

provides a unique combination of physiological and psychosocial data that can inform efforts to support MSM in healthy aging. This symposium will present emerging findings from the HAMSM study. Our first paper examines the relationships between psychological connection to the gay community (PSOC) and developmental regulatory strategies associated with health behaviors and more positive self-appraisals. The second paper examines how PSOC is related to HIV risk reduction behaviors, and if there are differences in such behaviors based on HIV status. Our third paper considers how self-perceptions of aging (age discrepancy, aging satisfaction) are related to frailty and frailty transitions, and if these relationships differ by HIV status. The final paper examines the relationship of social support to frailty among MSM by HIV status. Implications of these findings for research, policy, and programs targeting MSM will be discussed.

CONNECTION TO THE GAY COMMUNITY AND SELF-APPRAISALS AMONG OLDER MEN WHO HAVE SEX WITH MEN

Mark Brennan-Ing,¹ Michael Plankey,² Sabina Haberlen,³ Steven Meanley,⁴ Andre Brown,⁵ Deanna Ware,² James Egan,⁵ and Mackey Friedman,⁵ 1. *Hunter College, CUNY, New York, New York, United States*, 2. *Georgetown University Medical Center, Washington, District of Columbia, United States*, 3. *Johns Hopkins University, Baltimore, Maryland, United States*, 4. *University of Pennsylvania, Philadelphia, Pennsylvania, United States*, 5. *University of Pittsburgh, Pittsburgh, Pennsylvania, United States*

Men who have sex with men (MSM) report greater body dissatisfaction compared with heterosexual men, which increases with age. This may result from internalized gay community values regarding ideal physiques and youth. Using structural equation modeling, we examined these relationships among 1,118 MSM men age 40 and older from the Healthy Aging Study (M age=59.9 years/50.1% HIV+/69.8% non-Hispanic White). We hypothesized gay community attachment would be related to self-appraisals (body dissatisfaction/internalized ageism), and that this relationship would be mediated by developmental regulation strategies (physical activity/exercise intentions). The model fit the data well (RMSEA = .048, 90% CI 0.017-0.079). Contrary to our hypothesis, connection to the gay community was related to positive self-appraisals (-.40, $p < .001$), with significant indirect effects via regulation strategies (-.12, $p < .002$). Thus, gay community connections are related to positive self-appraisals in older GB men and enhance strategies supporting physical and psychological health. Implications for practice will be discussed.

PSYCHOLOGICAL SENSE OF COMMUNITY AND THE USE OF CONDOMS AND PREP AMONG A SAMPLE OF AGING BLACK MSM

Andre Brown,¹ Mark Brennan-Ing,² Steven Meanley,³ Sabina Haberlen,⁴ Deanna Ware,⁵ James Egan,¹ Mackey Friedman,¹ and Michael Plankey,⁵ 1. *University of Pittsburgh, Pittsburgh, Pennsylvania, United States*, 2. *Hunter College, CUNY, New York, New York, United States*, 3. *University of Pennsylvania, Philadelphia,*

Pennsylvania, United States, 4. *Johns Hopkins University, Baltimore, Maryland, United States*, 5. *Georgetown University Medical Center, Washington, District of Columbia, United States*

Psychological sense of community (PSOC) in Black men who have sex with men (BMSM) may facilitate condom and pre-exposure prophylaxis (PrEP) use to prevent HIV transmission. Understanding BMSM's PSOC contribution to HIV risk reduction may inform HIV prevention efforts for this population, that is disproportionately affected by HIV. Adjusted for sociodemographic characteristics and HIV status, we conducted logistic regressions to test the association between PSOC and condom use among aging BMSM ($n=176$). Multivariate analyses exhibited no association between PSOC and condom use (AOR= 0.994, 95% CI= 0.942, 1.049). HIV+ participants had higher condom use odds compared to HIV- participants (AOR= 4.031, 95% CI= 1.723, 9.426). A sub-analysis of HIV- participants ($n=61$), showed no association between PSOC and PrEP use (AOR= 1.002, 95% CI= 0.904, 1.112). These results have implications for secondary HIV prevention and future research on alternative aspects of social support that may increase BMSM's HIV risk reduction behaviors.

SELF-PERCEPTION OF AGING AND FRAILTY PHENOTYPE AMONG HIV+ AND HIV- OLDER MEN

Michael Plankey,¹ Karen Nieves-Lugo,² Deanna Ware,¹ Sabina Haberlen,³ Keri Althoff,³ James Egan,⁴ Andre Brown,⁴ and Mackey Friedman,⁴ 1. *Georgetown University Medical Center, Washington, District of Columbia, United States*, 2. *National Institutes of Health, Bethesda, Maryland, United States*, 3. *Johns Hopkins University, Baltimore, Maryland, United States*, 4. *University of Pittsburgh, Pittsburgh, Pennsylvania, United States*

Self-perception of aging is an important predictor of health. We examined the relationship of self-perception of aging (age discrepancy and aging satisfaction) with frailty phenotype between HIV+ and HIV- men in the Multicenter AIDS Cohort Study. 499 HIV+ and 549 HIV- men were included in the analytic sample (median age 61 years IQR 56-66 years). Frailty status was based on the Fried frailty phenotype and measured at semi-annual study visits beginning 3/2015 or 9/2015, 3/2016 and 3/2019. Baseline frailty was: HIV- 8.9%; HIV+ 13.9%. Low aging satisfaction and feeling older was positively associated with remaining frail (ORs: 6.64; 95% CI: 3.88-11.38; 5.68; 95% CI: 3.06-10.56) or transitioning between non-frail and frail states (ORs: 2.72; 95% CI: 1.56-4.74; 2.50; 95% CI: 1.11-5.64), over a 3-year period. There was no statistically significant difference by HIV status. Assessment of self-perception of aging may be useful in the setting of frailty evaluation among HIV+ and HIV- men.

SOCIAL SUPPORT AND FRAILTY IN HIV POSITIVE AND NEGATIVE MEN WHO HAVE SEX WITH MEN

Laura Graf,¹ Mackey Friedman,² Steven Meanley,³ James Egan,² Andre Brown,² Deanna Ware,⁴ Michael Plankey,⁴ and Sabina Haberlen,⁵ 1. *Johns Hopkins Bloomberg School of Public Health, Brooklyn, New York, United States*, 2. *University of Pittsburgh, Pittsburgh,*

Pennsylvania, United States, 3. University of Pennsylvania, Philadelphia, Pennsylvania, United States, 4. Georgetown University Medical Center, Washington, District of Columbia, United States, 5. Johns Hopkins University, Baltimore, Maryland, United States

Social support is linked to a myriad of positive health outcomes, yet little is understood about its potential role on frailty development among older men who have sex with men (MSM). We evaluated data from 929 MSM aged 40-81 years enrolled in the MACS Health Aging sub-study. Social support (Social Provisions Scale[SPS-24]; range 24-96) was high, though slightly lower among the HIV-positive versus HIV-negative men (median: 80 vs. 82, $p=0.12$). Each SD increase in social support associated with a 21% decrease in incident frailty (Fried phenotype), independent of age, race, and education (aIRR=0.79, IQR[0.65, 0.97]), though attenuated after adjustment for depressive symptoms. This protective association was observed to be strongest among HIV-positive MSM. High social support is a strength among older MSM, which associates with positive frailty outcomes. Assessing and strengthening social support systems may have potential as a psychosocial component of frailty interventions.

SESSION 7570 (SYMPOSIUM)

WHY AGE AND AGING RESEARCH MATTERS: A CHAT WITH NIA SENIOR LEADERSHIP

Chair: Marie Bernard

The National Institute on Aging (NIA) at the National Institutes of Health, Department of Health and Human Services, is the federally designated lead agency on aging research, and has supported significant research on aging as a life-long process. In the last five years, NIA experienced a tripling of its budget. Although much of this funding is targeted to Alzheimer's disease (AD) and AD related dementias (ADRD) research, there was an increase in funds allocated to non-AD research in keeping with the overall growth of NIH. This symposium will provide a forum for exploration of the implications of the budget increases for the general research community. It will involve NIA's senior staff discussing research priorities and programs supported by the Institute. A question-and-answer session will follow brief introductory remarks on current funding and future priorities and research directions of NIA.

DIVISION OF EXTRAMURAL ACTIVITIES

Kenneth Santora, *National Institute on Aging, Bethesda, Maryland, United States*

Dr. Santora will discuss research priorities for the Division of Extramural Activities. He and his team will in addition be available for small group discussions

UPDATE ON NIH INCLUSION ACROSS THE LIFESPAN

Marie Bernard, *National Institutes of Health, Bethesda, Maryland, United States*

The National Institute on Aging (NIA) at the National Institutes of Health, Department of Health and Human Services, is the federally designated lead agency on aging research, and has supported significant research on aging as a life-long process. In the last five years, NIA experienced a

tripling of its budget. Although much of this funding is targeted to Alzheimer's disease (AD) and AD related dementias (ADRD) research, there was an increase in funds allocated to non-AD research in keeping with the overall growth of NIH. This symposium will provide a forum for exploration of the implications of the budget increases for the general research community. It will involve NIA's senior staff discussing research priorities and programs supported by the Institute. A question-and-answer session will follow brief introductory remarks on current funding and future priorities and research directions of NIA.

FUNDING OPPORTUNITIES AT THE NATIONAL INSTITUTES ON AGING, NIH

Richard Hodes, *National Institute on Aging, National Institutes of Health, Bethesda, Maryland, United States*

SESSION 7575 (SYMPOSIUM)

EXPLORING AGING MASCULINITIES FROM DIFFERENT DISCIPLINES AND PERSPECTIVES

Chair: Liat Ayalon

Co-Chair: Josep Armengol

Discussant: Michael Kimmel

Traditionally, gerontology research has been relatively genderless. When the intersection of age and gender was explored, this was done primarily by focusing on the experiences of older women. Much less is known about the experiences of older men. The present symposium brings together work from the humanities and the social sciences in order to explore societal images and personal experiences of aging men. The paper by Maierhofer and Ratzenböck provides a theoretical outlook on this intersection from the humanities perspective, followed by empirical applications from the social sciences. Next, Armengol uses contemporary American literature to challenge the traditional stereotype of decline in sexuality and masculinity. The paper by Ni Leime & O'Neill examines stereotypes of aging masculinities, but this time from the perspective of older men as the audience who react to their portrayal in visual culture. Finally, Ayalon and Gweyrtz-Meydan present ethical dilemmas faced by physicians who treat older men's sexuality in light of active marketing campaigns of the pharmaceutical industry, which advocate for a model of successful aging and ongoing sexual intercourse. The discussant, Kimmel, will conceptualize the four papers by stressing the different types of information that can be obtained via different methods of inquiry. The complementary information provided by the different papers and the integration of methods and findings from the humanities with the social sciences will be discussed.

PHYSICIANS' MORAL DILEMMAS IN THE AGE OF VIAGRA

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

Oral phosphodiesterase5 inhibitors (PDE5i; e.g., Viagra®) have become the first line of treatment of erectile dysfunction in men. Relying on interviews with 38 physicians, this study explored moral dilemmas associated with the prescription of PDE5i to older men. Moral dilemmas at the micro