

To study the impact of depressive symptoms on the effectiveness of cognitive training interventions, the ACTIVE 10-year follow up data was analyzed for cognition and difficulty in everyday functioning outcomes. Because depression is treatable, this topic is of high public health significance. Analyses showed that females had greater prevalence of depressive symptoms. Reasoning, speed of processing and daily function change scores were significantly worse in the depressive symptom group, while memory change score was non-significantly worse, showing poor proximal and downstream primary (functional) outcomes. Depressive symptoms may lead to lower retention of cognitive training benefits.

## SESSION 2270 (PAPER)

### PERSONALITY, CULTURAL ELEMENTS, AND COGNITIVE FUNCTIONING

#### ADDRESSING THE NEEDS OF INCARCERATED INMATES WITH DEMENTIA: CREATING DEMENTIA-FRIENDLY PRISONS

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U.S. prisons are experiencing a graying of their population, with many older inmates experiencing chronic conditions, including dementia. Older prisoners now represent 10% of the U.S. prison population and 18% of Illinois' prison population. Aging inmates cost more to incarcerate due to their medical needs. Bureau of Prisons data estimate \$881 million (19%) of its budget was spent to incarcerate aging inmates. Prisons are seeking solutions to address the unmet needs of older inmates, especially those with dementia. These older inmates with dementia face discrimination and exploitation within the prison population, and Correction Officers and clinicians lack training to understand and address their complex needs. Utilizing the Alzheimer's Association's, ACT on Alzheimer's Toolkit we implemented four phases guiding communities' adoption of dementia-friendly practices: we convened meetings with Illinois Department of Correction leaders, assessed community strengths and gaps by surveying prison wardens, analyzed findings and created an action plan to provide dementia training of prison staff to create a dementia friendly community. Our "Dementia-Friendly Prisons" program trains prison staff on understanding and providing supportive care and management to inmates with dementia, enabling staff to meet inmates' needs, thereby creating an environment where inmates with dementia are safe and treated respectfully. Our program used an Appreciative Inquiry Four-D cycle approach (Discover-Dream-Design-Destiny) to engage and empower learners from a highly diverse workforce to develop into collaborative teams. Our program remedies a problem in the delivery of prison healthcare, serving a particularly vulnerable population and creates an adaptable model for other prisons and communities.

#### CARING FOR OLDER INDIGENOUS PEOPLE WITH DEMENTIA: ATTENDING TO THE PERSONALITY

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Māori, the indigenous people of New Zealand, are living longer and dying older. The prevalence of conditions associated with older people, such as Dementia are expected to increase amongst the Māori population. Pae Herenga, a qualitative research project investigating traditional Māori end-of-life care customs, identified an indigenous narrative of Dementia care, as carried out by their families. Sixty participants took part in face-to-face interviews to systematically record the traditional care customs employed by Māori families. Of these families, five experienced caring for someone with dementia. A traditional Māori family values approach based on biological connections, relationships, empathy, love, patience and inclusiveness aimed to care for the individual with Dementia as an important member of the family, and sought to maintain as much of the person's autonomy as possible, for as long as possible. Sharing care roles between family members and maintaining connections to Māori communities helped to prevent isolation of the person with Dementia and their family members caring for them. Involvement in family and community activities, and attending to the individual's personality and their spiritual needs were just as important as tending to their physical care needs. These findings emphasize the importance of a holistic approach to caring for indigenous people with Dementia.

#### INSIGHTS FROM AFRICAN AMERICAN OLDER ADULTS ON BRAIN HEALTH RESEARCH ENGAGEMENT: NEED TO SEE THE NEED

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Recruitment of African American (AA) participants into clinical research trials in the area of aging and dementia is a major problem facing the field. Although AAs are at a significantly elevated risk of developing Alzheimer's disease (AD), they are underrepresented in clinical trials and research studies. While previous research has identified a number of barriers to participation, relatively little is known about how to overcome these barriers and engage AA individuals in research. Photovoice may provide a novel approach to advance our understanding of AA perceptions in regards to barriers and strategies to increase AA engagement in brain aging research. The purpose of this project is to add to existing understanding of barriers and facilitators and identify strategies to enhance engagement. Three AA research advocates served as community facilitators to identify and guide groups of AA adults through an 8-10 session photovoice project. Group sessions involved discussions and sharing of images pertaining to various prompts in the area of brain health and research participation. Sessions were audio-taped and transcribed verbatim and photos were uploaded. Participants identified four categories of barriers to AA research participation: Mistrust, the belief that all research involves medication, avoidance and fear of acknowledging problems, and seeing the risks of research but not the need. Participants had various suggestions and approaches for ameliorating each of these barriers. This photovoice community engagement process revealed unique insights into