

depression ($\beta(\text{depression})=0.144$, $P<.001$) had independent effects on the risk of disability in adults, but the interaction with diabetes was not significant. To conclude, exercise is the most powerful factor to alleviate the risk of disability in diabetic patients.

PREDICTORS OF CONCOMITANT COGNITIVE AND PHYSICAL FUNCTION DECLINE: RESULTS FROM THE HEALTH ABC STUDY

Elizabeth Handing,¹ Iris Leng,¹ Kathleen Hayden,¹ Caterina Rosano,² and Stephen Kritchevsky¹, 1. *Wake Forest School of Medicine, Winston-Salem, North Carolina, United States*, 2. *University of Pittsburgh, Pittsburgh, Pennsylvania, United States*

Although many individual risk factors for cognitive and physical decline have been identified, less is known about factors that predict concomitant or “dual decline”. Utilizing data from the Health ABC study ($n=2,553$), we examined trajectories of decline based on repeated measures of the Modified Mini-Mental State Exam (3MS) and Short Physical Performance Battery (SPPB) across 5 years. Next, we calculated four mutually exclusive trajectories of decline derived from the slope: no decline (change in slope ≥ 0 , $n= 1,190$), cognitive decline (lowest quartile of slope in 3MS; $n=445$), physical decline (lowest quartile of slope in SPPB; $n= 407$), and dual decline (lowest quartile for both cognitive and physical decline; $n= 211$). Logistic regression tested the association of 23 baseline risk factors with dual decline. Odds of dual decline were higher in relation with depression (CES-D >16) (Odds Ratio [OR]: OR:2.77, 95% Confidence Interval [95% CI] [1.25- 6.15]), and lower for individuals with a better score on the Digit Symbol Substitution Test (DSST) (OR: 0.97 [0.95-0.98]), grip strength (OR: 0.97 [0.94-1.00]), and 400m gait speed (OR: 0.11 [0.03-0.40]). Among the predictors identified, depressive mood at baseline nearly tripled the odds of developing dual decline, but was not associated with decline in either the cognitive or physical domains. Depressive mood is uniquely associated with dual decline; future studies should focus on the overlap between mood states and function, as mood may be modifiable.

SESSION 810 (POSTER)

AGE FRIENDLY COMMUNITIES

NEIGHBORHOOD AND HEALTH AMONG CHINESE ADULTS: BEYOND THE URBAN AND RURAL DICHOTOMY

Yuekang Li,¹ and Yi Wang², 1. *Washington University in St. Louis, St. Louis, Missouri, United States*, 2. *The University of Iowa School of Social Work, Iowa City, Iowa, United States*

The associations between physical frailty and depressive symptoms among older individuals were established in existing literature. Taking the person-environment perspective, we argue that neighborhood environment could either buffer the stress derived from being physically vulnerable or worsen it by adding another layer of stressors in the environmental context when physical health declined. The objectives of this study are to explore 1) to what extent the

neighborhood-level characteristics moderate the relationship between physical frailty and depressive symptoms, 2) if there were rural-urban differences in the moderation effects, and 3) whether some of the environmental factors worked beyond the contextual influences of the rural-urban scope. Using the China Health and Retirement Longitudinal Study 2011 wave, 6,246 individuals ages 60 years and older were included for analyses. Multilevel mixed-effects models were fitted to examine the moderating effects of urbanicity and neighborhood-level socio-economic status (SES) on the relationship between frailty and depressive symptoms among older adults, controlling for individual-level characteristics. Results showed a stronger relationship between deterioration in physical health and depressive symptoms in rural neighborhoods and neighborhoods with lower SES, after controlling for individual-level SES. Also, the moderating effects of the neighborhood-level socioeconomic factors remained after controlling for urbanicity, indicating that neighborhood SES works beyond the rural-urban contexts. Findings from this study demonstrate the important roles of neighborhood socioeconomic characteristics in reshaping and the need to redefining China’s rural-urban dichotomy. The findings also identified neighborhoods with low SES as potential targets for policy and practice to reduce the stress associated with health decline.

LAYING THE GROUNDWORK FOR BECOMING AN AGE-FRIENDLY UNIVERSITY: A MULTI-PHASE STUDY

Melissa L. Cannon,¹ Renata Kerwood,¹ Mandie Kondash,¹ Samuel Rowley,¹ and Hannah Wehr¹, 1. *Western Oregon University, Monmouth, Oregon, United States*

As evidenced by the growing Age-Friendly University (AFU) global network, institutions of higher education are increasingly seeking ways to enhance the experiences of older adults who use them for reasons such as lifelong learning, career development, and intergenerational engagement. This multi-phase study explored the barriers and facilitators for older adults accessing a public university in a small Oregon town. The first phase of the study involved survey data collection from 46 members of the local senior center adjacent to the university campus. For the second phase, researchers recruited a sample from the survey respondents and used snowball sampling to conduct 12 interviews with senior center members, past and current senior center directors, and key contacts among university staff. The third phase of data collection paired student researchers with older adult research participants ($N=14$) in participatory action research to capture the unique perspectives of the research participants visiting the university campus using photovoice and a follow-up focus group. Quantitative data were analyzed using SPSS while qualitative data were analyzed using team coding and intensive group discussion to develop categories and themes. Findings revealed various opportunities to increase age-friendliness according to the principles outlined by the AFU initiative, such as developing a lifelong learning center on campus, strengthening the university-senior center partnership, and removing accessibility barriers in order to make the university campus friendlier for people of all ages and abilities. These findings are being used in a proposal to join the AFU network and to shape the university’s AFU vision.