

fit with recommendations from 2020 NIA Research Summit on Dementia Care and next-steps in refinement and testing.

DOES ANXIETY AFFECT PERFORMANCE ON ATTENTION TASK (DIGIT SPAN FORWARD) ON THE MOCA TEST? A CLINICAL CORRELATION STUDY

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It is unknown if anxiety affects performance on Digit span forward (DSF) in memory clinic patients. We performed a retrospective chart review of memory clinic patients in the south shore of Boston from 2010 to 2020. We correlated anxiety screen data (GAD7) to Digit Span Forward (DSF) scores obtained from the MoCA. As the data were not normal, we performed univariate analyses with Spearman correlation. A multivariate regression model estimated the relationship of DSF to covariates of GAD7, age, sex, and race. We hypothesized a negative correlation between anxiety levels scored by GAD7 and DSF. H0: Digit span forward DSF ~ GAD7+Age+Sex+Race. A chart review found 965 patients attending the memory clinic between 2010 to 2020 had analyzable data. 433 patients with available DSF and 737 had available GAD7. The patients were 58.7% female and 84.7% caucasian. The mean age was 70.1±14.4, DSF 0.8±0.4 and GAD 5.6±5.7. DSF correlated significantly to race ($\rho=-0.25$, $p<0.001$), but not to gender ($\rho=0.05$, $p=0.149$), age ($\rho=0.04$, $p=0.3$), or GAD7 ($\rho=-0.018$, $p=0.71$). There was no significant association of DSF to race, age, gender or GAD7 on the multivariate model. In memory clinic subjects there exists no correlation between anxiety levels scored by GAD7 and DSF performance.

EARNING THE TRUST OF AFRICAN AMERICAN COMMUNITIES TO INCREASE REPRESENTATION IN DEMENTIA RESEARCH

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Black/African American populations are underrepresented as participants in dementia research. A major barrier to participation of African American older adults in dementia research is a tendency to distrust research institutions owing to a legacy of racism. Building on the Ford framework, the objective of our study was to examine factors that influence participation in dementia research among African American older adults and caregivers, with an emphasis on understanding factors related to trust. Data were collected from 10 focus groups with African American older adults (n=91), 5 focus groups with caregivers (n=44), and interviews with administrators of community-based organizations (n=11), and meetings with our Community Advisory Board. Inductive/deductive content analysis was used to identify themes. The results identified an overall tension between distrust of researchers and a compelling desire to engage in dementia research. This overarching theme was supported by six themes that provided insights about the multiple layers of distrust, as well as expectations about the appropriate conduct of

researchers and academic institutions. Strong commitment to the community was identified as a priority. The findings suggest that a paradigm shift is needed to increase the representation of African Americans in dementia research. In this new paradigm, earning the trust of African American communities becomes a systemic endeavor, with academic, state and national institutions deeply committed to earning the trust of African American communities and guiding researchers in this endeavor. The findings also generated actionable recommendations to help improve representation of African American older adults in dementia research.

GUIDELINES FOR USING TELE-TECHNOLOGY TO DELIVER MIND-BODY INTERVENTIONS FOR PEOPLE WITH MILD COGNITIVE IMPAIRMENT

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Individuals with Mild Cognitive Impairment (MCI) may have limited access to intervention programs that support their mental and physical health. The COVID-19 pandemic has put them at an even greater risk of not having access to such programs. While there is currently no cure, there is growing evidence that intervention programs may attenuate the progression from MCI to dementia, particularly those which 1) have potential to reduce the level of cardiovascular risk factors, 2) employ cognitively stimulating activities, and 3) create opportunities for social interaction (Petersen, Lopez, Armstrong et al., 2018; Wayne, Yeh, & Mehta, 2018; Mortimer, Ding, Borenstein et al., 2012). Many mind-body interventions, such as tai chi, yoga, and mindfulness classes, contain these three elements and have been shown to benefit individuals diagnosed with MCI, including improving cognition (e.g., Wells, Kerr, Wolkin, et al. 2013; Yang, 2016). Tele-technology (i.e., technology that supports communication between people who are not co-located) can aid in overcoming the logistical barriers by bringing instructors and interventions to these individuals to help them stay engaged and attend activities more frequently from the comfort and convenience of their home. We will present recent findings from a user study with 8 stakeholders (4 subject matter experts, 2 individuals with MCI, 2 care partners) to assess barriers and facilitators to using tele-technology to bring instruction of mind-body interventions to individuals diagnosed with MCI. This poster will present guidelines for delivering such interventions based on our findings from the user study, including safety and training protocols.

INFLUENCES OF DEMENTIA ON LONG-TERM SURGICAL OUTCOMES IN OLDER ADULTS AFTER HIP FRACTURE

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Older adults with dementia are more prone to have adverse health outcomes following hip fracture surgery. However, individuals with dementia and hip fracture are older and have more co-morbidities; these baseline