Introduction
Older African Americans residing in or relocating from gentrifying neighborhoods may experience social disconnection detrimental to their cognitive health.\textsuperscript{1,2} Perceptions of neighborhood social cohesion impact older adults’ walking behaviors.\textsuperscript{3} The Sharing History through Active Reminiscence and Photo-imagery (SHARP) study aims to preserve African American cognitive health through neighborhood walking and social engagement in a way that celebrates Black culture and history, and that produces participant-informed community deliverables.\textsuperscript{4}

Culturally Celebratory Framework

Walking Study Results
“It was something different, you know, to blend the Afrocentric and historical fact-driven, and of a community that’s almost lost. That is the pull, it really is.”

Focus group surveys.
[Unpublished data removed from this section]

Qualitative findings. The triadic structure and place-based memory prompts aided reminiscence, allowing participants to make meaningful links between their own life experiences and their walking partners’.

Recording neighborhood memories with triads who shared a sense of community loss gave reason to walk and made walking more meaningful. Knowing they were contributing to community deliverables (oral history archive and learning sessions) increased participants’ sense of purpose. Walks helped participants become reoriented within their changing neighborhoods, helped heal from the trauma of gentrification, and expanded social networks.

Discussion
SHARP’s culturally celebratory approach sustained engagement in physical and social activity, for potentially better health outcomes. Further, deliverables dually serve individual health and community priorities of preserving history amidst rapid gentrification. For African Americans and others, sustaining behaviors that may mitigate and reduce risk of cognitive decline may require creatively framing interventions within meaningful contexts that remind people of their connection to others, to place, and to community. SHARP is scalable and adaptable to other communities. Future well-powered trials of this intervention in similar communities are of great interest.

Methods
Structure & dose. 7 African American triads aged ≥55 (2 cognitively healthy/1 person with MCI/triad) walked 3x/week for 6 months in Portland, Oregon’s historically Black neighborhoods. Walking & Social engagement. Using a tablet, triads followed 1-mile routes. GPS-triggered images prompted conversational reminiscence. Deliverables. Recorded conversations created an oral history archive and informed an online resource and community learning sessions about Alzheimer’s disease and healthier aging.

Assessments. The Montreal Cognitive Assessment (MoCA), weight, blood pressure, and a health survey were administered pre- and post-study. Evaluation. Focus groups gave insight into intersections of aging, memory, and place.

Community Deliverables
Narratives from SHARP walks were paired with brain health information on the SHARP online resource that was developed and tested with 15 African Americans aged ≥55 in four phases. Integrating narratives with educational content renders information more relatable, memorable, and meaningful. Walking routes, the oral history digital archive, and resources for community learning sessions are accessible via the website. Available soon at www.SHARPHealthyaging.org

Participants (n=21)
[Unpublished data removed from this section]

References