

## 2. University of Wisconsin - Milwaukee, Milwaukee, Wisconsin, United States

Adverse Childhood Experiences (ACEs) are a collective term used to define traumatic events before the age of 18. Individuals with ACEs are at risk for various negative health behaviors and chronic diseases. Routine screenings help in early detection of the disease and minimize the impact of the disease, disability, early death, and higher medical costs. Research on ACEs focusing exclusively on older population has received inadequate attention. Additionally, it is not clear whether different types of childhood adversities impact older individuals to participate in routine health screenings. This study included 3997 individuals above 65 years from the 2015 Texas Behavioral Risk Factor Surveillance System (BRFSS) to examine the prevalence of ACEs and their health screening practices. The dependent variable was participating in routine health checkup in the past year and 8 ACEs were the independent variables where gender, age, race, and having a personal doctor were controlled. Logistic regression models showed that prevalence of four ACEs (Physical, sexual, and emotional abuses and parental divorce/separation) were likely to reduce older individuals' participation in routine checkup in the past year. Similarly, older individuals with personal doctor were twice more likely to visit for routine checkup compared to those without personal doctor. Lastly, older Black individuals were less likely to participate in routine checkup than their White counterparts. This study provided preliminary results to consider the impact of specific ACEs in routine health screening behaviors among older individuals. Future research might benefit from longitudinal study examining causal relationship between ACEs and health behaviors.

### PHYSICAL FRAILTY AS A PREDICTOR OF INCIDENT DISABILITY IN SPECIFIC-IADL ITEMS AMONG OLDER ADULTS

Jane Lee<sup>1</sup>, Miji Kim<sup>2</sup>, and Chang Won Won<sup>2</sup>, 1. *Yonsei University, Seoul, Seoul-t'ukpyolsi, Republic of Korea*, 2. *Kyung Hee University, Seoul, Seoul-t'ukpyolsi, Republic of Korea*

This study investigated the 2-year impact of physical frailty on disability (activities of daily living [ADL], instrumental ADL [IADL], and mobility) and mortality among community-dwelling older adults in Korea. We used data from 2,905 older adults aged 70–84 years who participated in the Korean Frailty and Aging Cohort Study (KFACS) at baseline (2016–2017) and Wave 2 (2018–2019) with all five components of Fried's physical frailty phenotype. Of these, 277 (7.8 %) were frail and 1,312 (45.2 %) were robust. In the 2-year follow-up, multivariate analysis showed significant differences in frailty status for all disabilities (ADL, IADL, mobility) and mortality incidence. Both pre-frail (odds ratio [OR]=1.48, 95% confidence interval [CI]=1.06–2.05) and frail (OR = 5.11, 95% CI=2.78–9.39) statuses showed increased risks of mobility disability. The incidence of ADL disability was significant only in frail older adults (OR =10.26, 95% CI=3.16–33.31). Both pre-frailty (OR =1.55, 95% CI=1.03–2.32) and frailty (OR =4.11, 95% CI=2.35–7.18) status were significantly associated with the incidence of IADL limitations. Frailty status was associated with disability in mobility-related items of IADL (going out, using transportation, and shopping) among men, and

was associated with most IADL items among women after 2 years. The results of this study emphasize the need for sex-specific policies and frailty prevention programs, with a focus on detecting frailty before it leads to irreversible disability or other negative health outcomes. These findings may provide a framework for frailty prevention in community-dwelling older adults.

### WHAT MOTIVATES PHYSICIANS TO ADDRESS CAREGIVER NEEDS? THE ROLE OF EXPERIENTIAL SIMILARITY

Taeyoung Park<sup>1</sup>, Karl Pillemer<sup>1</sup>, Corinna Löckenhoff<sup>1</sup>, and Catherine Riffin<sup>2</sup>, 1. *Cornell University, Ithaca, New York, United States*, 2. *Weill Cornell Medical College, New York, New York, United States*

Despite the negative emotional and physical consequences of caregiving, caregivers' needs and risks are often overlooked in health care settings. This study used survey data from a national random sample of primary care physicians (N=106) to examine the factors associated with physicians' perceived responsibility to identify caregiver needs and risks, focusing on three theoretically implicated variables: 1) experiential similarity (i.e., physicians having personal experience with caregiving), 2) structural similarity (i.e., physicians being older and female), and 3) secondary exposure to caregivers (i.e., more time seeing older patients and a higher percentage of older adults in their patient panel). Physicians in our sample consisted of 42.5% women; most of whom were white (73.6%). The majority (76.5%) agreed or strongly agreed that they were responsible for identifying caregivers' needs and risks. Multivariable models controlling for physicians' age and gender revealed that physicians who had personal experience with caregiving were four times more likely than those without caregiving experience to feel responsible to identify caregivers' needs and risks (adjusted odds ratio [aOR] 3.90; 95% confidence interval [CI] 1.34–11.41) and to assess caregivers' mental health concerns (aOR 3.58; 95% CI 1.29–9.94). Structural similarity and secondary exposure did not play significant roles in motivating physicians. Findings highlight the role of experiential similarity in physicians' motivation to assess caregivers' needs and risks. Future work may benefit from designing intervention programs for physicians that incorporate experiential learning activities (e.g., conversations in which caregivers share their experiences) and evaluating whether such programs enhance physicians' sensitivity toward family caregivers.

## SESSION 6700 (POSTER)

### EMPLOYMENT, DIRECT CARE WORKFORCE, AND RETIREMENT

#### EXPERIENTIAL ASSESSMENT OF AN INNOVATIVE DEMENTIA CARE TRAINING SEQUENCE FOR HEALTH AND HUMAN SERVICES WORKERS

Susan Wehry<sup>1</sup>, and David Wihry<sup>2</sup>, 1. *University of New England, Biddeford, Maine, United States*, 2. *University of Maine, Orono, Maine, United States*

This poster presents results of an assessment of an interdisciplinary dementia care training titled Dementia

Reconsidered (DR). In contrast to disease and deficit-focused training curricula, DR incorporates and emphasizes the strengths and humanity of people living with dementia and focuses on person-directed support for, and care of, persons living with dementia. For example, DR makes the case for an approach to shared and supported decision-making that optimizes the individual's— and significant others'—abilities. The on-line lectures were chunked to accommodate cognitive load and active learning; 20-30 second stretch breaks were interspersed to facilitate attention. This may account for the higher retention and utilization rates of DR than are often found in one-off trainings. A retrospective pre-post survey administered at the conclusion of DR sessions measured participant learning outcomes. Participants in DR sessions were representative of the fields of social work (42%), nursing (21%), and a significant "other" category (28%), mostly long-term care administrators. Among post-training survey respondents (N=36), 77% improved their knowledge of the key principles of person-directed dementia care; 73% (N=37) showed improved comfort in supporting residents with dementia during the CoVID-19 pandemic; 83% (N=24) showed improvement in ability to distinguish capacity and competency; and 83% (N=23) reported increased comfort in supporting people with dementia in making decisions in the face of diminished capacity. At six month follow-up, 63% (N=33) had used a skill gained from their training (17% no, 20% not sure). Implications for training in dementia care practices will be discussed.

#### ORGANIZATIONAL PRACTICES FOR THE AGING WORKFORCE: A CROSS-CULTURAL VALIDATION OF THE LATER-LIFE WORKPLACE INDEX

Juergen Deller<sup>1</sup>, Julia Finsel<sup>2</sup>, Anne Wöhrmann<sup>3</sup>, Max Wilckens<sup>2</sup>, Xiuzhu Gu<sup>4</sup>, and Eduardo Oliveira<sup>5</sup>,

1. *Leuphana University of Lueneburg, Lueneburg, Niedersachsen, Germany*, 2. *Leuphana University Lueneburg, Lüneburg, Niedersachsen, Germany*, 3. *BAuA, Dortmund, Nordrhein-Westfalen, Germany*, 4. *Tokyo Institute of Technology, Tokyo, Tokyo, Japan*, 5. *University of Porto, Porto, Porto, Portugal*

Successful employment of experienced employees becomes more important for both, individuals and organizations. To identify organizational practices that foster the motivation, health, and performance of experienced employees in particular, a holistic assessment of relevant organizational factors is needed. The Later Life Workplace Index (LLWI) provides such a measure for organizational practices for older employees by differentiating nine domains, namely organizational climate, leadership, work design, health management, individual development, knowledge management, transition to retirement, continued employment after retirement, and health and retirement coverage. So far, a German-language and an English-language version of the LLWI have been validated in Germany and the U.S in a multi-study procedure. The psychometric properties and measurement invariance of the English-language version of the LLWI will be presented. Preliminary findings from Japan and Portugal show promising results regarding reliability and validity of the LLWI in the respective country. The findings suggest that the multidimensional measurement model developed in Germany and the U.S. could be applicable to other regulatory and cultural

contexts as well. A focus group consisting of the original authors of the LLWI and international scholars, whose research expertise lies in the field of employment and older employees, is currently developing a short version of the LLWI. We aim to provide researchers and practitioners from different countries with a validated measurement to holistically assess organizational practices. Researchers can utilize the LLWI to gain a comprehensive understanding of organizational influences on later life work, while practitioners are able to assess their organizational readiness for an aging workforce.

#### PREPARING OLDER ADULTS FOR REMOTE EMPLOYMENT: OPPORTUNITIES AND CHALLENGES

Setarreh Massihzadegan<sup>1</sup>, Shayna Gleason<sup>2</sup>, Jan Mutchler<sup>2</sup>, and Caitlin Coyle<sup>2</sup>, 1. *UMASS Boston, Cambridge, Massachusetts, United States*, 2. *University of Massachusetts Boston, Boston, Massachusetts, United States*

As Americans live longer, many are finding they need or want to remain longer in the workforce. When the COVID-19 pandemic transitioned much of the U.S. workforce into temporary or permanent remote employment, many older job seekers were left behind, wanting to compete in the evermore technology-based job market but often without the requisite skills to do so. The present study evaluated a workforce training program (funded by a Department of Labor demonstration grant) that trained low-income workers over the age of 55 for remote employment. Approximately 60 older adults were trained across three 20-week cohorts. Our data sources included biweekly participant surveys, typing speed and Microsoft Office skill assessments, exit interviews with program "drop-outs," focus groups, training observations, data from participant applications, and instructor assessments of each participant's level of "job readiness" at the end of the program. Results revealed that participants had acute financial need for employment, a keen interest in working remotely, and a wide range of employment experiences and past job stability. Many of their career trajectories and workplace needs were affected by COVID-19. Results also showed promising improvements in participants' technology skills and confidence in their ability to conduct a job search over the course of the program. The need for greater connectivity between participants and employers was identified as an area for improvement for the program. The results of this study contribute to the literature on workforce development by exploring how training programs might better prepare older adults for an increasingly remote job market.

#### LONGITUDINAL INVESTIGATION OF FACTORS PREDICTING RETIREMENT ADJUSTMENT AMONG RETIREES IN TAIWAN

Shiau-Fang Chao<sup>1</sup>, Wei Ye<sup>2</sup>, and Wei-Cheng Liu<sup>3</sup>, 1. *National Taiwan University, Taipei, Taipei, Taiwan (Republic of China)*, 2. *Nation Taiwan University, Taipei, Taipei, Taiwan (Republic of China)*, 3. *Taiwan Social Welfare League, Taipei, Taipei, Taiwan (Republic of China)*

Background Retirement can substantially affect one's lifestyle and self-identity. However, little research has focused on how pre-retirement conditions are associated with retirement adjustment. Method This study utilized data