

FACTORS OF CAREGIVING RESILIENCE BY RACE-ETHNICITY IN A NATIONAL SAMPLE OF CAREGIVERS

Jinmyoung Cho,¹ and Natasha Peterson,² 1. *Baylor Scott & White Health Research Institute, Temple, Texas, United States*, 2. *Iowa State University, Iowa State University, Iowa, United States*

Despite heavy burdens and responsibilities, some caregivers are more likely to cope better with their care responsibilities than others, and this could vary by cultural beliefs and norms on caregiving. This study examined contributing factors of resilience with three racial-ethnic groups (White, Blacks, Hispanic). A total of 2,652 caregivers were included from Round 7 of the National Study of Caregiving. Caregiving resilience was defined by higher levels of care demands and higher levels of psychological well-being. Five domains of contributing factors were included: socio-demographic characteristics, context of care, caregivers' psychological attributes, informal and formal support. Multiple logistic regressions showed that caregivers with higher psychological attribute levels were more likely to be resilient in all three groups. However, unique predictors have also been observed by race-ethnic groups (e.g., Blacks using formal support were more resilient). These findings suggest the need for culturally specific programs to facilitate resilience among caregivers.

COGNITIVE-BEHAVIORAL STYLES OF DEMENTIA CARE MANAGEMENT: TARGETING AND TAILORING TO STYLE

Amanda Leggett,¹ Hyunjung Koo,² Cathleen Connell,³ Laura Gitlin,⁴ and Helen Kale,⁵ 1. *University of Michigan, Ypsilanti, Michigan, United States*, 2. *University of Michigan, Ann Arbor, Michigan, United States*, 3. *University of Michigan School of Public Health, Ann Arbor, Michigan, United States*, 4. *Drexel University, College of Nursing and Health Professions, Drexel University, Pennsylvania, United States*, 5. *UC Davis, Sacramento, California, United States*

Despite an extensive literature on the stress process of caregiving, little attention has focused on how caregivers provide care (caregiving styles). To explore caregiving styles among 100 primary caregivers for persons living with dementia, we utilize k-modes machine learning analysis. This technique clusters caregiver's use of behavioral (Dementia Management Strategies Scale; criticism, active management, encouragement) and cognitive (Caregiver Readiness Scale; understanding, adaptability) approaches into style profiles. Three styles were identified: Managers (n=25; high use of criticism, moderate use of active management and encouragement, poor understanding and adaptability), Adapters (n=48; low use of criticism, high use of adaptive management and encouragement, good understanding and adaptability), and Avoiders (n=27; low use of all behavioral strategies, moderate adaptability and understanding). Styles differ by demographic and care characteristics. Findings suggest that caregivers have variable approaches to care that are measurable, thus, targeting/tailoring interventions to caregiver style could be an effective approach.

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Cardiovascular Health and Aging

ARTERIAL STIFFNESS AND AGE MODERATE THE ASSOCIATION BETWEEN PHYSICAL ACTIVITY AND COGNITION IN OLDER ADULTS

Adrian Noriega de la Colina,¹ Atef Badji,² Maxime Lamarre-Cliche,² Louis Bherer,² Hélène Girouard,² and Navin Kaushal,³ 1. *McGill University, Montreal, Quebec, Canada*, 2. *Université de Montréal, Montreal, Quebec, Canada*, 3. *University of Indiana, Bloomington, Indiana, United States*

Background: Evidence supports that time spent on physical activity has beneficial effects on cognition in older adults. Nevertheless, this beneficial effect is likely to change in function of individual modifying factors like age and level of arterial stiffness. This study aims to reveal whether arterial stiffness and age modulate the positive impact of physical activity on cognition by developing a double moderation model. Methods: 110 healthy older adults aged 60 to 75 years old were examined for arterial stiffness (carotid-femoral Pulse Wave Velocity [cf-PWV]), global cognition (composite score of Montreal Cognitive Assessment, and Mini-Mental State Examination), and self-reported physical activity (PACED diary). Using PROCESS macro for SPSS, we evaluated if cf-PWV (moderator 1), and age (moderator 2) moderate the relationship between physical activity (X) and global cognition (Y). The threshold for high stiffness was set at 8.5 m/s based on previous studies that reported this cut-off more appropriate for classifying cerebrovascular risk groups. Results: The interaction of arterial stiffness x age moderated the effect of physical activity on global cognition ($\beta = -.89$, $SE = .42$, $p = .037$) (Model: $R^2 = .15$, $p = .018$). Physical activity had a positive effect on cognition in younger-older adults (aged 60 to 68.5 years) with cf-PWV > 8.5 m/s ($\beta = .57$, $SE = .222$, $p = .011$, 95% CI .133 to 1.014) and on older-older adults (aged 68.6 to 75 years) with cf-PWV < 8.5 m/s ($\beta = .49$, $SE = .190$, $p = .010$, 95% CI .116 to .869). Conclusions: Identifying the right age groups and arterial stiffness levels at which physical activity can have beneficial effects on cognition is a key step in providing tailored behavioral interventions.

CAROTID INTIMA MEDIA THICKNESS AND COMORBID CARDIOMETABOLIC DYSFUNCTION IN WOMEN: THE SWAN STUDY

Aleda Leis,¹ Emma Barinas-Mitchell,² Ana Baylin,¹ Samar El Khoudary,² Elizabeth Jackson,³ and Carrie Karvonen Gutierrez,¹ 1. *University of Michigan, Ann Arbor, Michigan, United States*, 2. *University of Pittsburgh, Pittsburgh, Pennsylvania, United States*, 3. *University of Alabama, Birmingham, Alabama, United States*

Metabolic syndrome (MetS) and obesity are risk factors for atherosclerosis but their combined impact is unknown. The aim of this study was to quantify the added risk of obesity on carotid artery intima media thickness (cIMT), an early indicator for atherosclerosis, beyond MetS alone. The Study of Women's Health Across the Nation (SWAN) is a multi-center, multi-ethnic cohort of women traversing