

culturally-tailored implementation of services. Shepherd-Banigan et al. report on a quantitative needs assessment of over 1,500 caregivers of older Veterans enrolled in Veterans Administration healthcare. Providing care to individuals with co-morbid conditions predicted higher levels of distress and burden among caregivers, pointing to likely benefit from additional caregiver-focused support programs. The paper by Gum and co-authors moves to assessment of outcomes by examining mortality and other outcomes among older adults screened by an Area Agency on Aging and either receiving or waiting for services. Finally, the paper by Ayalon and Shinan-Altman use service evaluation to demonstrate the importance of needs assessment and the gap between the vision of service developers and real life constraints. The included papers discuss the value of various methodologies, illustrating the important role that assessment and evaluation play in service development and implementation for older adults and caregivers.

LESSONS FROM AN EVALUATION OF A TRAINING PROGRAM OF PAID ELDERCARE WORKERS

Liat Ayalon, *Bar-Ilan University, Ramat Gan, HaMerkez, Israel*

The present study is based on a three-year evaluation of an Israeli training program for local paid elder care workers, called "community care." Interviews were conducted with all stakeholders involved in the program, including program developers, facilitators, funders, trainees, dropouts, employers, and older care recipients. Qualitative thematic analysis was used, supplemented by quantitative data concerning the program's inputs, outputs and outcomes. The program had multiple strengths, including a substantial funding stream and a highly skilled and committed team. Yet, out of 130 participants (in the 7 training programs evaluated), only 94 completed the program and 31 were later employed as care workers. Three main challenges to the efficacy of the training program were identified. The findings stress the importance of adequately conducting the appropriate needs assessment prior to embarking on a new social program and illustrate the tension between an ideal prototype and real-life constraints.

PERSPECTIVES ON DEMENTIA SERVICE USE AND FAMILY CAREGIVING AMONG THE ONEIDA NATION OF WISCONSIN

Mary Wyman,¹ Nickolas Lambrou,¹ Debra Miller,² Sunshine Wheelock,³ Florence Petri,⁴ Marlene Summers,¹ Carey Gleason,⁵ and Dorothy Edwards,¹ 1. *University of Wisconsin, Madison, Wisconsin, United States*, 2. *Oneida Comprehensive Health Division, Madison, Wisconsin, United States*, 3. *Oneida Elder Services, Madison, Wisconsin, United States*, 4. *Oneida Nation Commission on Aging, Madison, Wisconsin, United States*, 5. *University of Wisconsin School of Medicine and Public Health, Madison, Wisconsin, United States*

Prevalence of dementia among American Indian/Alaska Natives (AI/AN) is higher than in white populations, and AI/AN communities experience dementia care service gaps. This study explored perspectives within AI/AN communities regarding dementia, the family caregiver role, and home and community-based service use. Using tenets of

Community-Based Participatory Research, qualitative interviews and a brief survey were conducted with 22 members of the Oneida Nation of Wisconsin (mean age 71 years, 73% female). Of the sample, 63.6% identified as a past or current family caregiver for a loved one with dementia. Awareness of services varied; 82% were aware of memory cafes, 75% knew of the caregiver support group, and 43% were familiar with dementia care specialist services. Thematic analysis revealed shared values of involving the family and community in dementia care, and offer guidance to support greater engagement in services. Implications for culturally-tailored service provision within AI/AN communities are discussed.

FAMILY CAREGIVERS OF VETERANS EXPERIENCE HIGH BURDEN, MENTAL HEALTH DISTRESS, AND FINANCIAL STRAIN

Megan Shepherd-Banigan,¹ Sophia Sherman,² Jennifer Lindquist,² Katherine Miller,² Matthew Tucker,² Valerie Smith,³ and Courtney Van Houtven,⁴ 1. *Duke University School of Medicine, Durham, North Carolina, United States*, 2. *US Department of Veterans Affairs HSR&D, Durham, North Carolina, United States*, 3. *U.S. Department of Veterans Affairs HSR&D, Durham, North Carolina, United States*, 4. *US Department of Veterans Affairs, Durham, North Carolina, United States*

We describe the caregiving experiences and needs of family caregivers of older Veterans enrolled in the U.S. Department of Veterans Affairs (VA). We conducted telephone surveys with 1,509 caregivers to assess caregiver health and well-being. Caregivers were primarily female, <50 years old, white, and the Veterans' spouse. Veterans had substantial functional limitations and required care for multiple conditions, commonly, mental illness, dementia, and heart disease. On average, caregivers provided care for 9.6 hours per day and 6.7 days per week. Burden and depressive symptoms were above clinical thresholds with average scores of 21.8 (Zarit burden) and 11.5 (CES-D 10). Levels of perceived loneliness and financial strain were high. As this population needs emotional support, respite care services, social engagement, and training to care for aging Veterans, the expansion of enhanced caregiver services and supports to this population (expected in 2020) through the VA Mission Act of 2018 will be beneficial.

MORTALITY AND HEALTH OUTCOMES FOR OLDER ADULTS SCREENED BY AN AREA AGENCY ON AGING OVER A 4.5-YEAR PERIOD

Amber Gum,¹ Lawrence Schonfeld,¹ Kevin Kip,¹ Mary Goldsworthy,¹ Jesse Bell,² Kyaien Conner,¹ Ohad Green,³ and Katie Parkinson,⁴ 1. *University of South Florida, Tampa, Florida, United States*, 2. *University of south florida, Tampa, Florida, United States*, 3. *University of Oxford, Oxford, England, United Kingdom*, 4. *Senior Connection Center, Inc., Tampa, Florida, United States*

Area Agencies on Aging (AAA) screen older adults and oversee delivery of a wide range of home- and community-based services (HCBS). We examined the assessment process, services, and mortality and health outcomes for older adults screened by an Area Agency on Aging in west-central Florida. Most were self/family referred (78.9%). Using data from July 2013-December 2018, 23,225 older adults were screened.