This study examined whether self-esteem mediates the association between perceived elderly stigma and emotional well-being (loneliness and emotional isolation) among Korean older adults, and how these processes differ by marital status. Using the 2018 Age Integration Survey, a cross-sectional national survey of adults in Korea, we analyzed data from 266 older adults aged 60 and older. Older adults who perceived greater elderly stigma reported higher levels of loneliness and emotional isolation. Self-esteem played a significant indirect role in the association between perceived elderly stigma and the two emotional well-being outcomes. Moderated mediation analyses further revealed significant differences by marital status; self-esteem was a more powerful mechanism among unmarried older adults relative to their married counterparts. The findings suggest that efforts to minimize public and internalized stigmatization of older adults and to improve their own self-esteem may be critical for their emotional well-being.

THE EFFECT OF OLDER ADULTS' RELATIONAL STRESS, ENVIRONMENTAL STRESS, AND COPING ON WELL-BEING

Meeryoung Kim, *Daegu University, Gyeongsan, Republic of Korea*

This study used the stress process model for analyzing older adults' stressors and coping resources, which compares relational and environmental stressors (Pearlin et al., 1990). Additionally, the effect of coping abilities and social support on well-being was compared. This study used the 5th wave data of KReIS (Korean Retirement and Income Studies) that were collected in 2014. The sample included 4,072 older Korean adults aged 60 and older. Relational and environmental stressors were used as the independent variables. Social support and coping were used as coping resources. For the dependent variable, life satisfaction and perceived health were used. Since the stress model is a process model, hierarchical multiple regression was used. Environmental stressors had a significant effect on reducing life satisfaction. Relational and environmental stressors had significant negative effects on perceived health. Both coping and social support had a significant effect on both life satisfaction and perceived health.

CORRELATES OF LONELINESS IN OLDER KOREAN AMERICANS: INTERACTIVE EFFECTS OF NEGATIVE FAMILY INTERACTIONS

Nan Sook Park,[1] Yuri Jang,[2] David Chiriboga,[1] and Soondool Chung,[3] *1. University of South Florida, Tampa, Florida, United States, 2. University of Southern California, Los Angeles, California, United States, 3. Ewha Womans University, Seoul, Republic of Korea*

This study examined factors affecting the feelings of loneliness among older Korean Americans. Data were drawn from a survey with older Korean Americans aged 60 or over (N = 2,150) in five states (California, New York, Texas, Hawaii, and Florida), conducted during 2017–2018. In hierarchical multiple regression models, loneliness was regressed on five blocks of variables: (1) demographic/health (age, gender, education, financial status, chronic conditions, and physical disabilities); (2) immigration-related (length of stay in the U.S., and acculturation); (3) social engagement (having meals alone, family network, friend network, activity participation, and community engagement); (4) negative family interactions; and (5) interactions of negative family interactions with social engagement variables. A significant interaction was found in the relationship between friend network and negative family interactions: the impact of negative family interactions on loneliness was buffered by friend network. Implications of findings were discussed regarding working with older immigrants with limited social networks.

LIFE STRESSORS, SOCIAL CAPITAL, AND MENTAL DISTRESS IN MULTIETHNIC GROUPS OF OLDER ASIAN AMERICANS

Yong Ju Cho,[1] Audrey Hai,[2] and Yuri Jang,[1] *1. University of Southern California, Los Angeles, California, United States, 2. University of Texas at Austin, Austin, Texas, United States*

Using data from older participants from the 2015 Asian American Quality of Life survey (n = 533), the present study assessed direct and interactive effects of life stressors and social capital. The sample includes diverse Asian ethnic groups (Chinese, Asian Indian, Korean, Vietnamese, and others). Among all groups, high levels of mental distress were found in Koreans and Vietnamese. In the multivariate analyses, Korean ethnicity (compared to Chinese) was found to be a significant predictor to mental distress. As significant risk factors to mental distress, all stressor variables accounted for 9% of the variance of mental distress. Social capital variables explained the variance by 4%. None of the interaction terms reached statistical significance. Findings confirmed the negative effects of stressors and the positive effects of social resources across older Asian Americans. However, it was interesting to note that ethnic variations disappeared when stressors and social capitals were taken into considerations.

EXPLORING COMMUNITY LEADERS' UNDERSTANDING AND ATTITUDES TOWARD DEPRESSION AMONG OLDER KOREAN AMERICANS

Eunhye Kim, *Augusta University, Augusta, Georgia, United States*

This study explores community leaders' understanding and attitudes toward depression among older Korean Americans. The community leaders who provide services for older adults play a significant role because these leaders typically engage with the target population by providing services. A qualitative method was applied for this study. A total of 12 community leaders were interviewed for 60 minutes using the semi-structured interview guide. The constant comparative approach was employed to analyze data using NVivo software. The findings indicated that the community leaders were aware of the severity of the issues, but lacked knowledge regarding depression and had stereotypes against depression. Those leaders identified negative personality issues of people with depression and desired to avoid discussing depression with older adults. The results suggest that interventions are essential to support community leaders and empower them to take actions to provide services to promote understanding of depression in older adults.