

How does a hospital-based arts and humanities program build towards a better healthcare system for older patients, caregivers and medical professionals? The Georgetown Lombardi Arts and Humanities Program (AHP) supports the continuum of care by encouraging a creative and constructive response to illness through the use of music, dance, expressive writing and visual arts. Artists-in-residence at MedStar Georgetown University Hospital work throughout the hospital, with in-patients and out-patients, in waiting rooms, intensive care units, and clinics. At the same time, the AHP recognizes the need to introduce the next generation of physicians, nurses, and medical professionals to the benefits of interacting with the arts to improve skills of observation, communication, empathy, and perspective-taking to serve all populations, especially older patients living with chronic illness. The AHP's educational programs at the National Gallery of Art, and the IONA Senior Day Center will be highlighted along with their supporting evidence base

#### **BUILDING RESOURCE NETWORKS IN SERVICE OF OLDER PEOPLE THROUGH STATE ARTS AGENCIES' COMMUNITIES OF PRACTICE**

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National, state, and local arts networks help build the capacity of public and private sector organizations to serve older adults through quality arts engagement opportunities. The National Endowment for the Arts has worked closely with state arts agencies to build networks through a community of practice to facilitate partnerships with artists, arts organizations, aging services, and the healthcare system. With more than 40 states participating, the initiative has resulted in new state partnerships, new state grant initiatives, and new arts learning programs for older adults. Arts service organizations also have a role to play in this work. For example, the American Alliance of Museums is building a network of museums that will develop and implement high-quality, intensive arts learning opportunities for older adults across the United States. This presentation will address how these networks are helping build capacity across the country to improve the health and well-being of older adults

#### **SESSION 615 (SYMPOSIUM)**

##### **CULTURAL AND SOCIAL RESILIENCE FACTORS ON HEALTH IN THE CONTEXT OF IMMIGRATION**

Chair: XinQi Dong, *Rutgers Institute for Health, Health Care Policy and Aging Research, New Brunswick, United States*

Co-Chair: Mengting Li, *Rutgers, The State University of New Jersey, New Brunswick, New Jersey, United States*

Discussant: Man Guo, *University of Iowa, Iowa, United States*

Acculturation is a process whereby immigrants change their beliefs or behaviors in response to the prevailing norms and values in the host country. Acculturation may directly affect health outcomes, while it also operates through multi-level social factors, such as family relations, social network, and neighborhood cohesion, in shaping immigrants' health. Asian Americans are the fastest growing minority group in

the United States. Chinese Americans constitute the largest segment of Asian Americans. The five studies aim to profile multi-level cultural and social resilience factors of older Asian Americans' health by analyzing the Asian American Quality of Life survey and the Population Study of Chinese Elderly in Chicago (PINE). Two studies, Acculturation and Cognitive Health and Factors Associated with Unmet Healthcare Needs demonstrated the direct effect of acculturation on health. Another two studies outlined a more complex mechanism between cultural and social determinants and health. Perceived Stress, Social Support, and Dry Mouth found the buffering effect of social support on the relationship between perceived stress and oral health. Neighborhood Social Integration, Social Network, and Cognitive Function identified micro- and macro-level resilience factors exert interaction effects on cognitive function. In addition, previous studies pay little attention to the dynamic nature of social relations. Transition in Family Relations in Immigrant Families took a typology approach to capture multifaceted family relations, with a longitudinal design to explore the transitions in family relations in the process of acculturation and its impact on mental health. This symposium will build an integrative resilience model for older Asian Americans.

##### **TRANSITION IN FAMILY RELATIONS IN IMMIGRANT FAMILIES: THE CASE OF CHINESE OLDER IMMIGRANTS IN THE UNITED STATES**

Man Guo<sup>1</sup> Meredith Stensland<sup>2</sup> Mengting Li,<sup>3</sup> and XinQi Dong<sup>3</sup>, *1. University of Iowa, Iowa, United States, 2. University of Texas at Austin, Austin, Texas, United States, 3. Rutgers, The State University of New Jersey, New Brunswick, New Jersey, United States*

Using panel data of 2,604 Chinese older immigrants in Chicago over a two-year period, this study examined continuity and changes in intergenerational relationship patterns and their mental health implications. Latent transition analysis revealed five types of family relations: traditional, modified traditional, coresiding-unobligated, independent, and detached. Over the two years, about 43% of the respondents shifted to a different relationship type, with the most common changes being shifting into modified traditional or independent relations, or from detached relations. Controlling for baseline socio-demographic, acculturation, mental health variables, and variables representing life transitions over time, having detached relations was related to greater depressive symptoms in two years and having modified traditional relations was associated with better quality of life at the follow up. The findings revealed heterogeneity and fluidity of intergenerational relations among older immigrant populations and point to the important role of family relations in their well-being.

##### **NEIGHBORHOOD SOCIAL INTEGRATION, SOCIAL NETWORK, AND COGNITION: DOES THE INTERACTION EFFECT MATTER?**

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Social integration of neighborhoods and social network properties are associated with better cognitive function but the two factors are often investigated separately. This study examines the interaction between neighborhood social integration and quantity and composition of social network on cognitive domains by analyzing Population Study of Chinese Elderly, a population-based epidemiological study of over 3000 US Chinese older adults aged 60 and above in Chicago metropolitan. Regression results show that larger network size, volume of contact and smaller proportion kin and proportion co-resident were associated with higher level of global cognition. Higher sense of community was associated with higher level of global cognition. The interaction term of volume of contact and neighborhood cohesion was negative and statistically significant, suggesting the protective effect of volume of contact may decrease in high cohesion neighborhoods. Similar moderation effects were observed in specific cognitive domains, including episodic memory, working memory and executive function.

#### PERCEIVED STRESS, SOCIAL SUPPORT, AND DRY MOUTH AMONG U.S. OLDER CHINESE ADULTS

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Dry mouth is a common condition among older adults that negatively influences oral health, general health, and quality of life. The role of psychosocial factors in oral health conditions and diseases remains largely unknown. We examined the relationship between perceived stress and dry mouth among US older Chinese adults and further investigated the moderating role of social support from different sources in the relationship. Data came from baseline of the Population Study of Chinese Elderly in Chicago between 2011 and 2013 (N = 3,157). Stepwise logistic regression models with interaction terms were used. More perceived stress was significantly associated with a higher likelihood of reporting dry mouth. Friend support was protective against dry mouth. The effect of perceived stress on dry mouth varied by levels of family and friend support. To prevent or reduce dry mouth, interventions need to consider perceived stress and social support in this growing population.

#### FACTORS ASSOCIATED WITH UNMET HEALTHCARE NEEDS IN OLDER ASIAN AMERICANS

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Older Asian Americans are the fast-growing but understudied population in health disparities research. Using a sample that reflects cultural/linguistic diversity, the present study explored general (health insurance, usual place for care, income) and immigrant-specific (nativity, length of stay in the US, English proficiency, acculturation) risk factors of unmet healthcare needs in older Asian Americans. Data were drawn from the Asian American Quality of Life survey (N = 533). With the inclusion of a considerable number of non-English-speaking individuals, the present sample presented a high rate of unmet healthcare needs. Those with a shorter stay in the US, limited English proficiency, and lower level of acculturation had increased odds of having unmet healthcare needs than their counterparts after controlling for background characteristics. Challenging the myth of model minority, findings highlight the importance of immigrant-specific factors in identifying risk groups of unmet healthcare needs and demonstrate vulnerability in access to healthcare.

#### DIFFERENT ASPECTS OF ACCULTURATION AND COGNITIVE HEALTH AMONG MINORITY OLDER IMMIGRANTS

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Immigration and acculturation process in host society have been closely linked to health consequences among the immigrant populations. However, it has been inadequately examined regarding its relationships with cognitive outcomes. Data were drawn from PINE Study. Linear regression analyses were used to examine associations between acculturation levels (media use, ethnic social relations, and language proficiency) and cognitive performance. After adjusting for potential confounding variables, higher levels of acculturation were associated with better cognitive performance. More specifically, higher levels of acculturation in aspects of media use and ethnic social relations were associated with better cognitive performance, whereas it has no significant association with the language preference aspect. Research and practice addressing health disparities and cognitive impairment should leverage efforts to provide culturally relevant resources to less acculturated populations in the US. More longitudinal studies are needed to clarify the influence of acculturation on cognitive performance and its mechanism.

#### SESSION 620 (SYMPOSIUM)

##### DESIGNING TECHNOLOGY TO SUPPORT HEALTHCARE FOR AGING ADULTS

Chair: Neil H. Charness, *Florida State University, Tallahassee, Florida, United States*

Discussant: Scott R. Beach, *University of Pittsburgh, Pittsburgh, Pennsylvania, United States*

Healthcare costs are rising in industrialized countries, partly as a function of managing costly chronic care conditions associated with aging populations. Of roughly 3 trillion USD expended in the U.S., almost 90% is spent on those