

association between housing insecurity and negative affect was moderated by age ($B = -0.11$, $SE = 0.00$, $p = .019$), such that the effect of housing insecurity on negative affect was stronger for younger adults than for older adults. These results suggest that experiences of insecure housing leave African American adults vulnerable to compromised emotional and physical health, however, the negative effects of housing insecurity may attenuate with age.

INTERGENERATIONAL MENTORING ON HEALTH PROMOTION TO IMPROVE HEALTHY LIFESTYLES AMONG LATINO FAMILIES

Karen Kopera-Frye, Ashley Graboski-Bauer, and Ana Luisa Gonzalez-Marquez, *New Mexico State University, Las Cruces, New Mexico, United States*

New Mexico now has the 32nd highest adult obesity rate; approximately one-third are Latinos. Obesity rates in NM for children aged 2-11 years range from 11 – 14%. Mentoring as a health promotion or intervention strategy has become widespread. However, few programs have focused on several generations reciprocally influencing each other in healthy behaviors. Project I'M HIP (Intergenerational Mentoring Health Information Pathways)'s goals included: Providing an innovative, multigenerational educational program to promote greater maternal, child, and grandparent well-being, healthier lifestyle behaviors, and support continued healthy home environments by empowering the families with knowledge. Three cohorts of 30 families (1 parent, 1 child, 1 grandparent/other relative) were recruited for Program I'M HIP. This Program utilized culturally sensitive Evidence-Based Programs (EBPs). Monthly educational sessions focused on physical activity and adapting meals to be healthy. Project outcomes included exercise frequency, Body Mass Index (BMI), and a knowledge quiz assessing healthy meal facts, exercise knowledge via a 10-item quiz; all assessments pre- and post-program. Program outcomes included: 100% of the parents shared at least 1 fact on nutrition or exercise with other relatives, thus affecting another household; paired t-test analyses revealed significant changes in knowledge quiz total scores ($t_{70} = 5.03$, $p < .0001$), increased exercise frequency ($t_{72} = 2.106$, $p < .05$); no significant change in BMI from pre- to post-assessments; and children corrected their parents on proper diet; all demonstrating the reciprocal mentoring effects of parent, child, and other relative on health behaviors.

IS CHILDHOOD DISADVANTAGE TEMPORARY OR PERMANENT? EVIDENCE FROM THE STUDY ON GLOBAL AGEING AND ADULT HEALTH IN GHANA

Paul Ayernor, *City University of New York-CUNY, Staten Island, New York, United States*

The paper assesses whether childhood socioeconomic status have a temporary or permanent effect on adult health status and well-being. The study uses cumulative inequality theory to explain disparity in health status and well-being at older ages in Ghana. Data comes from the 2007-2008 World Health Organization global study of ageing in Ghana (SAGE). The study utilizes wave 1 of the data, with retrospective questions about early childhood socioeconomic status. The study uses ordinal logistic regression models to assess the relationship between childhood socioeconomic

status and self-report health on one hand and wellbeing on the other. The results show that father's education is a significant predictor of health status and wellbeing at older ages. Specifically, the odds of reporting good and moderate health status and wellbeing are 1.29 and 2.22 times higher among older adults whose fathers have primary education or higher. As expected, the odds of reporting moderate or good health status and wellbeing decrease with increasing age and also for women. In terms of interaction effects, those aged 60-69 years whose fathers have primary education are less likely to report good and moderate health. In contrast, those who are aged 70-79 years old and have fathers with secondary or higher education are 2.51 times more likely to report good and moderate wellbeing. There is strong evidence of compensation among those who keep once or twice contact with social ties.

ORAL HEALTH AND DENTAL CARE IN OLDER KOREAN IMMIGRANTS: A QUALITATIVE STUDY

Yuri Jang,¹ Min-Kyoung Rhee,¹ Jeong Chung Hyeon,¹ Eun Young Choi,² Juyoung Park,¹ and Nan Sook Park,³,
1. *University of Southern California, Los Angeles, California, United States*, 2. *Leonard Davis School of Gerontology, Los Angeles, California, United States*, 3. *University of South Florida, Tampa, Florida, United States*

Many segments of the U.S. population continue to experience a disproportionate burden of oral disease and inequities in dental care, and older Asian immigrant populations are among those at high risk. Responding to the needs to attend to ethnic and geographic variations among older Asian Americans and to better understand contextual factors that shape their experiences of oral health and dental care, the present study conducted in-depth interviews with eighteen older Korean immigrants in the Los Angeles Greater area. The qualitative inquiries were theoretically guided by the three core categories of the Andersen's (1968, 1997) health service model: oral health needs, service barriers, and service outcomes. Using the constant comparison method, themes and sub-themes within each category were derived. The eight themes emerged from the qualitative data were: (1) oral health problems, (2) perceived need, (3) insurance and finance, (4) language barriers, (5) social support, (6) knowledge and belief, (7) satisfaction with service, and (8) areas of improvement. The findings demonstrated varied experiences associated with oral health and dental care of older Korean immigrants and informed the development of services and programs responsive to the identified needs and barriers.

PHYSICAL HEALTH CONSTRAINTS AND PSYCHOLOGICAL DISTRESS IN OLDER ASIAN AMERICANS: THE ROLE OF PERCEIVED HEALTH

Hyunwoo Yoon,¹ Yuri Jang,² and Seoyoun Kim,³
1. *Portland State University, Portland, Oregon, United States*, 2. *University of Southern California, Los Angeles, California, United States*, 3. *Texas State University, San Marcos, Texas, United States*

Given the importance of understanding the underlying dynamics of physical and mental health in old age, the present study explored the roles of physical health constraints in predicting subjective health perception and psychological