

to the Internet of Things (IoT), provide great promise and potential to support successful aging-in-place for people with long-term disabilities. This symposium highlights ongoing research at the TechSAGE Rehabilitation Engineering Research Center to identify technology needs and develop/adapt new technologies to promote independence, health, and participation of this population. To understand user needs, Harris et al. will present findings from a large-scale interview study with older adults with long-term vision and mobility disabilities (N=120) that explored specific task-based challenges with community activities (e.g., going to entertainment events, volunteering) as well as solutions and strategies to overcome them. Koon et al. will present findings on perceived facilitators and barriers to using digital assistants (e.g., Amazon Alexa) to facilitate a variety of everyday tasks at home, from shopping to communicating with others, among adults aging with mobility disabilities. Levy et al. will discuss findings from research driving the creation of augmented reality tools that can enable individuals to experience how IoT devices, such as smart thermostats and lightbulbs, could be used within the context of one's own abilities and home. Mitzner et al., will describe the development of a Tele Tai Chi intervention for older adults with long-term mobility disabilities that employs teleconferencing software to translate an in-person, evidence-based class to an online, social experience. TechSAGE Program Officer, Sarah Ruiz (National Institute on Disability, Independent Living, and Rehabilitation Research), will serve as the discussant.

A TELEWELLNESS APPROACH TO REDUCE BARRIERS TO GROUP EXERCISE FOR ADULTS AGING WITH MOBILITY DISABILITY

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Group exercise classes have the potential to provide physical, cognitive, and emotional health benefits, through the physical activity performed as well as the social interaction among class participants. Substantial barriers exist for adults aging with lower-body mobility disabilities to engage in group exercise classes, including lack of transportation to classes, inaccessible buildings where classes are held, and lack of appropriate modifications offered for this population of older adults. Just as telehealth interventions have reduced barriers to healthcare, telewellness interventions can reduce barriers to engaging in wellness activities, such as group exercise classes. We will discuss a research study employing teleconferencing software to translate an evidence-based group tai chi class for adults aging with lower-body mobility disabilities. We will present the adaptation requirements identified to test the efficacy of a telewellness intervention for improving increasing social interaction and positive health behaviors (i.e., physical exercise frequency) for adults aging with disabilities.

SUPPORTING AGING IN PLACE WITH THE INTERNET OF THINGS: MEETING CHALLENGES OF USE THROUGH AUGMENTED REALITY TOOLS

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Internet of Things (IoT) devices (including smart thermostats, lightbulbs, and door locks) have the potential to greatly enhance independence and promote aging-in-place among older adults with mobility disabilities. However, these devices require extensive information technology expertise to select, configure, use, and adapt to meet one's needs and this creates considerable barriers to their adoption, acceptance, and utilization. Meanwhile, increasingly available consumer augmented reality (AR) technologies can enable individuals to experience how IoT function and are used within the context of one's own abilities and home. This may provide potential users an effective means of overcoming barriers to adoption, acceptance, and utilization of IoT to support aging in place. We present preliminary results from a participatory design study of older adults with mobility disabilities on the use of AR on a smart phone device to support IoT understanding.

IDENTIFYING COMMUNITY PARTICIPATION CHALLENGES FOR ADULTS AGING WITH MOBILITY AND VISION DISABILITIES

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There are growing numbers of older adults with mobility and vision disabilities acquired in early to mid-life who are a part of a population described as "aging with disability". For these individuals, the addition of normative age-related declines (e.g., vision loss, arthritis) on top of a long-term disability can create extensive barriers to community participation. We present findings on activity challenges with community participation among older adults with long-term vision and mobility disabilities (N=120) from the Aging Concerns, Challenges, and Everyday Solution Strategies (ACCESS) interview study. Results provide detailed insights on the specific task-based challenges experienced when engaging in one's community (e.g., going to entertainment events, doing activities with a group or organization, and participating in religious services and activities) as well as the solutions and strategies employed to overcome those challenges. Findings provide guidance for the design of supportive technologies that promote participation and independence for this understudied population.

VOICE-ACTIVATED DIGITAL ASSISTANTS: PERCEPTIONS FROM NOVICE USERS WITH LONG-TERM MOBILITY DISABILITY

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Voice-activated digital assistants (e.g., Amazon Echo, Google Home) are an emerging technology that have great potential to provide support for adults aging with a long-term mobility disability. Digital assistant technologies allow the user to perform a variety of everyday tasks and activities through voice interactions. Such tasks may include environmental control (e.g., turning on/off lights, voice-activated temperature control); supporting self-health management

(e.g., providing medication reminders, encouraging physical activity engagement); and fostering opportunities for social engagement (e.g., messaging/calling others, playing games remotely). This presentation will focus on the perceived facilitators and barriers to digital assistant use in the home among adults aging with mobility disabilities. The findings provide design guidelines and insight for intervention implementation for the use of these technologies for the target population.

SESSION 3505 (SYMPOSIUM)

DECONSTRUCTING THE MODEL-MINORITY MYTH OF U.S. ASIANS: DETERMINANTS AND CONSEQUENCES OF ELDER MISTREATMENT

Chair: XinQi Dong, *Rutgers Institute for Health, Health Care Policy and Aging Research, New Brunswick, United States*

Co-Chair: Melissa Simon, *Northwestern University, Chicago, Illinois, United States*

Elder mistreatment (EM) is increasingly recognized as a global health concern. Among U.S. minority and immigrant populations, the social contexts and psychological consequences associated with EM remain poorly understood. Further population-based epidemiological studies using standard EM measures are required to advance the field. To address this gap and to challenge prior assumptions regarding Asian populations, this purpose of this symposium is to improve our understanding of EM epidemiology in an older minority population. Data were drawn from the Population-based Study of Chinese Elderly in Chicago (PINE), a longitudinal, representative, population-based study of 3,157 community-dwelling Chinese older adults in the greater Chicago area. Session 1 will examine the transmission between child mistreatment, intimate partner violence, and EM. Session 2 will take a typology approach to capture the multifaceted family relationships, and will further examine which family typologies were associated with greater likelihood of EM, while which typologies were protective against EM. Session 3 will explore the positive and negative aspects of social support from spouse, family, and friends in relationship to EM subtypes, including psychological, physical, financial and sexual mistreatment, and caregiver neglect. Session 4 will examine the relationship between broad, moderate, and strict definitions of EM and likelihood of experiencing anxiety. Last, Session 5 will explore the differential relationships between EM subtypes and depressive symptoms. In summation, this symposium challenges popular conceptions of the “model minority myth” and aims to increase the practical and clinical relevance of EM epidemiology in community, research, healthcare, and policy settings.

CYCLE OF VICTIMIZATION: CHILD MALTREATMENT, INTIMATE PARTNER VIOLENCE, AND ELDER ABUSE IN A U.S. CHINESE POPULATION

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Victims of violence might have higher risks of revictimization, but this has been insufficiently

examined among older populations. The present study used cross-sectional data among 3,157 U.S. Chinese older adults in Chicago, Illinois. Multiple logistic regression analyses were used to examine the relationships among subtypes (psychological, physical/sexual, financial exploitation, caregiver neglect) of child maltreatment (CM), intimate partner violence (IPV), and EM. Violence experiences were positively associated. CM psychological was positively associated with IPV psychological (OR 7.60, 95% CI 4.29-13.45) and EM psychological (OR 3.79, 95% CI 2.20-6.51). CM physical/sexual was positively associated with IPV physical/sexual (OR 1.86, 95% CI 1.02-3.38) and IPV physical/sexual was positively associated with EM physical/sexual (OR 8.54, 95% CI 3.53,20.64). EM financial exploitation was positively associated with all types of CM and IPV, whereas EM caregiver neglect has no significant association with any CM or IPV. Clinical and policy implications of the findings will be discussed.

TYPOLGY OF FAMILY RELATIONSHIP AND ELDER MISTREATMENT IN A U.S. CHINESE POPULATION

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Early research on family relationship and Elder Mistreatment (EM) often focused on one or two indicators of relations. A typology approach that capture the complexity and variation of relations is a useful tool to understand the association between multifaceted family relationship and EM. EM was measured by a modified Vulnerability to Abuse Screening Scale. Latent Class Analysis was used to construct family typologies, evaluating structural, associational, functional, affectual, and normative aspects of family relationship. Logistic regression was used. Unobligated ambivalent (OR, 1.90; 95%CI, 1.54-2.34) and detached (OR, 1.78; 95%CI, 1.32-2.42) typologies were associated with greater risk of EM, while tight-knit (OR, 0.34; 95%CI, 0.27-0.44) typology was associated with lower risk of EM. Unobligated ambivalent typology, featured by high intergenerational closeness and conflict, was prevalent among US Chinese immigrants, and associated with greater likelihood of EM. Culturally customized social services were suggested to reduce intergenerational ambivalence and prevent EM for immigrants.

SOURCES SOCIAL SUPPORT AND SUBTYPES OF ELDER MISTREATMENT AMONG CHINESE OLDER ADULTS: FINDINGS FROM THE PINE STUDY

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To examine the relationships between positive social support (PSS) and negative social support (NSS) from different sources and subtypes of EM, we used the data from a representative sample of 3,157 Chinese older adults aged 60 years or older in Chicago. Subtypes of EM include psychological