

individual's exercise capacity. Nineteen subjects participated in evaluating the proposed system, and we found that the risk factors (body composition, hemodynamics, blood enzymes, and exercise variables) related to obesity were statistically significantly improved. Other exercise prescriptions for chronic diseases and symptoms will be able to adapt to the proposed system so that we believe it would be substantially helpful to improve geriatric diseases and symptoms by using technology-driven exercise.

TECHNOLOGY, YOGA, AND HALLWAY WALKS TO MAINTAIN FUNCTION AND SELF-EFFICACY DURING THE HOME-BOUND MONTHS OF WINTER

Kim LeBard-Rankila, *University of Wisconsin Superior, Superior, Wisconsin, United States*

Winter months present individuals with a unique challenge, decreased daily movement that can lead to decreased physical and emotional health. Snow and ice cause hazardous walkways and driving conditions that can lead to falls and decreased travel out of the home. For those that live in states that have four seasons, when spring comes many of them have spent a large majority of their daily lives indoors for 3-5 months. This isolation can cause decreased daily movement, aggravate medical conditions, challenge healthy eating habits, and cause social isolation. Participants for this study live in a 32-apartment building, which all occupants are independent with daily living skills and are 60 years or older. The study assessed if motivational texting, yoga in the apartment's community center, and short hall-way walks can help maintain or increase self-efficacy. Flexibility, hand-grip strength, and perceived quality of life were assessed.

SESSION 7660 (SYMPOSIUM)

INSIGHTS GAINED FROM DEVELOPING ACADEMIC-COMMUNITY PARTNERSHIPS FOR MINORITY AGING, COMMUNITY-ENGAGED RESEARCH

Chair: Ronica Rooks

Discussant: Peter Lichtenberg

Increasingly community-engaged research, characterized by collaborations between researchers and community partners, is recognized as an important part of translating research into improved health outcomes and reduced health disparities for community participants. Training community participants to engage in some or all aspects of this research, particularly focusing on racial and ethnic minority older adults, highlights the need to understand its opportunities and challenges. With this symposium we will discuss and reflect on community-engaged and community-based participatory research approaches to community-academic partnerships with minority older adults. The first presentation addresses recruitment, retention, and training of a community advisory board of older African Americans in Michigan. The second presentation addresses a health education outreach and engagement program to improve health outcomes among older African Americans in California. The third presentation combines community engagement

with survey design methods for research with older Native Hawaiian and Pacific Islander adults to improve data collection and health outcomes in this U.S. population. The final presentation examines partnerships between a hospital memory clinic, meal delivery service, research university, and low-income health clinic to improve caregiver and dementia patient outcomes for minority older adults. The symposium discussant will address opportunities, challenges, and implications of community-academic partnerships promoting minority aging.

BUILDING AND SUSTAINING A COMMUNITY ADVISORY BOARD OF AFRICAN AMERICAN OLDER ADULTS FOR VOLUNTEER RESEARCH

Jamie Mitchell,¹ Tam Perry,² Vicki Johnson-Lawrence,³ and Vanessa Rorai,⁴ 1. *University of Michigan, Ann Arbor, Michigan, United States*, 2. *Wayne State University, Detroit, Michigan, United States*, 3. *Michigan State University-Flint, Flint, Michigan, United States*, 4. *Healthier Black Elders Center, Detroit, Michigan, United States*

Older African Americans' (AA) participation in health-related research is severely limited; they are not involved in sufficient numbers and for sufficient duration to ensure the applicability of advancements in medical and behavioral health. This research participation gap exacerbates older AAs vulnerability to poor health outcomes and disparities. The Michigan Center for Urban African American Aging Research employs a progressive community-based participatory model that utilizes a structured community advisory board (CAB) of older AAs in metro Detroit to oversee the research recruitment and retention of fellow AA older adult research participants. CAB members are provided ongoing training on social and behavioral health research, supported in acting as a consultancy to outside researchers where they can be compensated for their expertise and engagement, and empowered as gatekeepers of a participant research registry of over 1000 AA older adults. This model has broad potential for advancing community engaged research with AA older adults.

ADVOCATES FOR AFRICAN AMERICAN ELDERS: ENGAGING OLDER ADULTS IN EDUCATION AND RESEARCH

Karen Lincoln, *University of Southern California, Los Angeles, California, United States*

Advocates for African American Elders (AAAE) is an outreach and engagement program at the University of Southern California, providing culturally competent health education for older African Americans throughout Los Angeles County (LAC). Founded in 2012 to address racial disparities in health outcomes, AAAE partners with community-based agencies, government, and health plans to address the persistent growing needs of older African Americans. AAAE educates and disseminates information about healthcare policies and resources through fact sheets, educational forums, and the AAAE website. It