older adults who are obese enrolled in the 13-month Mobility and Vitality Lifestyle Program (mean DSD 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 \geq 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

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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,¹ Hilary Moss,² and Desmond O'Neill,³ 1. University of Limerick, Limerick, Limerick, Ireland, 2. Irish World Academy of Music and Dance, Limerick, Limerick, Ireland, 3. Trinity College Dublin, Dublin, Dublin, Ireland

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

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