

studies could examine the influence of cumulative exposure to natural disasters, personal events and historical events on health outcomes of older immigrants.

#### FACTORS ASSOCIATED WITH HEALTH-RELATED QUALITY OF LIFE IN KOREAN ELDERLY BY REGION

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There have been inequalities in healthcare indices in the elderly by regions in Korea, and this gap is increasing. To improve their health-related quality of life (HRQoL), it is essential to identify the cause of the regional health gap and to work out solutions. This study aimed to analyze the factors associated with HRQoL in the Korean population aged over 65 years by region. Integrated raw data from the 2017 Korea Community Health Survey (n = 57,317), a cross-sectional study, were utilized. Based on the reduced Social-Ecological Model, the dependent variable was HRQoL and individual, interpersonal, and community factors were independent variables. Data were analyzed by complex-samples descriptive methods, and complex-samples general linear model (CSGLM). In both regions, individual factors (gender, age, household income, education level, drinking, BMI, sleep duration, the number of chronic illness, economic status, subjective health status, and physical activity), interpersonal factors (neighbor and friend contact frequency, religious activity, fellowship activity), and community factors (satisfaction with safety level, public transportation, and medical service) were commonly associated with HRQoL of elderly people ( $p < .05$ ). In urban areas, household type and charity activity were associated with HRQoL, in contrast, neighboring help was associated with HRQoL in rural areas ( $p < .05$ ). Based on the results of this study, multi-dimensional efforts considering personal, social, and environmental factors are necessary to improve HRQoL of the elderly. Furthermore, it implies that efforts should be made to ensure health equity through social support, or improvement of community factors considering regional characteristics.

#### CUMULATIVE ADVERSITY AND COGNITIVE FUNCTION AMONG OLDER ADULTS

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The majority of studies on traumatic life events focus on posttraumatic stress disorder and depression, while less is known whether the cumulative exposure to traumatic events over the life course will deteriorate cognitive function. This study aims to investigate the association between lifetime traumatic events and cognitive function in an immigrant population. The data were drawn from the Population Study of Chinese Elderly in Chicago (PINE). Face-to-face interviews were conducted with a sample of 3,126 U.S. Chinese older adults in 2017-2019. Twelve types of traumatic events were assessed: physical assault, residential fires, sexual assault, miscarriage, abortion, imprisonment, being falsely accused, divorce, death of a loved one, being robbed, experiencing cancer, and being homeless. Cognitive

function was measured through global cognition, episodic memory, working memory, processing speed, and Mini-Mental State Examination (MMSE). Linear regression was performed. In our sample, the maximum traumatic events experienced by one participant are eight types. Older adults who experienced one additional personal event were associated with higher global cognition ( $b=0.101$ ,  $SE=0.012$ ), episodic memory ( $b=0.130$ ,  $SE=0.016$ ), working memory ( $b=0.151$ ,  $SE=0.034$ ), processing speed ( $b=1.709$ ,  $SE=0.178$ ), and MMSE ( $b=0.124$ ,  $SE=0.057$ ), while controlling for age, gender, income, and education. In contrast with earlier studies, we identified the positive relationships between traumatic events and cognition. Older adults who had prior experience with stressful life events could demonstrate an advantage over those without such an experience. Further studies could investigate how individuals would respond to stressful life events, and how their resilience mechanism would promote cognitive function.

#### HOUSING COSTS BURDEN AND SELF-RATED HEALTH: PRELIMINARY FINDINGS FROM A U.S. SAMPLE

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Self-rated health is a multidimensional construct that includes not only physical health but also emotional and social well-being. Previous research has demonstrated that multiple factors contribute to individual self-rated health, including income. Because income is a somewhat limited indicator of older adults' financial circumstances, alternative measures such as housing cost burden may enhance our understanding of contributors to self-rated health. Further, because homeowners and renters may have a different attachment to their home and neighborhood, homeownership may moderate the association between housing cost burden and self-rated health. This study examined these relationships using data from 3,212 older adults in round 7 (2017) of the National Health & Aging Trends Study. Findings from multiple linear regression models indicate that the housing cost burden is associated with lower self-rated health, and this association is stronger for renters compared to homeowners. The findings indicate the potential for reduced housing cost burden to have a positive effect on health. The poster will conclude with practice and policy implications, including the potential benefits of expanding rental assistance programs to older adults who may not meet current income requirements but are experiencing high housing cost burden, as well as research implications, including the need for longitudinal approaches.

#### REFLECTIONS FROM HOMELAB: DEVELOPING TASKS TO MEASURE UPPER-BODY FUNCTION IN A SIMULATED HOME

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Homelike research spaces provide a unique context for studying older adulthood by blurring the boundaries between the participant's own home and traditional laboratories. Such intermediary spaces hold promise for