

burden, we consider black-white differences in not only stress exposure, but also stress appraisal—how upsetting the exposures are perceived to be across five domains (health, financial, residential, relationship and caregiving). Data come from 6,019 adults ages 52+ from the 2006 Health and Retirement Study. Fully adjusted models show stress exposure and appraisal significantly and independently predicted anxiety and depressive symptoms. Race and stress exposure interactions show that exposure differently predicts anxiety and depressive symptoms while race and appraisal interactions show blacks and whites report similar increases in anxiety and depressive symptoms. Findings suggest stress exposure has varying consequences for mental health of whites and blacks, while stress appraisals have similar consequences across groups.

DOES EARLY-LIFE RACIAL DISCRIMINATION EXPLAIN A MENTAL HEALTH PARADOX AMONG BLACK ADULTS?

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To evaluate the impact of early life racial discrimination (ELRD) on mental health among Black adults. Data were from the Nashville Stress and Health Study (n=618). OLS regression models examined the relationship between ELRD and adult psychological distress; logistic regression estimated the probability of past-year major depressive disorder (MDD). We also assessed whether ELRD moderated the relationship between adult discrimination and mental health. Childhood (b=1.07, SE=0.51, p=0.04) and adolescent ELRD (b=1.32, SE=0.42, p=0.002) were associated with adult distress. Individuals who experienced childhood ERLD had 88% lower odds of adult MDD than individuals with no ELRD. Significant interaction analyses showed that ELRD was generally protective against adult discrimination. While ELRD importantly shapes distress and MDD among Black adults, patterns vary by outcome. Results indicate that adult distress and MDD develop through cumulative adversity processes that are further influenced by sensitive periods in the life course.

EVERYDAY DISCRIMINATION AND KIDNEY FUNCTION AMONG OLDER ADULTS: EVIDENCE FROM THE HEALTH AND RETIREMENT STUDY

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Background: The current study examines the cross-sectional association between everyday discrimination and kidney function among older adults. Methods: We use cross-sectional data from a nationally representative sample of older adults to examine this relationship. Our measure of kidney function derives from the estimated glomerular filtration rate (eGFR) obtained by the Chronic Kidney Disease Epidemiology Collaboration equation, while our indicator of everyday discrimination is drawn from self-reports. Results: Results from our ordinary least squared regression models reveals that, after adjusting for demographic characteristics, everyday discrimination was associated with lower mean eGFR ($\beta=-.79$; S.E.: .34).

The relationship between everyday discrimination and kidney function was not explained by cardiovascular, metabolic, or economic factors. Conclusions: Findings suggest this study suggest that everyday discrimination may be a unique risk factor for poorer kidney function among older adults. Because these findings are cross-sectional, additional research is needed to determine whether the observed associations persist over time.

SESSION 1055 (PAPER)

ECONOMIC AND EMPLOYMENT INTERESTS OF OLDER ADULTS

FINANCIAL EXPLOITATION OF OLDER ADULTS: PRELIMINARY RESULTS FROM A PROSPECTIVE LONGITUDINAL STUDY

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This paper presents study design and preliminary results from a new study funded by the National Institute on Aging that is examining financial exploitation (FE) among 720 White, African-American and Hispanic adults age 60+ (240 per group; 120 age 60-79; 120 age 80+). A conceptual model linking socio-demographics, physical health, social support / integration, cognitive function, financial skills / supports, and psychosocial factors to FE is being evaluated. Three assessments (baseline, 12; 24 mos.) include: a detailed cognitive battery, web-based banking simulation tasks, scam scenarios, and a standardized battery of self-report measures assessing socio-demographic and psychosocial variables. Preliminary baseline results from ~200 participants show support for the proposed model. Exposure to sales, remote purchasing behavior, and telemarketer receptivity (scam exposure); and scam vulnerability as measured by credibility ratings of “legitimate” and “fake” scam scenarios are positively associated with reports of both stranger-initiated and trusted other FE. Older adults with smaller social networks and less social support were more likely to report both exposure and vulnerability to scams. Higher general cognitive abilities, financial skills, and numeracy; and better performance on on-line banking tasks correlate with less scam exposure and vulnerability. Preliminary analyses of psychosocial factors also show that more depressed, impulsive, and trusting older adults report more exposure and scam vulnerability. The paper will present updated analyses of ~500 baseline participants. Understanding multiple pathways to FE is important to advance theory and for the development of interventions to minimize risk.

NATIONAL ELDER MISTREATMENT STUDY WAVE II: MENTAL HEALTH CORRELATES OF FINANCIAL MISTREATMENT

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Objective: Whereas prevalence of elder financial mistreatment has received increased attention over the past decade, health and mental health correlates are rarely studied. Thus, the potential relevance of financial abuse to mental health and perceived health is relatively unknown, and the objective of this article is to illustrate this relationship. **Method:** The second wave of the National Elder Mistreatment Study used random digit dialing telephone survey methodology to assess both recent financial mistreatment and its potential mental health correlates (i.e., diagnoses of depression, post-traumatic stress disorder [PTSD], generalized anxiety disorder [GAD], and self-ratings of physical health) in 774 older adults. **Results:** The study indicated that past-year Wave II financial mistreatment was associated with significantly increased likelihood of depression, PTSD, GAD, and poor self-rated health; and financial mistreatment perpetrated by family members was associated with particularly increased risk of depression. **Discussion:** Assessment of mental health is relevant and important in cases of financial abuse.

SUPPORTING AN OLDER WORKFORCE BY CREATING AGE-FRIENDLY WORKPLACES: INTRODUCING A NEW MULTIDIMENSIONAL MODEL
Raphael Eppler Hattab,¹ Ilan Meshoulam,¹ and Israel Doron¹, 1. *University of Haifa, Israel, Israel*

Creating age-friendly workplace environments is considered a central organizational approach for addressing the challenges of supporting an aging and older workforce. However, there are no concrete definitions or theoretical frameworks that explain the full meaning, assumptions and basic processes of this concept. This paper critically reviews the conceptualizations of the age-friendly workplace in the fields of organizational psychology and gerontology, and proposes (a) a new working definition of the concept, and (b) a multidimensional model that consists of a typology of age-friendly dimensions, representing the implications of human resource policies and practices that demonstrate the ways in which organizational climate and organizational culture support aging workers. This framework enables a better understanding of the organizational-occupational realities within an aging and older labor market, and thus serves as an effective foundation upon which future organizational measurements can be constructed. This presentation is based on the article: Eppler-Hattab, R., Meshoulam, I., & Doron, I. (2019). Conceptualizing Age-Friendliness in Workplaces: Proposing a New Multidimensional Model. *The Gerontologist*. 10.1093/geront/gny184.

UNDERSTANDING RISK AND PROTECTIVE FACTORS FOR ELDER FAMILY FINANCIAL EXPLOITATION: A PREVENTIVE APPROACH

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This paper presents qualitative data from a phenomenological study of 10 men and 38 women (N=48) within families with designated power of attorney (POA) agents. Participants were from 18 states nationwide, aged 20 to 73 (M = 46.6), and had varying educational and income levels. Eighteen individuals alleged that EFFE occurred in their families, 27 did not, and three didn't know. The study explored EFFE

risk and protective factors within Bronfenbrenner's PPCT model (Tudge, 2018). Data were analyzed using a thematic, inductive approach. Specifically, person characteristics (e.g. perpetrators' personality and victims' cognitive functioning), proximal processes (e.g. family patterns of communication and resource sharing), context (e.g. geographic location), and time (e.g. prevailing legal, economic, and cohort factors) were associated with EFFE recognition and intervention. Implications and applications of the PPCT model for helping professionals (e.g., practitioners such as healthcare providers, attorneys, therapists) will be discussed to raise awareness of risk and protective factors within families that may increase or decrease the likelihood that elder financial exploitation by family members will occur. The goal is to improve prevention through helping families address risk factors before older relatives become dependent, encouraging more proactive planning in development of POA and other end-of-life documents, and detect exploitation early.

WORKPLACE SUPPORTS FOR WORKING LONGER: A CASE FOR THE BLACK LOW-WAGE WORKER

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Government-sponsored retirement programs and employer benefits are directly tied to individual employment history and wages. Consequently, Black workers disproportionately face challenges in labor market compensation and retirement benefits. Due to a history of racial discrimination and economic oppression, Black workers earn less income over the life course and are less likely to have insurance support in comparison to their white counterparts in older age. This leads Black adults to remain in the workforce longer for financial support and presents unique physical and psychosocial challenges balancing work obligations and family responsibilities. Further, Black adults also suffer from more chronic illnesses, poor health outcomes, and death at higher rates compared to nearly all other racial groups. Drawing on data derived from a workplace case-study with interviews from 15 low-wage Black workers aged 50+ years, with multiple chronic conditions in the Southern United States. My aims are to (1) understand what workplace supports enable vulnerable workers to remain in the workforce, and (2) identify other buffers (i.e., resilience) to working with chronic conditions that enable prolonged work engagement. Findings suggest that workplaces can better support low-wage workers who cannot afford to retire by offering better pay and health benefits. Supervisor and coworker supports, flexible work arrangements and scheduling, and less stressful work environments also enable sustained work engagement. Research, policy and practice implications of this research include identifying workplace attributes and determining strategies to strengthen them, which is paramount to addressing disparities in work and health outcomes in the vulnerable communities.

SESSION 1060 (SYMPOSIUM)

EXPLORING THE IMPACT OF TECHNOLOGY ON OLDER ADULTS' WELL-BEING

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