

analysis methods, we explored the impact of heteronormative gender roles and ideologies associated with masculinity on healthy aging with HIV. We found that changing physical and sexual function, appearance and growing financial expectations created threats to masculinity, fueling fears of perceived weakness, internalized feelings of shame, depression, anticipated loss of social status (partner loss), and loss of independence and autonomy. These findings suggest that normative gender beliefs, a key social determinant of men's health, aging and intersectional stigma combined undermine psychosocial support and wellbeing and self-care needed to achieve healthy aging.

OLDER WOMEN WITH HIV: STRATEGIES FOR HEALTHY AGING

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Women over 50 represent one-quarter of U.S. older adults with HIV, but we know little about how these women face the challenges of aging. As part of a larger study, we conducted two focus groups with racially diverse older women with HIV in New York City (n = 9) and Oakland, CA (n=11). Discussions concerned strategies for healthy aging. Transcripts were analyzed using inductive thematic methods. Women in both groups shared that they had close connections to family members and the importance of family support for motivating them to take care of their health. Some took proactive steps to stay healthy through nutrition and exercise, although the cost of gym memberships was a barrier. Many were lonely and needed socialization opportunities. Some suggested exercise classes could help to both maintain health and bolster social connections. Implications of these findings for developing programs for older women with HIV will be discussed.

HIV MADE ME STRONGER: CONCEPTIONS OF SUCCESSFUL AGING AMONG OLDER WOMEN LIVING WITH HIV

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Little is known about successful aging (SA) among older (50+) women living with HIV (OWLH). Therefore, the purpose of this qualitative study was to examine subjective understandings of SA among OWLH. Participants were OWLH enrolled in the Women's Interagency HIV Study

(WIHS) and those not enrolled in WIHS: 8 in Atlanta, GA (3 WIHS and 5 non-WIHS) and 9 in Brooklyn, NY (6 WIHS and 3 non-WIHS). Semi-structured interviews ranged from 30 to 120 minutes. Several themes emerged in participants' definitions of SA, e.g. self-care, taking HIV medications, and being resilient ("HIV made me stronger"). Both WIHS and non-WIHS participants emphasized life course perspective in their definitions of SA -- women viewed their aging successful as a more stable phase of life in contrast to hardships they experienced while being younger (e.g., drug use, incarceration). Data collection efforts are ongoing and will allow further characterization of SA among this population.

SESSION 3530 (SYMPOSIUM)

GRECCS AS A NETWORK TO ENHANCE THE VA PRIMARY CARE WORKFORCE

Chair: Josea Kramer, *VA Greater Los Angeles Healthcare System GRECC, Los Angeles, California, United States*
Discussant: Marianne Shaughnessy, *Veterans Health Administration Geriatrics and Extended Care Services, Office Geriatrics Programs, Washington, District of Columbia, United States*

The VA Geriatric Scholars Program is a workforce development program to integrate geriatrics into primary care in all VA clinics. The program has increased career satisfaction among clinicians, improved quality of care for aging Veterans, changed provider prescribing behaviors and improved patient outcomes. The core curriculum is an intensive course in geriatrics, an intensive workshop in quality improvement (QI) and a micro QI project to demonstrate application of new knowledge to local needs of patients and clinic processes; this is a longitudinal program and alumni continue to develop skills over time through a series of elective activities that tailor learning to self-identified gaps in career development and training. The program is a collaboration among the Geriatric Research Education and Clinical Centers (GRECC), centers of excellence that have been leveraged to create a network of expertise and creativity to develop the core and elective educational activities. This symposium focuses on recent outcomes of three educational components that improve quality of care for older Veterans. The Palo Alto GRECC developed an intensive course in gerontological psychology to enhance the skills and competencies of psychologists leading to greater job effectiveness. The Bronx GRECC developed an interdisciplinary training program for all clinical and non-clinical staff in rural clinics, leading to improved recognition of functional and safety concerns among older veterans. The Tennessee Valley GRECC developed the core QI component and many of these micro-QI projects have been sustained, spread or recognized by VA as Promising Practices.

OVERVIEW: THE VA GERIATRIC SCHOLARS PROGRAM FOR PRIMARY CARE WORKFORCE DEVELOPMENT

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