well-being at an older age. This understanding is comprehensive and relevant for all older persons. Despite the global attention being given to healthy ageing, there is limited information on the perceptions of this concept among older persons in low resource settings like Nigeria, hence the need for this study. Methods: In-depth interviews were conducted among older persons aged 60 years and above residing in Idikan Community, an urban slum area in Ibadan, Nigeria. Using an interview guide, perceptions of older persons on meanings of healthy ageing, factors related to healthy ageing and experience of ageing were explored. Results: A total number of 24 interviews were conducted. Slightly more than half of the respondents were females. The majority of the respondents were of the opinion that healthy ageing is about being “strong” and able to move around, without being dependent on anyone for mobility and activities of daily living. In their opinion, healthy ageing is related to different health dimensions: biological (adoption of healthy habits and behaviors with self-responsibility, psychological (feelings of optimism and happiness), spiritual (faith and religiosity) and family and social support (healthy and well children, friends and family). Conclusion: Urban Community dwelling older persons’ perception of healthy ageing was positive and incorporating their opinions on healthy ageing from the perspective of the older persons can support the activities of professionals who work with this population group.

REDUCING ASPIRATION PNEUMONIA RISK FOR OLDER PEOPLE: EFFECT OF EVIDENCE-BASED ORAL CARE
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Poor oral health increases the risk of aspiration pneumonia for older people. This is due primarily to six pathogens found in the mouth: five bacteria and one fungus. With a cohort of older people who were dependent on others for their oral care, we analyzed the load and type of bacteria and fungi from swabs of cheek, gum, and tongue mucosa. There were no significant differences between the three sites for load of bacteria (H (2) = .89; p = .64); there were significant differences between the sites for type of bacteria (F (2,78) = 11.97; p < .001) with the tongue showing the greatest diversity. There were no significant differences between the three sites for load (H (2) = 2.94; p = .23) or type (F (2,77) = .46; p = .63) of fungi. We then investigated the effect of regular compared to evidence-based oral care over a six-week period, and whether evidence-based oral care could significantly reduce the absolute count of the six oral pathogens specifically related to aspiration pneumonia. Participants self-selected into Regular Care (n = 10) and Evidence-based Care (n = 17) Groups. Evidence-based oral care resulted in significant decreases (p = .02 to p < .001) in the load of four potentially pathogenic bacterial species, including E. coli, gut-based bacteria, and in an increased load of Lactobacillus reuteri, a host-protective normal flora in the mouth, compared to baseline. There were no significant differences between groups for the abundance and type of fungi.

USING IMPLEMENTATION SCIENCE STRATEGY MAPPING ON THE AGE-FRIENDLY HEALTH SYSTEM'S 4MS JOURNEY
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Background: Implementation science is the study of methods to promote the adoption and integration of evidence-based practices into routine health care to improve the quality of care. The purpose of this study was to use Implementation Mapping to guide the implementation of The John A. Hartford evidence-based Age-Friendly Health Systems (AFHS) 4Ms Framework: What Matters, Medications, Mentation, and Mobility. Methods: Implementation Mapping, a systematic process for planning implementation strategies, guided the 9-month integration of the 4Ms Framework in the 1,100 MinuteClinics across the US. Implementation Mapping includes five tasks: (1) conduct an implementation needs assessment and identify program adopters and implementers; (2) state adoption and implementation outcomes and performance objectives, identify determinants, and create matrices of change objectives; (3) choose theoretical methods (mechanisms of change) and select or design implementation strategies; (4) produce implementation protocols and materials; and (5) evaluate implementation outcomes. Results: The implementation plan, developed by the implementation mapping method, was carried out over 9-months. Seven implementation strategies were identified from the Expert Recommendations for Implementing Change (ERIC) project including the provision of education, electronic health record integration, internal champion facilitation, cues to action, and a dashboard to monitor progress. To date, the implementation mapping has resulted in the adoption of the 4Ms by 1145 providers (37%). Monitoring of the adoption of the 4Ms Framework and consideration of future implementation strategies is ongoing. Conclusions: Implementation Mapping provided a systematic process to develop strategies to improve the adoption, implementation, sustainment, and scale-up of the evidence-based 4Ms Framework.

Session 3410 (Paper)

Intergenerational Teaching, Learning, and Engagement

EFFECTIVENESS OF AN INTERGENERATIONAL SERVICE-LEARNING PROGRAM TO CHANGE ATTITUDES ON AGING
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This study evaluated the efficacy of a 10-hour intergenerational service-learning program administered to
undergraduates to determine if it would increase knowledge about aging, improve attitudes about older adults, and reduce ageism more than a course with less service-learning activity. Making maximum impact on students in these areas in a short amount of time is particularly relevant in short, quarter-based university programs. A quasi-experimental design using a convenience sample compared pre-test and post-test scores between an experimental intervention (N=68) and a comparison (N=71) group on The Facts on Aging Quiz Multiple Choice version, Aging Semantic Differential, and Fabroni Scale on Ageism. Qualitative data via open-ended survey questions was also collected. The experimental intervention, the Lives Well Lived project, was based on a documentary film by the same name, which incorporates themes of successful aging. During the project students and older adults interviewed one another about living a life well lived, participated in a photo shoot, and created a Memoir for the older adult. The comparison group included two social visits to a congregate meal program. Results from multiple regression analysis showed that students in the intervention group had less ageist stereotypes and less negative bias about aging at post-test and qualitative data indicated they were more inclined to participate in intergenerational relationships in the future. Programs like this one that are longer and more relational may be useful for consideration in undergraduate gerontology courses in reducing ageism and promoting intergenerational relationships which benefit those of all ages.

FACULTY PERCEPTIONS OF ENGAGING OLDER ADULTS IN HIGHER EDUCATION: THE NEED FOR INTERGENERATIONAL PEDAGOGY

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Institutions of higher education need to become more age friendly. Creating an on-campus lifelong learning program can offer older adults opportunities to audit classes and engage in multigenerational classrooms, but can also promote intergenerational learning when instructors consciously use pedagogy that fosters engagement between learners from various generations. Promoting intergenerational learning to facilitate reciprocal sharing of expertise between generations is also the fourth principle of the Age Friendly University framework. This qualitative interview study examines the perspectives of 27 faculty members who have opened their face to face classrooms to older adult auditors to 1) Explore perceived benefits and challenges associated with having older adults in the college classroom and to 2) Determine what levels of intergenerational learning may be taking place. Compared to lecture-based courses, faculty whose pedagogy promotes discussion, sharing, and small group work reported detailed examples of older adult learners and traditionally-aged college students engaging in course-related discussion. The unique, historical and diverse perspectives of older adults improved the quality of education for students, and fostered in-depth learning. Challenges related to older adult auditors included poor/limited attendance, sharing of strong opinions/dominating class discussion, sensory/mobility and technology accessibility. Recommendations include training to promote intergenerational engagement in college classrooms.

GOVERNMENT AND UNIVERSITY PARTNER FOR VIRTUAL SERVICE-LEARNING TO SUPPORT INTERGENERATIONAL SOCIAL INTERACTION

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Pre-pandemic, evidence existed that intergenerational service-learning programs support knowledge of aging and positive attitudes and perceptions (Monahan et al., 2020). As spring 2020 COVID-19 lockdowns and public health warnings urged physical distancing of community dwelling older adults, growing concern about the unintended consequences of increased social isolation on mental and physical health prompted the Secretary’s Office of Pennsylvania Department of Aging to design a pilot project with university faculty for virtual intergenerational social interaction. The Department identified older adults at the highest risk for social isolation (live alone, in poverty, with a disability). The resulting pilot project is fully integrated as a high impact practice into eight sections of recreational therapy and gerontology courses with participation by 210 undergraduate students and 210 older adults for 9 weeks of both the fall and spring semesters. Students, who received extensive classroom instruction aimed at avoiding negative stereotypes of older adults as helpless and dependent, called their assigned partner several times a week for at least an hour of communication. Using the UCLA loneliness scale, community-dwelling older adults reported frustration with isolation due to the pandemic. Those with low and moderate loneliness reported positive feelings about program and looking forward to interactions with students. Students gained virtual communication skills that may contribute to telehealth competencies, intervention skills such as assessment, life review/reminiscence, mindfulness techniques, and leisure education. Moreover, an analysis of student reflections revealed positive changes in attitudes toward older adults and the ability to enjoy common interests despite age differences.

PROMOTING INTERGENERATIONAL ENGAGEMENT WITHIN THE COLLEGE CLASSROOM: FACULTY TRAINING NEEDS

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As population aging accelerates worldwide, institutions of higher education are increasing efforts to focus on ways to meet the growing needs of older adult learners. Many institutions are addressing these needs by joining the Age-Friendly University (AFU) Global Network. Affiliated institutions are required to promote intergenerational learning to facilitate the reciprocal sharing of expertise between learners of all ages, including older adults. However, these institutions will need to provide instructors with the training to ensure that intergenerational engagement is being actively fostered in the classrooms. In this study, we examine the perspectives of faculty members who have opened their classrooms to older adult auditors. The research question was: