

SESSION 5895 (SYMPOSIUM)

WHERE WE LIVE MATTERS: RESIDENTIAL INFLUENCES ON HEALTH AND WELL-BEING

Chair: Yee To Ng

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Discussant: Markus Schafer

Growing evidence indicates that residential contexts are implicated in the health and well-being of older adults. Operationalization of these contexts varies and includes psychosocial, physical and socioeconomic neighborhoods, and more proximal contexts (e.g., home environment). We aim to bring together a diverse set of papers focused on the living environment to understand how contextual factors are associated with individual outcomes. Muñoz and colleagues applied a lifespan perspective by evaluating associations between current and childhood neighborhood perceptions on cognitive health. Their results indicated that the association between perceived neighborhoods and cognition in adulthood was moderated by childhood neighborhoods. García and Ailshire contextualized the types of neighborhoods in which older Latinos live and how these influenced diabetes risk. They identified neighborhood clusters characterized by racial/ethnic and socioeconomic compositions and found that predominantly Latino neighborhoods with low SES were more likely to have diabetes compared to other neighborhood clusters. This symposium will also focus on the more proximal environment. Lee and Ailshire examined the neighborhood and home environment and found that the home's proximity to green space and level of clutter within the home was associated with increased fall risks in older adults. Fingerman and colleagues coded older adults' living spaces and found that personality type was associated with room conditions. Altogether, the presentations highlight the relevance of context measured across multiple levels of analyses and dimensions of well-being outcomes in aging individuals. Dr. Markus Schafer will provide a discussion of these findings and address the challenges and opportunities for future research.

THE IMPACT OF PERCEIVED NEIGHBORHOODS IN CHILDHOOD AND ADULTHOOD ON DAILY COGNITIVE FUNCTION

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Neighborhood experiences may have a cumulative effect on cognitive health outcomes across the lifespan. We investigated independent and combined associations between current and retrospective childhood neighborhoods and daily cognitive function in 209 adults (Mage=47.07; range: 25-65) who participated in a 14-day ecological momentary assessment study. Participants reported perceptions of their current neighborhood and the neighborhood they lived in at age

5; including neighborhood cohesion, safety, violence, and physical conditions. Greater current neighborhood violence was independently associated with poorer spatial working memory. Childhood neighborhood violence was not significantly associated with performance. The interaction between current and childhood neighborhood ratings was significant: individuals who reported greater childhood neighborhood violence, but lower current violence had better performance than those who experienced consistently high or low neighborhood violence. Effects for other neighborhood domains were not significant. Results indicate that neighborhood influences on cognition in adulthood may be moderated by childhood neighborhood experiences.

¿DÓNDE VIVEN LOS LATINOS? THE TYPES OF NEIGHBORHOODS OLDER LATINOS LIVE IN AND THEIR IMPLICATIONS FOR DIABETES

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The spatial distribution of Latinos in U.S. neighborhoods is highly patterned due to a complex set of social, cultural, and economic forces, which leads to the differential distribution of and exposure of resources and opportunities across space. However, less is known about the types of neighborhoods older Latinos live in and how it impacts their health. Using census tracts from the year 2000, we employed a latent class analysis to explore how social and socioeconomic characteristics cluster together to create distinct neighborhood typologies. These typologies were then combined with data from the 2006-2016 Health and Retirement Study (n=3,047). We found that Latinos were more likely to live in predominantly Latino neighborhoods with low socioeconomic status (SES) (40%), multiracial neighborhoods with moderate SES (27%), and predominantly white neighborhoods with moderate SES (15%). Latinos living in predominantly Latino neighborhoods with low SES were more likely to have diabetes than other neighborhood typologies.

NEIGHBORHOOD AND HOUSING CONDITIONS AND RISK OF FALLS

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Physical conditions of living environments can impact risk of falls, however, prior work has focused typically on one domain at a time—either neighborhood or home, capturing limited environmental boundaries of older adults. We extend prior work by considering both neighborhood and home as important residential contexts and examine their impact on the onset of falls over time. Data are drawn from two waves of the Health and Retirement Study (2012 and 2016; N = 2,244). We used interviewers' report on outdoor and indoor dwelling conditions to assess environmental risk factors. One-third of respondents reported at least one fall years later. The presence of green space such as a park near the housing unit and clutter in the home appears to increase the risk of falls over a four-year period. This finding suggests that falls in old age may be determined by a combination of outdoor and indoor risk factors.