social support were family/friends, clinicians/formal services, community/culture, and spiritual/God. Most of the support was instrumental in nature, including food shopping, meal preparation, and medication management. Social support had both positive and negative influences diabetes management while there were some participants who lacked support. The four main social support types were present, including instrumental, emotional, informational, appraisal support. Value orientations among American Indian families command lateral-group relational behavior rather than autonomy and independence with extended social systems fostering interdependence. A deeper understanding is needed of how social relationships can be better leveraged to aid in the effective diabetes management among older American Indians.

ALASKA NATIVE ELDER-CENTERED RESEARCH METHODOLOGY
Maria Crouch,1 Jordan Lewis,2 and Rosellen Rosich,1 1. Yale School of Medicine Substance Abuse Treatment Unit & The Consultation Center, Yale University, New Haven, Connecticut, United States, 2. Memory Keepers Medical Discovery Team/University of Minnesota Medical School, Duluth campus, Duluth, Minnesota, United States, 3. University of Alaska Anchorage, Anchorage, Alaska, United States

Alaska Native (AN) Elders have historically been underrepresented in research. Innovative AN research posits that practice-based evidence is fundamental to culturally grounded, multifaceted methods. AN Elders is a cultural convention distinguishing Elders who continue to serve as an integral part of their family and community and recognized by their community as role models. Several studies will be discussed which employed Elders at every level of the research, ensuring cultural relevancy, outcomes, and dissemination activities. The findings lay the foundation for an Elder-centered research methodology that can be adapted and applied in other studies to encourage engagement of older adults. This methodology has potential to impact research for underrepresented groups and to rethink and reshape Western-centric practices. Findings from this research provide best practices for capacity building and sustainability, strategies for empowerment and prevention, and a framework for supporting the AN community in all phases of research.

CULTURAL CONTINUITY IN A RESERVATION NURSING HOME
Pamela Monaghan-Geernaert, Northern State University, Aberdeen, South Dakota, United States

Throughout our lifespan we experience the culture of our families and communities. Our cultural selves guide our understanding of health and illness. However the health care system often ignores our culture in the delivery of care. This can have devastating effects on individuals and particularly the elderly. This presentation reviews a case study of a tribally owned and operated nursing home. The emphasis on maintaining cultural activities, feasting on traditional foods, offering sacred practices led to high satisfaction of the health care experience by residents and staff. Creating this environment was difficult and barriers in culturally responsive care delivery will also be discussed.

COMMUNITY-BASED PARTICIPATORY RESEARCH ON DIET AND ACTIVITY WITH AN INDIGENOUS PUEBLO COMMUNITY
Karen Koper-Frye, University of New Mexico, Las Cruces, New Mexico, United States

Tribal Critical Race Theory (Brayboy, 2005) supports the use of decolonizing methodologies such as Community-Based Participatory Research when collaborating with Indigenous communities. This paper highlights the underlying processes in working with a Pueblo community on an intergenerational health project. Indigenous participants included 16 Piro Pueblo individuals who collaborated on a project examining healthy diets and activity in their community. The project involved providing information on the importance of activity and healthy eating of traditional foods to promote healthy living. Thematic analysis of open-ended questions exploring the role of culture in food and activity yielded important themes of gathering, resilience, history, honoring ancestors at mealtime, cultural ways, and activities such as dancing and drumming. The results suggest that projects addressing diet and activity collaborate to ensure cultural values, e.g., connectedness, cultural ways, e.g., gathering, dancing, and Indigenous knowledge are represented in the project and viewed through an Indigenous lens.

CPBR PROCESS IN URBAN SETTINGS AND THE UNIQUE CHALLENGES AND SUCCESSES
Steffi Kim, University of Alaska Anchorage, Anchorage, Alaska, United States

CBPR is a framework that allows for the collaboration of researchers and communities as co-partners and is a supported approach for Indigenous communities. The community engagement and co-partnership in this study allowed for the researcher’s flexibility to be responsive to culturally appropriate practices and priorities of the communities and participants. CBPR principles, including the Elder Advisory Committee (EAC), were utilized in this urban-based project. Challenges presented in many ways, including the processes of a) entering communities, b) relationship building, c) time involvement, and d) recruitment. Successes represented the unique opportunity to enter communities at an interpersonal level, b) close community engagement, c) gathering information beneficial for the research team and the community, and d) extended community engagement. While challenges exist, this approach’s benefits are far-reaching promoting trust, support, and interest in future research endeavors. The presenter will discuss strategies and processes helpful in engagement, recruitment, and data collection.

Session 2385 (Symposium)

CREATIVE ARTS-BASED APPROACHES TO IMPROVE THE WELL-BEING OF OLDER ADULTS
Chair: Darina Petrovsky Discussant: Justine Sefcik

As older adults age they may face cognitive impairment, disruption in their sleep, and a decrease in mood and overall well-being. Given the negative consequences of the COVID-19 pandemic, they may experience a disruption in their access to health care services. Creative arts-based approaches have shown promise in improving the well-being...
of older adults and may be helpful in augmenting health care services. In this symposium, we will present research results of creative arts-based interventions aimed at improving the well-being of older adults, including those with dementia. We will also discuss ways to successfully engage with organizations that serve older adults using arts-based interventions. The first presentation will focus on the results from a feasibility randomized controlled trial examining the effects of a tailored music listening intervention on sleep outcomes in older adults living with dementia and their caregivers. The second presentation will report findings from the Mason Music & Memory Initiative aiming to improve mood and behavioral outcomes in persons living with dementia in nursing homes. The third presentation will focus on the preliminary results of a pilot study that integrated the delivery of music therapy telehealth with remote social work support and service linkage for rural older adults from low-income areas. The fourth presentation will report findings from the capacity-building program for teaching artists, health/aging organizations, and arts organizations committed to strengthening Creative Aging efforts through research. Implications for future research and creative arts-based intervention development for older adults will be discussed.

TAILORED MUSIC LISTENING TO IMPROVE SLEEP IN OLDER ADULTS WITH DEMENTIA: A RANDOMIZED CLINICAL TRIAL

Nalaka Gooneratne,1 Joke Bradt,2 Miranda Varrasse McPhillips,3 Ime Etokebe,3 Laura Gitlin,4 Nancy Hodgson,2 and Darina Petrovsky6

1. University of Pennsylvania School of Medicine, Philadelphia, Pennsylvania, United States, 2. Drexel University, Philadelphia, Pennsylvania, United States, 3. University of Pennsylvania, Philadelphia, Pennsylvania, United States, 4. Drexel University, College of Nursing and Health Professions, Drexel University, Pennsylvania, United States, 5. University of Pennsylvania, School of Nursing, Philadelphia, Pennsylvania, United States, 6. Rutgers University, Philadelphia, Pennsylvania, United States

Sleep disturbances in persons living with dementia (PLWD) contribute to reduced well-being. Music has shown promise to improve sleep among older adults, but there is limited evidence of music interventions improving sleep specifically in PLWD. The purpose of this wait-list RCT was to examine the i) feasibility; ii) acceptability and iii) preliminary efficacy of tailored music listening intervention in community-dwelling PLWD and their caregivers (dyads). Thirty consented dyads out of 33 (91%) completed the RCT. Tailored music for sleep was based on screening (26%), enrollment (89%), and recruitment (3 dyads/month) rates. The intervention was found acceptable, as evidenced by post-intervention interviews. Compared to controls, PLWD in the intervention group reported greater global sleep quality improvement post-intervention (PSQI mean change -0.08 vs -1.65; p=0.06). The results from this feasibility RCT have informed the development of a music mobile application that will be tested in a future clinical trial.

IMPLEMENTING A PERSONALIZED MUSIC INTERVENTION FOR PERSONS LIVING WITH DEMENTIA IN NURSING FACILITIES

Meng-Hao Li,1 Emily Ihara,2 Catherine Tompkins,2 Christi Clark,3 Shannon Layman,2 and Megumi Inoue,2

1. George Mason University, Arlington, Virginia, United States, 2. George Mason University, Fairfax, Virginia, United States, 3. Harpeth Consultant Advisory Group, Franklin, Tennessee, United States

The Mason Music & Memory Initiative (M3I) team has implemented a personalized music intervention in nursing facilities across Virginia aiming to improve behavioral and psychological symptoms of persons living with dementia. This person-centered intervention uses a unique music playlist comprising songs, artists, and preferred musical genres. The preliminary findings from a randomized controlled trial will be reported, the purpose of which was to examine the intervention impact on nursing home residents’ mood and behavior. Based on the findings from 16 facilities with 158 residents who have completed the study, both quantitative and qualitative data indicate the positive effects on residents, including improved sleep and mood, as well as reduced agitation. The challenges in implementing intervention research in nursing facilities during the COVID-19 pandemic and the principles of telehealth and virtual support for facilities that were used to address those challenges will also be discussed.

Session 2390 (Paper)

DISASTERS AND AGING

CHALLENGES AND STRATEGIES TO MAINTAIN FIDELITY TO THE MIRROR-TCM INTERVENTION DURING THE COVID-19 PANDEMIC

Mary Naylor,1 Karen Hirschman,1 Brianna Morgan,1 Molly McHugh,1 Elizabeth Shaid,1 Kathleen McCauley,1 Christina Whitehouse,2 and Mark Pauly,1 1. University of Pennsylvania, Philadelphia, Pennsylvania, United States, 2. Villanova University, Villanova University, Pennsylvania, United States

Randomized clinical trials (RCTs) have demonstrated that the multicomponent Transitional Care Model (TCM), an advanced practice registered nurse-led, team-based, care management strategy improves outcomes for older adults transitioning from hospital to home. However, healthcare systems’ adoption of the model has been limited. A multi-system, replication RCT (MIRROR-TCM) enrolling older adults hospitalized with heart failure, chronic obstructive pulmonary disease or pneumonia began in February 2020 just as the outbreak of COVID-19 in the U.S. dramatically changed the healthcare and research landscape. The goal of this qualitative descriptive study is to explore the impact of COVID-19 on fidelity to the TCM intervention during this clinical trial. Using directed content analysis, recorded monthly meetings with health system leaders and staff were coded to identify challenges and strategies to maintaining fidelity to the intervention in the context of the pandemic. Analyses showed that COVID-19 impacted all 10 TCM components. The components with the most challenges were delivering services from hospital-to-home due to quarantining, restrictive facility policies, lack of personal protective equipment and limited telehealth availability; coordinating care due reduced availability of services, and screening at risk individuals because of fewer eligible patients. Strategies for addressing challenges included: exploring alternatives (e.g., increasing reliance on telehealth, expanding study eligibility), building and