Additional research to understand why these programs have developed in particular locations is necessary to identify place-based leverage points for age-friendly actions, as well as place-based variation in the outcomes such initiatives.

A FRAMEWORK TO DESCRIBE THE EARLY PLANNING PHASE OF AGE-FRIENDLY COMMUNITY INITIATIVES

E.A. Greenfield, Rutgers, The State University of New Jersey, New Brunswick, New Jersey

This study employed a grounded theory approach to develop an empirically grounded framework of age-friendly community initiatives' (AFIC) objectives and resources in the early planning period. I conducted in-depth interviews with leaders of nine newly formed AFCIs in northern New Jersey (U.S.) at two points during the first six months of their projects. Results indicated three inter-related aims of the planning period: (a) building relationships, (b) harnessing data, and (c) raising the visibility of older adults and the AFCI. To achieve these objectives, leaders reported drawing on social and human capital within and among stakeholders, including the lead organization, consultants, organizational partners, municipal leaders, individual volunteers, funders, and web-based resources. The framework can be used to assess organizational and community readiness to begin an AFCI, target areas for resource development, and track AFCIs' early accomplishments. Findings also offer implications for research on the effectiveness and expansion of AFCIs.

SESSION 165 (SYMPOSIUM)

GLOBAL COUNCIL ON BRAIN HEALTH: ADVANCING INTERNATIONAL DIALOGUE TO PROMOTE WELL-BEING

Chair: S. Lock, AARP, Washington, District of Columbia

As people live longer, the need for clear, trustworthy information on brain and cognitive health is greater than ever. Launched in 2015, the Global Council on Brain Health is an independent collaborative of scientists, clinicians, scholars and policy experts convened by AARP to provide the foremost thinking on what people and professionals can do to maintain and improve brain health. The goal of the Council is to translate scientific research into actionable recommendations for the public that will help drive behavior change in individuals across communities and cultures. This symposium will feature leading researchers from the UK, US and Canada to highlight recommendations issued by the Council. It will showcase three consensus documents generated by the Council that are based on the latest research advancements. Particular emphasis will be placed on Council recommendations that are aimed at improving brain health in three areas: physical exercise, sleep and social engagement. In sum, this symposium brings together leaders at the forefront of this international effort to discuss the scientific and policy dimensions of brain health.

PHYSICAL ACTIVITY AND BRAIN HEALTH

T. Liu-Ambrose, University of British Columbia, Vancouver, British Columbia, Canada

The GCBH convened to examine research focused on the impact of physical activity on brain health. Eight issue specialists representing four continents arrived at consensus statements to summarize the impact of physical activity on brain health: (1) Follow current public health recommendations of 150 minutes of weekly, moderate-intensity aerobic activity and two or more days a week of moderate-intensity, muscle-strengthening activities. In addition to purposeful exercise, lead a physically active lifestyle throughout the day. (2) Identify meaningful and enjoyable ways to increase and maintain physical activity. (3) Incorporate physical activity as a part of a healthy lifestyle to help reduce the risk of cognitive decline, and (4) When focusing on the impact of physical activity on brain health, stakeholders and policy makers should take into account the breadth of scientific evidence (i.e. animal studies, epidemiological studies, and randomized controlled trials) while recognizing the knowledge gaps.

SLEEP AND BRAIN HEALTH

K. Yaffe, UCSF, San Francisco, California

This talk will provide an overview of the consensus document on sleep and cognitive health. Recommendations issued by the Council addressed how sleep patterns change as individuals grown older. Sleep hygiene will also be discussed during this talk as a way of maintaining and improving cognitive health. Particular focus will be placed on the implementation of non-pharmacological methods as a way of improving sleep patterns. A full discussion of the recommendations relating to sleep duration, sleep timing, sleep quality, napping and sleep disorders as we age will be discussed.

SOCIAL ENGAGEMENT AND BRAIN HEALTH

L. Clare, University of Exeter, Exeter, United Kingdom

The relationship between social engagement and brain health will be the third topic examined by the GCBH. A broad range of contextual lifestyle factors will be considered in the consensus document and recommendations, including social engagement, social isolation, social networks, social support, living situation, marital status and loneliness. There are structural (e.g. family size), functional (e.g. level of support) and appraisal (e.g. attitudes, beliefs, mood) aspects involved in shaping each person's experience of social engagement or isolation. The relationship between stress, resilience and social engagement will also be discussed. Current evidence indicates a link between isolation and poor health outcomes and mortality; however, more research is needed to assess the impact of loneliness. Although it is widely accepted that supporting social connections is beneficial, there is as yet little robust evidence for the effectiveness of interventions addressing loneliness and isolation.

THE PUBLIC MESSAGING OF SCIENCE: WHAT THE EVIDENCE TELLS US ABOUT GETTING IT RIGHT J. Goodwin¹, S. Lock², 1. University of Loughborough, Loughborough, United Kingdom, 2. AARP, Washington, District of Columbia

Although it is often stated that the production of new knowledge is an intrinsically valuable objective, health science research is duty bound to show the public value of its work. However, a common criticism of empirical science is its failure of translation into society-useful outcomes. For example a common perception is that science is expert driven rather than society led, with little interaction between the two in the translation process. No more is this more important