

Session 4167 (Symposium)

RECRUITMENT AND RETENTION IN DIVERSE COHORTS: LESSONS FROM COMMUNITY-ENGAGED EFFORTS

Chair: Carrie Nieman

Co-Chair: Haera Han

Discussant: George Rebok

Effective behavioral interventions and associated trials reflect the complexity and context of the communities with which they are tailored and the behaviors they seek to address. Community-engaged methodology can serve to capture these complexities, particularly when focusing on health inequities. Significant health and healthcare disparities persist among racial/ethnic minorities and representation of racial/ethnic minorities is lacking within trials that reflects the diversity of the U.S. population. Novel approaches are needed to increase the diversity of participants within behavioral intervention research. This symposium covers the unique barriers and facilitators related to recruitment and retention across a range of populations, including African American and Hispanic/LatinX older adults with hearing loss to diverse dementia family caregivers and community-dwelling Korean American older adults. Beyond the challenges and opportunities, the symposium will focus on effective recruitment strategies. The discussion will include 1) findings from 10 years of recruiting older Korean Americans into community-based trials, 2) lessons in tailoring recruitment efforts to dementia family caregivers, 3) the integration of human-centered design into a community-engaged hearing care intervention targeting low-income and African American older adults, 4) successful recruitment and retention efforts in a community-based participatory research trial in a borderlands community, and 5) the deployment of strategies to recruit Latino, Asian, and African American older adults with depression and anxiety in the setting of the COVID-19 pandemic. This symposium seeks to build the evidence related to recruitment of older racial/ethnic minorities in diverse settings, which is fundamental to addressing health inequities through behavioral intervention research.

COMMUNITY ENGAGEMENT AND HUMAN-CENTERED DESIGN: LESSONS FROM HEARS IN INCLUSIVE RECRUITMENT OF OLDER ADULTS

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Within hearing care, significant disparities persist despite the highly prevalent nature of age-related hearing loss and relatively few trials include representation of racial/ethnic minorities. HEARS is an affordable, accessible hearing care intervention delivered by older adult peer mentors. The HEARS randomized controlled trial (NCT03442296)

is a community-engaged RCT with an embedded human-centered design practitioner. Recruitment efforts occurred over 18 months in partnership with 13 affordable housing and social centers. The cohort (n=151) includes 43% (n=65) who self-identify as African American and 63.6% (n=96) with <\$25,000 annual household income. The cohort represents the largest to-date of African American and low-income older adults with hearing loss. Recruitment efforts entailed 470.5 staff hours and \$4,917.26 in supplies, equating to 1.4 hours and \$14.13 per 1 individual screened and 3.1 hours and \$32.56 for 1 participant randomized. Community-engaged research, partnered with human-centered design, may offer critical approaches to increasing representation within behavioral intervention trials.

COMMUNITY-ENGAGED STRATEGIES FOR RECRUITMENT OF KOREAN AMERICANS IN COMMUNITY-BASED RESEARCH STUDIES

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With increasing numbers of researchers targeting ethnic minorities to address health disparities, it is important to address the unique needs of Korean American (KA) older adults—a “hard to reach” yet one of the most rapidly increasing ethnic and age groups in the nation. The purpose of this paper is to describe the main barriers to research participation and to identify facilitators for recruitment of older KAs. We have analyzed recruitment data pertaining to more than 10 community-based KA research studies we have conducted for the last ten years. There were a number of unique recruitment challenges in regard to the culture, language, and sociodemographic characteristics of the participants. Examples of effective recruitment strategies included: aligning the research agenda with the priorities of the community; establishing collaboration with ethnic churches and ethnic media; recruiting and training bilingual volunteers and community health workers; and placing liaison research staff in the community.

PRIORITIZING COMMUNITY IN RESEARCH DECISION-MAKING THROUGH PARTNERSHIP

Nicole Marrone,¹ Maia Ingram,¹ Aileen Wong,¹ Rosie Piper,² Sonia Colina,¹ Scott Carvajal,¹ and Laura Coco,¹ 1. *University of Arizona, Tucson, Arizona, United States*, 2. *Mariposa Community Health Center, Nogales, Arizona, United States*

In behavioral intervention research, taking a community-based participatory research approach enhances recruitment and retention while facilitating the transfer of research findings into social change. Successes with recruitment and retention are secondary to enacting fundamental principles of trust, reciprocity, cultural humility, empowerment, and respect. This presentation will describe a longitudinal clinical trial in a Southwest borderlands community, Oyendo Bien. The study was co-developed and implemented with community partnership throughout the research process. Dyads were recruited to participate in a community-delivered group education and support program addressing hearing loss for Spanish-speakers age 50+ years (n=132 participants randomized). We highlight the critical role that community health workers (promotoras) held as members of the research team.

Furthermore, we describe an innovative approach for language mediation that integrates and empowers community participation. This presentation will include examples of lessons learned from the community in collaborating to conduct research in a way that truly serves.

RECRUITING DIVERSE DEMENTIA FAMILY CAREGIVERS: WHAT WORKS FOR WHICH GROUPS?

Kyra Mendez,¹ Valerie Cotter,² and Hae-Ra Han,³ 1. *Johns Hopkins Bloomberg School of Public Health, Baltimore, Maryland, United States*, 2. *Johns Hopkins School of Nursing and School of Medicine, Baltimore, Maryland, United States*, 3. *Johns Hopkins School of Nursing, Baltimore, Maryland, United States*

The purpose of this presentation is to compare success of recruitment methods by race/ethnicity, age, and kinship of dementia family caregivers. We conducted a cross-sectional study and recruited a convenience sample of dementia family caregivers using community-based and online methods. Recruitment success was tracked through survey questions, direct referrals, and community event sign-ups. Using chi-squared statistics, we examined the success of each method by caregiver race/ethnicity, age, and relationship to person with dementia (kinship). There were significant differences in recruitment source based on race/ethnicity, age, and kinship ($P < .001$). Specifically, referrals and newspaper advertisements were most successful for recruiting older (54 years+), White, non-Hispanic, and spousal or child caregivers; community events and reputable websites for recruiting older, minority, child caregivers; ResearchMatch for recruiting younger, minority, child/grandchild caregivers; and social media for recruiting younger, White, non-Hispanic, and child caregivers. Findings support the importance of implementing tailored methods to reach diverse dementia caregivers.

COMMUNITY RECRUITMENT OF ASIAN, LATINO AND AFRICAN AMERICAN OLDER ADULTS WITH DEPRESSION SYMPTOMS DURING COVID-19

Irene Falgas Bague,¹ Ravali Mukthini,² Sahnah Lim,³ Aida Jimenez,⁴ Caroline Ferreira,² Sheri Lapatin Markle,² and Margarita Alegria,^{2,1} *Massachusetts General Hospital, Harvard Medical School, Boston, Massachusetts, United States*, 2. *Disparities Research Unit, Massachusetts General Hospital, Boston, Massachusetts, United States*, 3. *New York University, New York, Massachusetts, United States*, 4. *Department of Psychology, University Of Puerto Rico - Rio Piedras/San Juan, Massachusetts, United States*,

Recruitment and engagement of racial/ethnic minority older adults in clinical trials is crucial to expand implementation of evidence-based interventions for disability prevention. Public Health measures to counteract COVID-19 pandemic have increased the challenges on reaching this population. This study seeks to comprehensively evaluate a set of recruitment strategies to enroll Latino, Asian and African American older adults with symptoms of depression and anxiety during the first year of a randomized clinical trial. A partnership of three academic sites across the U.S. (NYC, MA and PR) involving several collaborations with community agencies recruited racial/ethnic minority older adults using different strategies involving bilingual interviewers calling from hospital research dataset and community agencies' list

of clients, referrals from primary care providers or psychotherapy waitlist. In this presentation we will report various recruitment and retention data including individual and organizational predictors of successful recruitment as well as challenges across all three sites.

Session 4170 (Symposium)

KENT AND KLEEMEIER AWARD LECTURE AND PRESENTATIONS

Chair: Theresa Harvath

The Donald P. Kent Award lecture will feature an address by the 2020 Kent Award recipient, David Ekerdt, PhD, FGSA, of the University of Kansas. The Kent Award is given annually to a member of The Gerontological Society of America who best exemplifies the highest standards of professional leadership in gerontology through teaching, service, and interpretation of gerontology to the larger society. The Robert W. Kleemeier Award lecture will feature an address by the 2020 Kleemeier Award recipient, Matt Kaerberlein, PhD, FGSA, of the University of Washington. The Kleemeier Award is given annually to a member of The Gerontological Society of America in recognition for outstanding research in the field of gerontology.

TARGETING BIOLOGICAL AGING: A NEW PARADIGM FOR 21ST CENTURY MEDICINE

Matt Kaerberlein, *University of Washington, North Bend, Washington, United States*

Biological age is the greatest risk factor for nearly every major cause of death and disability, including COVID-19. Yet, traditional biomedical research and clinical approaches have focused on waiting until people are sick and treating individual diseases one at a time. Attempts to "cure" age-related diseases have proven unsuccessful, and the impact of "disease-first" approaches continue to be incremental. Recent advances in understanding them mechanisms linking biological aging to disease, or geroscience, have identified interventions that directly target the molecular hallmarks of aging. Unlike disease-specific approaches, such interventions have the potential to prevent multiple diseases of aging simultaneously, thereby greatly enhancing healthspan and lifespan for most individuals. Here I will provide an overview of translational geroscience, which I believe will become the paradigm for the practice of medicine in the 21st century. I will also discuss recent work with one such intervention, the drug rapamycin, and our efforts to eventually delay or reverse biological aging in companion dogs and people.

AGING AS READINESS AND WARINESS

David Ekerdt, *University of Kansas, Lawrence, Kansas, United States*

Gerontology concerns itself with events in time, either things that have happened or things that may happen. In the former, our work is to describe and explain. In the latter, the occurrence of events is unknowable, but we can nonetheless study people's imagination of them (how it arises) and how that imagination shapes behavior and attitudes in the present (how it matters). The subjective experience of aging, thus, is one of looking ever forward—welcoming, waiting for, or hoping to avoid what the future may hold. This personal