older adults who are obese enrolled in the 13-month Mobility and Vitality Lifestyle Program (mean±SD age 68.8±4.2 years, 83.5% female, 26.6% African American, body mass index 34.6±4.3 kg/m2). Accelerometer-assessed PA (mean/day vector magnitude) was measured with a wrist-worn triaxial GT3X+ ActiGraph for 7 full days. Perceived physical fatigability was measured using the 10-item self-administered Pittsburgh Fatigability Scale (PFS, 0-50; lower score = less fatigability). Baseline PFS was 18.7±8.5 with 69.6% having higher fatigability (PFS ≥15). At 13-months, PFS decreased by 15% (2.8 points) to 15.9±8.4 (p<0.01) and prevalence of higher fatigability declined to 60.8%. Concurrently, participants lost 6.2% of their body weight and PA increased by 2.4%. A lifestyle intervention may be effective at reducing fatigability, an important component in the age-related disablement pathway.

QUALITY OF DIET AMONG COMMUNITY-DWELLING ELDERS PARTICIPATING IN THE MOBILITY AND VITALITY LIFESTYLE PROGRAM
Jessica Cheng, University of Pittsburgh, Pittsburgh, Pennsylvania, United States

Dietary choices play an important role in disease prevention both through its effect on weight and independent of it. Improving diet can be an effective means of disease prevention among older adults. Participants (n=303) were recruited from the Allegheny County, PA area and received nutritional education in group sessions led by trained community health workers over one year. Diet quality was captured at baseline and final endpoint (either 9 or 13 months) using the Rate Your Plate (RYP) instrument for assessing healthfulness of diet and includes 24 items that can be summed to generate a total quality score. The mean RYP diet quality score improved from baseline (RYP=50.87) to endpoint (RYP=54.85) (p<.001). Over the course of the intervention, 30.9% of participants made enough improvement in diet to move to a better RYP category. A community-based group intervention for older adults was effective in inducing improvements in diet quality.

IMPLEMENTATION OF MOVE UP AND EFFECT ON OUTCOMES
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The MOVE UP behavioral activation program, consisting of 32 sessions over 12 months, was delivered by trained community health workers (CHWs) at 26 sites. 300 participants completed a mean of 21.5 sessions. Change in body weight was associated with site attendance: among 9 sites with mean attendance < 70%, participants lost a mean of 5.3%; among 12 sites with 70-80% attendance, 5.6%; and among 5 sites with > 80% attendance, 9.2%. Completion of activity and diet logs followed a similar pattern (34.9%, 56.2%, and 72.7%, respectively), as did retention for 13-month outcome assessment (70%, 85%, and 88%, respectively). CHWs at the high-performing sites were more likely to have prior or current employment in weight management and fitness (90% vs. 41.7% and 44.4%), but did not differ in education, age, race, or employment by sites. CHW experience, not sociodemographics, affected outcomes.

SESSION 7650 (SYMPOSIUM)

TOWARDS A GREATER CONTEXTUALIZATION OF MUSIC AND THE ARTS IN AGING AND COGNITIVE DISORDERS
Chair: Desmond O’Neill

There is an increasing prominence of arts and cultural interventions related to aging and cognitive disorders in the scholarly literature and at gerontological conferences. However, the mechanisms of the salience and relevance of aesthetics, culture and leisure in the lives of older people remains unclear. One aspect which has emerged is that of aesthetic deprivation and its consequences for well-being. This symposium aims to provide perspectives from a range of researchers involved in programs of research and implementation to try to contextualize and better understand the perspectives of older people, arts practitioners and therapists the place and context of arts, culture and leisure in optimal aging.

TOWARD A GREATER CONTEXTUALIZATION OF MUSIC AND THE ARTS IN AGING AND COGNITIVE DISORDERS
Sophie Lee, Hilary Moss, and Desmond O’Neill,
1. University of Limerick, Limerick, Limerick, Ireland,
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Research suggests that group music-making can improve well-being and cognitive function in people with dementia and their family carers. The importance of the music facilitator’s role is recognised. However, empirical studies rarely capture their experiences and perspectives. Semi-structured interviews were conducted with three music therapists and three community musicians with specialisms in dementia care. The interviews sought to gain a detailed understanding of their work with people with dementia. Interpretative Phenomenological Analysis revealed eight super-ordinate themes: (1) benefits of music-making for people with dementia; (2) challenges of working with people with dementia; (3) involving family carers; (4) musical content; (5) impact of the facilitator; (6) developing field of Arts and Health; (7) work as a privilege; and (8) potential for misuse of music. This study provides a useful basis from which to further develop concepts for the amelioration of people living with dementia and their families.

COMMUNITY ARTS PROGRAMMING SUPPORTS PERSONAL GROWTH AND WELL-BEING IN OLDER ADULTS
Niyati Dhokai, and Jatin Ambegaonkar, George Mason University, Manassas, Virginia, United States
Our research study examined how taking part in the arts compared to control affects older adults’ health and well-being. 64 older adults took part in dance, music, or control workshops 2 times/week for 10 weeks. We examined participants’ psychological health, social engagement, and personal growth outcomes using mixed methods during pre- and post-workshop assessments. Focus group and arts survey results revealed that participants felt ownership of new skills learned and felt engaged. Participants, especially for those in arts workshops, described having increased self-perception of creative skills resulting in a sense of personal growth, which occurred despite mind/body challenges experienced during workshops including musculoskeletal challenges, hearing impairments, and challenges retaining new information. Our observations provide avenues for future researchers to create programming that empowers older adults, as well as to utilize the participants’ ongoing feedback to create participant-empowered adaptations that transcends mind/body limitations through accessible pedagogical methods.

ARTZ ENGAGEMENT PROGRAMS IMPROVES HEALTH IN COMMUNITY-DWELLING OLDER ADULTS

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We examined how different arts engagement programs compared to control affect health in community-dwelling older adults. 64 adults(71.3 ± 4.6 years; Dance n=23, Music n=17, Control, n=24) took part in free Dance(Ballroom), Music(Ukulele), or Control(Active social conversation) sessions 2 times/week for 10 weeks. We assessed cognition(Montreal-Cognitive-Assessment-MoCA), physical(Short-Physical-Performance-Battery-SPPB), and Health-Related Quality-of-Life(HRQoL-SF-20) 3 times: (1) before(pre), (2) at the end of 10 weeks(post-1) and (3) 1-month after intervention(post-2). Separate 3(Time)x3(Groupe) ANOVAs and Bonferroni-pairwise-comparisons examined changes across groups and time(p<.05). Participants’ physical health improved equally across groups(p=.4) and over time(p<.001), specifically from pre(10.5 ± 1.4) to post-1(10.7 ± 1.3; p=.002), and pre to post-2(11.3 ± 1.0;p<.001). Participants’ cognition improved equally across groups(p=.6) and over time(p<.001) from pre(26.3 ± 2.8) to post-1(27.3 ± 2.5; p=.002), and pre-to-post-2(27.5 ± 2.5;p<.001). Participants’ HRQoL remained similar over time(p=.6) and across groups(p=.7). Overall, participants’ health improved after taking part in arts engagement and social conversation programs. Study findings offer insights about successful implementation of arts-engaged programs in community-dwelling older adults.

ARTZ @ JEFFERSON: HOW ARTS-BASED EXPERIENCES SUPPORT PEOPLE WITH DEMENTIA AS MENTORS AND AID IN DIGNITY PRESERVATION

Susan Shifrin,1 Florence Gelo,2 and Anne Mitchell,3 1. ARTZPhilly, Philadelphia, Pennsylvania, United States, 2. Drexel University, Philadelphia, Pennsylvania, United States, 3. Thomas Jefferson University, Philadelphia, Pennsylvania, United States

ARTZ @ Jefferson positions people with dementia and care partners as authorities about their lived experiences; arts-based experiences assist them in communicating with and mentoring health-professions students about those lived experiences. Since Spring 2016, over 100 students have been mentored by people with dementia and their care partners. Their first encounters take place in museum galleries, through facilitated conversations about works of art. Over the next six to eight weeks, students and mentors build relationships through group meetings and individual conversations. Post course surveys demonstrated that nearly 100% of students indicated their increased ability to value listening and listen to others, enhanced the healthcare provider/patient relationship, and prioritized patients’ life experiences. The majority of mentors noted that student interactions added to their quality of life, social engagement and sense of purpose. Preliminary outcomes suggest that arts-based experiences establish mutual respect and empathy between people with dementia and students.

GROUP MUSIC INTERVENTION FOR PERSONS WITH DEMENTIA IN ASSISTED LIVING: A PILOT STUDY

Hongdao Meng,1 Jennifer Bugos,1 Debra Dobbs,1 Soomi Lee,1 Punam Risal,1 Britney Veal,2 and William Patterson,3 1. University of South Florida, Tampa, Florida, United States, 2. University of South Florida, Winter Haven, Florida, United States, 3. Digital Media Innovations and eLearning Enterprises, Tampa, Florida, United States

Dementia is the third leading diagnosis among US residents in assisted living communities (ALCs), and agitation is a major challenge for residents, families, and staff. While music interventions in nursing homes and the community have generated promising findings, little evidence of acceptability or efficacy data are available in ALCs. This pilot study tested the acceptability and preliminary efficacy of a staff-led group music intervention among ALC residents with dementia (n=19). We used a mixed-methods pre-post study design. The primary outcome measure was the Cohen-Mansfield Agitation Inventory-Short Form (CMAI-SF), and facilitator focus group interviews were conducted to gain additional insight into intervention acceptability and facilitators/barriers to implementation among activity staff. Seventeen (89.5%) participants completed the intervention with a 77% overall session attendance rate. Results suggest that the intervention is well-received by management, family, and activity staff, Implications for intervention design, efficacy testing, and contextual factors related to implementation will be discussed.

SESSION 7655 (SYMPOSIUM)

A NEW LENS ON PHYSICAL ACTIVITY PROMOTION: CAN TECHNOLOGY BOOST EXERCISE PRESCRIPTION AND ADHERENCE?

Chair: Patricia Heyn
Discussant: Amber Watts

Adherence to exercise prescription for older adults (OAs) is a significant problem and can have a detrimental effect on key health outcomes. Exercise adherence for OAs