

provides a unique combination of physiological and psychosocial data that can inform efforts to support MSM in healthy aging. This symposium will present emerging findings from the HAMSM study. Our first paper examines the relationships between psychological connection to the gay community (PSOC) and developmental regulatory strategies associated with health behaviors and more positive self-appraisals. The second paper examines how PSOC is related to HIV risk reduction behaviors, and if there are differences in such behaviors based on HIV status. Our third paper considers how self-perceptions of aging (age discrepancy, aging satisfaction) are related to frailty and frailty transitions, and if these relationships differ by HIV status. The final paper examines the relationship of social support to frailty among MSM by HIV status. Implications of these findings for research, policy, and programs targeting MSM will be discussed.

CONNECTION TO THE GAY COMMUNITY AND SELF-APPRAISALS AMONG OLDER MEN WHO HAVE SEX WITH MEN

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Men who have sex with men (MSM) report greater body dissatisfaction compared with heterosexual men, which increases with age. This may result from internalized gay community values regarding ideal physiques and youth. Using structural equation modeling, we examined these relationships among 1,118 MSM men age 40 and older from the Healthy Aging Study (M age=59.9 years/50.1% HIV+/69.8% non-Hispanic White). We hypothesized gay community attachment would be related to self-appraisals (body dissatisfaction/internalized ageism), and that this relationship would be mediated by developmental regulation strategies (physical activity/exercise intentions). The model fit the data well (RMSEA = .048, 90% CI 0.017-0.079). Contrary to our hypothesis, connection to the gay community was related to positive self-appraisals (-.40, $p < .001$), with significant indirect effects via regulation strategies (-.12, $p < .002$). Thus, gay community connections are related to positive self-appraisals in older GB men and enhance strategies supporting physical and psychological health. Implications for practice will be discussed.

PSYCHOLOGICAL SENSE OF COMMUNITY AND THE USE OF CONDOMS AND PREP AMONG A SAMPLE OF AGING BLACK MSM

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Psychological sense of community (PSOC) in Black men who have sex with men (BMSM) may facilitate condom and pre-exposure prophylaxis (PrEP) use to prevent HIV transmission. Understanding BMSM's PSOC contribution to HIV risk reduction may inform HIV prevention efforts for this population, that is disproportionately affected by HIV. Adjusted for sociodemographic characteristics and HIV status, we conducted logistic regressions to test the association between PSOC and condom use among aging BMSM ($n=176$). Multivariate analyses exhibited no association between PSOC and condom use (AOR= 0.994, 95% CI= 0.942, 1.049). HIV+ participants had higher condom use odds compared to HIV- participants (AOR= 4.031, 95% CI= 1.723, 9.426). A sub-analysis of HIV- participants ($n=61$), showed no association between PSOC and PrEP use (AOR= 1.002, 95% CI= 0.904, 1.112). These results have implications for secondary HIV prevention and future research on alternative aspects of social support that may increase BMSM's HIV risk reduction behaviors.

SELF-PERCEPTION OF AGING AND FRAILTY PHENOTYPE AMONG HIV+ AND HIV- OLDER MEN

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Self-perception of aging is an important predictor of health. We examined the relationship of self-perception of aging (age discrepancy and aging satisfaction) with frailty phenotype between HIV+ and HIV- men in the Multicenter AIDS Cohort Study. 499 HIV+ and 549 HIV- men were included in the analytic sample (median age 61 years IQR 56-66 years). Frailty status was based on the Fried frailty phenotype and measured at semi-annual study visits beginning 3/2015 or 9/2015, 3/2016 and 3/2019. Baseline frailty was: HIV- 8.9%; HIV+ 13.9%. Low aging satisfaction and feeling older was positively associated with remaining frail (ORs: 6.64; 95% CI: 3.88-11.38; 5.68; 95% CI: 3.06-10.56) or transitioning between non-frail and frail states (ORs: 2.72; 95% CI: 1.56-4.74; 2.50; 95% CI: 1.11-5.64), over a 3-year period. There was no statistically significant difference by HIV status. Assessment of self-perception of aging may be useful in the setting of frailty evaluation among HIV+ and HIV- men.

SOCIAL SUPPORT AND FRAILTY IN HIV POSITIVE AND NEGATIVE MEN WHO HAVE SEX WITH MEN

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