A community-academic partnership to implement DASH diet and social/behavioral interventions in congregate meal settings to reduce hypertension among seniors aging in place

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ABSTRACT IMPACT: Our implementation model translates two evidence-based nutritional and behavioral interventions to lower blood pressure, into a community-based intervention program for seniors receiving congregate meals. OBJECTIVES/GOALS: The Rockefeller University, Clinical Directors Network, and Carter Burden Network received an Administration for Community Living Nutrition Innovation grant to test whether implementation of DASH-concordant meals and health education programs together lower blood pressure among seniors aging in place. METHODS/STUDY POPULATION: n=200, >60 yr, >4 meals/week at CBN; engagement of seniors/stakeholders in planning and conduct; Advisory Committee to facilitate dissemination; menus aligned with Dietary Approaches to Stop Hypertension (DASH) and NYC Department for the Aging nutritional guidelines; interactive sessions for education in nutrition, BP management, medication adherence. Training in use of automated daily home BP monitor. Meal satisfaction scores dipped briefly then enhanced sense of importance in their work, while identifying the barriers to participation, effective aspects of the intervention, and less helpful components of the design. Interviews were recorded performed by a research assistant uninvolved in the study. Recordings were then transcribed for a qualitative thematic analysis. RESULTS/ANTICIPATED RESULTS: We anticipate facilitators of participant engagement to include the provision of care in the community and integration of services into a regular task (getting their hair cut). Based on prior conceptual models, we also anticipate the provision of care in a trusted setting to be an effective means to enhance participants’ willingness to follow clinical instructions. An anticipated barrier for participants includes the need to go to an offsite pharmacy to pick up their medications. For barbers, we anticipate themes including a desire to help their community, while identifying the need to travel as a barrier to the intervention. DISCUSSION/SIGNIFICANCE OF FINDINGS: Insights from this qualitative analysis may assist with adaptation of the highly effective Barbershop intervention, allowing it to be rolled out at scale. If done successfully, achieved reductions in blood pressure may result in reduced health disparities and prevent thousands of strokes, heart attacks and deaths.