities can improve work across disciplines.

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