

and their side effects, fragmented care and often have poor understanding of their own health and treatments. These challenges call for solutions that lead to better empowerment and pro-active engagement and for support systems that focus on wellness and preventive care. The conceptual model we offer draws on diverse disciplines including health care management and medicine, information systems, communication, consumer behavior, and sociology to identify a set of key design principles for CDSSS. A review and analysis of the literature in the different fields led to the identification of 6 CDSSS design principles: (1) Systems approach; (2) User experience; (3) Ecosystem perspective for shared resources 4) Social and contextual learning; (5) Accessible design; (6) Designing for trust and empathy. The model clarifies how these design principles (or approaches) inform the development of the three main components of a CDSSS (data integration, communication, and resource integration) and enable the key CDSSS deliverables (learning, social & emotional support and care integration). The conceptual model also helps to lay out an agenda for future research on self-care support systems for older adults.

LOOK WHO'S TALKING: TRADITIONAL AND ELECTRONIC MEDIUMS OF CONTACT LINKED WITH LATER-LIFE SIBLING RELATIONSHIPS

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The sibling role is often the longest lasting relationship between individuals. As such, older adults may turn to siblings in later life as it is a relationship that is already familiar. Having a close and less conflictual relationship with a sibling may be especially important as older adults value siblings for emotional and practical support exhibited through contact. Minimal research has examined mediums of contact used between sibling dyads despite the increase use in technology among older adults. Using a sample of 491 Americans (Mage = 58.96) recruited via Amazon Mechanical Turk (Mturk), the current study examined five mediums of contact (i.e., in person, telephone, e-mail, texting, and social media) and how each type independently is related to sibling closeness and conflict. Further, using regression analyses in STATA, two and three-way interactions were examined to assess the role of sibling dyad composition affecting this relationship. Results indicated that contact through telephone was associated with higher sibling closeness for all sibling dyads, and that association was stronger for females with a sister compared to males with a brother. Further, in person and texting contact was especially beneficial for females with a brother. Main effects revealed contact in person, via social media, over the telephone, or through email, reported more sibling closeness, while those who engaged in more email contact reported less conflict. Thus, even in later life, siblings are keeping in contact with one another through both traditional and electronic mediums of communication, and this contact appears especially beneficial for sisters.

CAREGIVER RESPONSES TO REMOTE ACTIVITY MONITOR ALERTS OF PERSONS WITH DEMENTIA

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The benefits of technology to alert family caregivers to the needs of persons with Alzheimer's disease or related dementias (ADRD) are unclear. Previous research indicates that remote activity monitoring (RAM) system alerts can be alternately reassuring and highly stressful for caregivers. We conducted a parallel convergent mixed-methods analysis of 62 primary caregivers of persons with ADRD to evaluate the association between the number of alerts and caregiver outcomes after 6 months. We assessed caregiver-reported usability of the system as well as self-efficacy, sense of competence, and distress as primary outcomes. Linear regression models tested the association between the number of alerts and caregiver-reported usability and primary outcomes. The number of alerts declined over the first 6 months of system use and was not associated with a change in system usability or primary outcomes. Thematic analysis of caregiver-reported perceptions of RAM use simultaneously probed for more in-depth understanding of caregiver experiences of and feelings towards RAM. Preliminary analyses reveal that 28% of caregivers comments were positive, noting benefits such as early warning of health concerns and peace of mind. 34% of comments were neutral or mixed, and 38% were negative. Concerns included false alarms and accidental triggers, losing sleep due to alarms, and difficulties using the system. These findings help characterize the adjustment period to use RAM technology. The mixed-method results inform future research studies and applications of RAM systems so that researchers and caregivers can better understand the initial adjustment period, address concerns, and avoid discontinuing RAM use prematurely.

AGE-SPECIFIC VIEWS ON INVASIVE AND NON-INVASIVE HUMAN ENHANCEMENTS FOR COGNITIVE DECLINE

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This research examines the degree to which younger and older Americans approve of addressing cognitive decline using either a pill-based or an implant-based intervention to restore prior functioning. Half of a probability-based online sample expressed concerns over side effects and levels of approval for a pill-based intervention whereas the remainder of the sample did so for a relatively invasive implant-based enhancement (data were interviews of 2,025 American adults gathered by NORC's AmeriSpeak panel as part of the AARP Human Enhancements study). We predicted and found that relative disapproval of the implant-based intervention was only significant among those with high concerns over side effects. However, when looking at two age groups for which cognitive decline differed in salience, relative disapproval of the implant-based enhancements were relatively stronger for those 50 and older even among those with few concerns over side effects. This age-based aversion to invasive forms