

INTERDISCIPLINARY GERONTOLOGY IN HIGHER EDUCATION: A CASE STUDY FROM SOUP TO NUTS

Justine McGovern, *Lehman College, City University of New York, Bronx, New York, United States*

Through the lens of a multi-year joint project initiated by faculty in Social Work and Digital Arts at Lehman College, the City University of New York's senior college in the Bronx, NY, this paper provides a guide on how to initiate, implement and evaluate interdisciplinary collaborations in gerontology. The paper also suggests ways to ensure that these collaborations can support tenure and promotion processes, funding initiatives, and pedagogical enhancements. The paper focuses on how to make use of campus resources, including departmental Chairs, research offices, and campus-wide committees to identify appropriate collaborators and funding sources; how to nurture productive interdisciplinary relationships, such as clarifying disciplinary expectations and participants' professional needs; and how to maximize return on the effort for tenure and promotion, such as producing publishable content, identifying appropriate opportunities for interdisciplinary publishing and presenting, advocating for interdisciplinary collaborations, and developing interdisciplinary syllabi, an example of evidence-based high-impact pedagogy.

COMING SOON TO A CLASS NEAR YOU: CINEMATIC INSIGHTS ON LATER LIFE

Candace Brown,¹ and Margaret Perkinson,² *1. University of North Carolina, Charlotte, Charlotte, North Carolina, United States, 2. University of Hawaii at Manoa, Honolulu, Hawaii, United States*

Cinema can enhance gerontological education by reinforcing a variety of learning styles, connecting course content to current culture, and providing an alternative, tangible view of what students are learning. The presenters discuss their use of film to teach gerontological concepts in the classroom. In an Introduction to Aging course, the films, "Young at Heart" and "Sunset Story" were used to break through ageist stereotypes, examine examples of resilience at the end of life, and convey the impact of residential context on the experience of aging, i.e., within a retirement home for "retired rebels." In a course on Health and Aging, movies, such as "Red," "Driving Miss Daisy," and "Somethings Gotta Give" are used to compare the social and psychological aspects of aging of the characters to learned concepts in the classroom. Students expressed how watching and writing about the films increased their understanding by bringing abstract gerontological concepts to life.

LESSONS FOR HUMANITIES AND ARTS IN GERONTOLOGY AND GERIATRICS CURRICULA FROM THE MEDICAL AND HEALTH HUMANITIES

Desmond O'Neill, *Trinity College Dublin, Dublin, Dublin, Ireland*

The role of Humanities, Arts and Cultural Gerontology in gerontology and geriatrics curricula finds a metaphor in the rapidly evolving field of medical and health humanities, with which this author has been involved for three decades. Behind the call for increasing humanities and arts

scholarship in the pedagogy of both fields lies the challenge of establishing an interdisciplinary nexus of scholarship that avoids the challenges of dilettantism and gestures such as providing lists of novels and movies. This presentation draws on the presenter's bibliometric research in the medical and health humanities which indicates authorship in the majority to be either solely from the humanities or from healthcare, with little indication of joint working in either authorship or acknowledgements (the scholar's courtesy), and explores the background issues of academic culture with a view to proposing solutions to elevate the inclusion of humanities and arts as a significant element of gerontology education.

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FACTORS ASSOCIATED WITH THE QUALITY OF STAFF-RESIDENT INTERACTIONS IN ASSISTED LIVING

Anju Paudel,¹ Elizabeth Galik,² Barbara Resnick,² Kelly Doran,² Marie Boltz,³ and Shijun Zhu,⁴ *1. Penn State Ross and Carol Nese College of Nursing, University Park, Pennsylvania, United States, 2. University of Maryland School of Nursing, Baltimore, Maryland, United States, 3. Pennsylvania State University, University Park, Pennsylvania, United States, 4. University of Maryland, Baltimore, Maryland, United States*

Care interactions are essential to understand and respond to resident needs in assisted living (AL). The factors that influence care interactions in AL have not been directly examined. In this study, we explored the factors associated with the quality of care interactions in AL. It was hypothesized that resident functional status, agitation, depression, and resistiveness to care as well as facility size and ownership would be significantly associated with the quality of care interactions in AL after controlling for resident demographics (age, gender, marital status), comorbidities, and cognition. To test the hypothesis, we utilized baseline data including 379 residents from the second and third cohorts recruited in a randomized trial titled 'Dissemination and Implementation of Function Focused Care for Assisted Living Using the Evidence Integration Triangle'. Regression analysis was performed using a stepwise method. The care interactions were mostly positive (mean=6.3; range = 0-7). Resident agitation and facility ownership were significantly associated with care interactions and accounted for 8.2% of the variance. Increased resident agitation was associated with negative or neutral interaction while for-profit ownership was associated with positive interactions. To promote positive care interactions, staff should be educated about strategies to minimize resident agitation (e.g., calm posture and respectful listening) and encouraged to engage with residents using resident-centered care and communication approach. Findings also suggest the need to work towards optimizing care interactions in nonprofit settings. Future research could further explore the impact of facility-level factors (e.g., staffing ratios, staff longevity, and job satisfaction) on care interactions.