marital status were measured between 2012 and 2014 (remained married/partnered (reference), divorced/separated, and widowed). Depression was measured using the Center for Epidemiological Studies Depression short form (CESD-8). Three types of social support from family, friends, and children were assessed: social support, social strain, and social contact. Autoregressive multiple regression was used to examine the relationship between change in depression, marital transitions, social support, and gender. Widowhood and social strain were independently associated with an increase in CESD-8 scores between 2012 and 2014. Significant interactions between social support and social strain, and separation/divorce were identified, and the relationship between social support, depression, and divorce varied by gender. Change in depression was positively associated with social support for separated/divorced females, but not separated/divorced males. These results indicate that social support may modify the influence of divorce on changes in depression among recently divorced older females. These findings can help mental health service providers more effectively target older adults at the greatest risk of depression after experiencing a marital transition.

STRESS-BUFFERING FACTORS OF SOCIAL INTEGRATION ON DEPRESSIVE SYMPTOMS OVER TIME IN LATE-LIFE

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The negative impacts of stress on older adults' well-being are well documented, and social integration is posited as protective against such detrimental effects. Previous research illustrates the stress-buffering effect of social relationships on both physical and mental health, such as depressive symptoms, in older adults. The purpose of this study was to expand on prior findings by investigating the longitudinal stress-buffering effect of various dimensions of social integration on depressive symptoms among an older sample. Four waves of data were drawn from the Social Integration and Aging Study, including 416 older adults (ages 60-100). Subscales of the Social Integration in Later Life Scale measuring frequency and satisfaction with social ties and community interaction were used to assess distinct dimensions of social integration. Multilevel modeling demonstrated that two facets of social integration—satisfaction with social ties and frequency of community interaction moderated the relationship between perceived stress and trajectories of depressive symptoms over time. Participants who reported high levels of stress reported fewer depressive symptoms if they had high satisfaction with social ties and high frequency of community involvement. Interestingly, frequency of contact with social ties and satisfaction with community interaction did not similarly buffer negative effects for depressive symptoms. These findings indicate the value of remaining actively engaged in the community and maintaining meaningful relationships as older adults age. Future research should investigate programs to foster relationships and engagement between older adults and their communities, with particular consideration of populations at a greater risk for isolation.

THE EFFECT OF INTERPERSONAL RELATIONSHIP AND SOCIAL ACTIVITY ON THE PHYSICAL AND MENTAL HEALTH OF OLDER KOREAN ADULTS

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Maintaining interpersonal relationships and social activities are important as you get older. Activity theory indicates that social activities and human relations are important factors for older adults' physical and mental health. However, the effects between the quantity and quality of interpersonal relationships and social activities will be different. This study compared which of the effects has a greater impact between interpersonal and social activities on physical and mental health. This study used the 6th additional wave (2016) and 7th wave (2017) of the Korean Retirement and Income Study. The subjects of this study were older adults who are aged 65 and older and the sample size was 2,152. Multiple regression was used for data analysis. Demographic variables were controlled. Independent variables were interpersonal relationships, social activities, satisfaction with interpersonal relationships, and satisfaction with social activities. Dependent variables were physical health and mental health, with depressive symptoms used as a proxy for mental health. βs was used to determine the relative influence on dependent variables. Interpersonal relationships, satisfaction with interpersonal relationships, and satisfaction with social activities significantly influenced physical health. Among them, interpersonal satisfaction was found to be the most influential factor on physical health. In addition, interpersonal satisfaction was found to be the most influential factor on mental health than interpersonal relationships. Satisfaction with social activities only affected physical health. The implications of this study were that the quality of interpersonal relationships and social activities of older adults affected physical and mental health more than quantity.

UNDERSTANDING TECHNOLOGY ANXIETY BY THE INTERACTION BETWEEN SOCIAL SUPPORT AND EDUCATIONAL CONTEXT

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The purpose of this study was to examine the interaction effects of social support from family and educational contexts on technology anxiety among Korean older adults. We collected data by online recruiting in February 2021, and the sample was Korean older adults without dementia (N=310; 65-89 years old). The dependent variable was technology anxiety, which meant the expected degree of worry under the assumption that a wearable robot for exercise was used. Independent variables were four types of social support (emotional, instrumental, physical, and financial support) provided by family members, such as spouse, children, or siblings. The moderating