

considered at-risk based on the three-key questions. The history of falling question was excluded for the six month analyses. The “Stay Independent” identified 60% of fallers and the remaining two questions of the three-key questions identified 57% of fallers.

#### UNDERSTANDING FACILITATORS AND BARRIERS TO PARTICIPATION IN EVIDENCE-BASED FALL-PREVENTION INTERVENTIONS

Janice Mark,<sup>1</sup> Gwen Bergen,<sup>2</sup> and Briana Moreland<sup>2</sup>, 1. *American Association of Colleges in Nursing, Washington DC, United States*, 2. *Centers for Disease Control and Prevention, Atlanta, Georgia, United States*

Prescribing evidence-based interventions based on older adults' modifiable risk factors is recommended to prevent falls. Older adults need to adhere to the prescribed intervention to successfully reduce risk. This study reports on a structured systematic review to understand patient attitudes to adherence to fall prevention interventions. A systematic search for publications from 2008-2018 identified 72 articles on patient attitudes toward exercise, physical therapy, medication management, podiatry, and vision care for fall prevention. Three reviewers coded facilitators and barriers based on a socio-ecological model of interpersonal, intrapersonal, community, and policy factors. Perceived susceptibility to falling and perceived effectiveness of the intervention were important factors across all fall prevention interventions. Physician prescribing and discussion facilitated exercise, medication changes, and physical therapy. For attitudes related to community and policy, the most reported barriers were transportation and cost. Information from this review can be used to improve the implementation of fall prevention interventions.

#### OLDER ADULT FALLS PREVENTION: THREE ADOPTED CLINICAL STRATEGIES FROM EVALUATION OF THE CDC STEADI INITIATIVE

Jennifer Edwards,<sup>1</sup> Brittany Bickford,<sup>2</sup> Yvonne Johnston,<sup>3</sup> and Aaron Alford<sup>1</sup>, 1. *National Network of Public Health Institutes, Washington, District of Columbia, United States*, 2. *National Network of Public Health Institutes, New Orleans, Louisiana, United States*, 3. *Binghamton University, Binghamton, New York, United States*

This evaluation examines patients' barriers and facilitators to adopting an evidence-based fall prevention strategy. Twenty-one patients were telephone interviewed. The purposive sample includes patients over age 65, screened as at risk for falls, and who received a referral for falls risk intervention. Seven themes emerged from the qualitative analysis of interview transcripts: 1. Behavioral Facilitators, 2. Personal Fall Experiences, 3. Informed Decision-making, 4. Providers, 5. Friends and Family, 6. Home Setting Facilitators, and 7. Risk Perception. Three opportunities were identified: 1. Develop an outpatient follow-up protocol, 2. Develop a falls screening public service announcement, and 3. Partner with the local Office for Aging to connect patients at risk with community programs such as Tai Chi. A systems approach involving the CDC, National Network of Public Health Institutes (NNPHI), Broome County Health Department, and an Upstate New

York hospital system's outpatient practices was vital for the success of this evaluation.

#### USING CAREERS IN AGING WEEK (CIAW) TO PROMOTE INTERGENERATIONAL COMMUNITY ENGAGEMENT

Carrie Andreoletti<sup>1</sup>, 1. *Central Connecticut State University, New Britain, Connecticut, United States*

This presentation will discuss how we used CIAW 2017 to promote intergenerational community engagement by collaborating with our office of Continuing Education and AARP Connecticut to host “#DisruptAging – A Conversation Across Professions, Perspectives, and Generations.” Together we developed a half day program designed to build bridges among academic institutions, aging professionals, community collaborators, and consumers who are passionate about aging issues. We brought together a multi-generational audience of professors, students, professionals, and representatives of various community organizations to discuss ways to change the conversation around aging. This gave us an opportunity to highlight our gerontology programs and showcase our gerontology students, while students learned about aging-related careers, public policy initiatives, and organizations in Connecticut that support older adults and their families.

#### SESSION 2560 (SYMPOSIUM)

##### INTEREST GROUP SESSION—INTERGENERATIONAL LEARNING, RESEARCH, AND COMMUNITY ENGAGEMENT: USING INNOVATIVE INTERGENERATIONAL STRATEGIES TO BOOST CAREERS IN AGING

Chair: Joann M. Montepare, *Lasell College, Newton, Massachusetts, United States*

Discussant: Laura K. Donorfio, *University of Connecticut, Waterbury & Storrs, United States*

Populations are aging dramatically, and call for higher education to be more age-friendly and pave the way for career paths in aging. The Careers in Aging Week (CIAW) program sponsored annually by the Academy for Gerontology in Higher Education (AGHE) of GSA has been a core stimulus for building career interest – however, more could be done to strengthen and invigorate this effort. This symposium will show how intergenerational exchange can be used to mount interest in careers in aging and create new pipelines to gerontology programs in higher education. Examples of innovative approaches will demonstrate how career information can be communicated to students in more creative and compelling ways. The first paper will set the stage with an evidence-based overview of emerging areas for career development, and a presentation of career planning models to aid student understanding as to how to make aging career decisions. Two presentations will then focus on different aging-workforce initiatives aimed at building educational pipelines that connect high-school students with college students studying gerontology. In addition to highlighting the oft-overlooked population of high school students, attention will be given to the importance of including minority student populations in career