

social isolation, using the Berkman-Syme Social Network Index as a framework. Data were derived from Round 1 of the National Health and Aging Trends Study (NHATS), an annual longitudinal panel survey of adults aged 65 and older living in the United States. Results showed that about 4.5% of veterans in the NHATS are severely socially isolated while another 20.9% are socially isolated. After controlling for other explanatory variables, being White, being 85 and older, having lower educational attainment, being unmarried/unpartnered and having lower income were associated with an increased risk of experiencing social isolation. Interventions aiming to improve the well-being of older veterans should consider employing both preventative and amendatory measures. These may include the creation and administration of a standardized social isolation scale during visits to veterans' affairs (VA) medical centers and a general effort to address stressors from military service by destigmatizing and improving access to mental health services.

#### THE IMPACT OF STRUCTURAL AND FUNCTIONAL SOCIAL RESOURCES ON LONELINESS AMONG AMERICANS AGE 50 YEARS AND OLDER

Jillian Minahan Zucchetto, *Fordham University, United States*

Social isolation and loneliness have many negative consequences (e.g., Cacioppo et al., 2006; Griffin et al., 2018; Uchino, 2006), especially among older adults (Perissinotto et al., 2012). According to the cognitive discrepancy theory (CDT), loneliness is the negative psychological state resulting from the perceived discrepancy between one's desired level of social resources and one's actual level of social resources (Peplau & Perlman, 1982; Perlman & Peplau, 1998). Social resources have both structural (e.g., objective) and functional (e.g., perceptions of the quality) aspects (Holt-Lunstad, 2017). The relationship between structural and functional social resources has been described as a filtration process in which functional aspects mediate the association between structural aspects and loneliness (Cacioppo et al., 2016; Hawkey et al., 2008, Hawkey & Kocherginsky, 2018). However, this filtration model has not been empirically tested within the CDT. This study examined the relationship among structural social resources (SSR), functional social resources (FSR), and loneliness cross-sectionally and longitudinally using a sample of 3,345 Americans aged 50 years and older from the 2008 and 2012 waves of the Health and Retirement Study. Results showed that there was a significant indirect effect both cross-sectionally ( $\beta = -.07$ ) and longitudinally ( $\beta = -.06$ ) such that FSR mediated the relationship between SSR and loneliness. Ultimately, the CDT is useful in explaining the complex relationship between structural and functional aspects of one's social resources with loneliness, and interventions may seek to target the functional aspects of one's social network to improve loneliness, rather than focusing solely on structural aspects.

#### Session 4425 (Paper)

##### Long-Term Care Policy and Unmet Needs

###### A PILOT OF A SUSTAINABILITY-EXTENDING INTERVENTION IN CANADIAN NURSING HOMES

Lauren MacEachern,<sup>1</sup> Yuting Song,<sup>2</sup> Liane Ginsburg,<sup>3</sup> Adrian Wagg,<sup>2</sup> Matthias Hoben,<sup>4</sup> Malcolm Doupe,<sup>5</sup>

Carole Estabrooks,<sup>2</sup> and Whitney Berta,<sup>6</sup> 1. *University of Toronto, Toronto, Ontario, Canada*, 2. *University of Alberta, Edmonton, Alberta, Canada*, 3. *York University, York University, Alberta, Canada*, 4. *University of Alberta at Edmonton, Edmonton, Alberta, Canada*, 5. *University of Manitoba, Winnipeg, Manitoba, Canada*, 6. *University of Toronto, University of Toronto, Ontario, Canada*

Understanding of intervention sustainability processes is limited. Failure to sustain evidence-based innovations means that intended improvements are short-lived, scale-up and spread are unlikely, and real losses are incurred on research investments. We explored the sustainability of a health care aide (HCA)-led quality improvement (QI) initiative, Safer Care for Older Persons (in residential) Environments (SCOPE), that was implemented in long-term care homes (LTCHs) in Manitoba, Canada. Based on our understanding of factors influencing post-implementation sustainability processes, we developed and piloted a "low-dose" and "high-dose" "Booster" intervention to extend the two-year post-implementation period over which SCOPE was naturally sustained. Both versions of the "Booster" involved the following components: a HCA-led team with management support, a workshop to review SCOPE QI approaches and tools, a binder of QI resources, and supports from an experienced Quality Advisor (QA). We collected data from various sources to depict the most accurate account of QI sustainability and conducted thematic analysis to understand each team's experience with sustainability processes. We used a qualitative assessment rubric to evaluate the impact of the "Booster" conditions on the teams' performance against core SCOPE components. Our results suggest that the "Booster" served to establish more relaxed expectations and generally renew interest in LTCH QI initiatives. The calibre of management support was associated with teams' performance and management support varied with the level of QA support. These pilot results will inform the next study phase, which examines longer-term sustainability of QI initiatives in LTCHs beyond the initial 2-year post-implementation period.

###### AGING INTO DISABILITY: A CONCEPTUAL CHALLENGE FOR GERONTOLOGY

Jeffrey Kahana,<sup>1</sup> Timothy Goler,<sup>2</sup> and Lawrence Force,<sup>3</sup> 1. *Mount Saint Mary College, Newburgh, New York, United States*, 2. *Norfolk State University, Newport News, Virginia, United States*, 3. *Mount Saint Mary College / Center on Aging and Disability Policy, Mount Saint Mary College, New York, United States*

One of the most fraught subjects facing a fast growing aging population is the subject of aging into disability. This paper examines the processes of aging into disability as a distinct challenge for not only older persons, but also for the field of gerontology, and public policy-makers. Disability in youth and in middle age has largely defined the disability rights agenda, and elders aging into disability have not been the subject of much attention from scholars in the field of disability. Surprisingly, however, scholars and policy-makers in gerontology have also by and large avoided the subject of older persons aging into disability—a complex process that involves impairment, environmental disablement, and changes in social relationships. This process accelerates with advancing age, and disproportionately affects women.