PILOTING AN AUGMENTED REALITY LIFE REVIEW EXPERIENCE TO PROMOTE MENTAL HEALTH OUTCOMES IN AGING ASIAN AMERICAN WOMEN Sarah Hwang,¹ Jazlyn Armendariz,¹ Jeremy Argueta,¹ Veronica Fruiht,² and Thomas Chan,¹ 1. California State University Northridge, Northridge, California, United States, 2. Dominican University of California, Dominican University of California, California, United States

Asian-American older women report the highest prevalence of suicidal ideations and rates of completed suicide compared to other racial groups. Ironically, Asian-American communities report disproportionately low rates of formal mental health utilization-this may be attributed to the lack of culturally-relevant services and negatively ingrained perceptions of mental health aid. One potential solution that has not been widely investigated is the use of technology to help older Asian-American women engage in mental health interventions. This study leverages innovations in augmented reality (AR) technology (i.e., overlaying of digital holograms onto the real world) to create a life review intervention aimed at promoting mental health well-being. The application, Tell-Being, is a personalized holographic life review experience that facilitates older adults to foster a sense of coherence and wholeness within their lives. Pilot data collection was amassed from four aging Asian-American female participants averaging 51.3 (SD=8.61) years of age. Initial pre/post analyses showcased mean differences that trend towards a higher presence of emotion regulation from pretest (M=4.88, SD=1.08) to post-test (M=5.21, SD=1.17). Although data collection was prematurely halted due to COVID-19, results trended in promising directions. The technological innovations and findings from this study may lead to promising novel avenues to address barriers for older Asian-American women in seeking mental health assessment and treatment in a "new normal" world.

TECHNOLOGY BASED COGNITIVE BEHAVIORAL THERAPY ON PSYCHOLOGICAL DISTRESS: EXPLORING HEALTH, PAIN, AND ACTIVITY

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This randomized controlled trial investigates two technologically based self-administered cognitive behavioral depression treatments (CBT) on psychological distress in older adults. Health may change the ability to participate in types of activities, thereby impacting mental well-being and treatment response. The aims of this research are 1) to understand the impact of technologically based cognitive behavioral treatment on psychological distress 2) explore how health, pain, and activity engagement may affect treatment response. Fifty one participants recruited were randomized to one of 3 groups: audio-based cognitive behavioral therapy, computer-based cognitive-behavioral therapy, and control group. The combined treatment groups are compared to the control group. Health was examined in multiple ways; the Vulnerable Elders Scale-13 score ; (Saliba et al., 2001); and a reported chronic pain condition. For overall psychological distress, improvement on the Brief Symptom Inventory General Severity Index (GSI; Derogatis & Spencer, 1983) scores from baseline to post-treatment indicated treatment response. The California Older Person's Pleasant Events Scale (COPPES; Rider, Gallagher-Thompson, & Thompson, 2004) measured activity engagement. While controlling for the Time 1 GSI score, an ANOVA revealed a significant difference in psychological distress between the CBT treatment group and control group F(1, 43) = 4.22, p=.046. A linear regression analysis with the VES-13 score and GSI baseline score as predictors and the GSI posttreatment score as the dependent variable, found that health did not significantly predict psychological distress outcomes. Observation of the descriptives and these analyses suggest that CBT can impact psychological distress, potentially even with variations in health and pain.

Session 9375 (Poster)

Mental Health, Social Connection, and Isolation

DOG PARK MEMBERSHIP AND LIFE SATISFACTION AMONG OLDER ADULTS

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Dog park members initially join and attend dog parks for the wellbeing of their dogs, but often experience their own biopsychosocial benefits. This mixed methodology (Quantitative n=44, Qualitative n=11)) pilot study utilized qualitative heuristic interviewing (Moustakas, C., 1990) and the Satisfaction with Life Survey (Pavot, W., & Diener, E. 2013). Data gathered from interviews and surveys administered to participants of a members-only dog-park indicate a high satisfaction with life. Members 60 years and older reported feelings of life satisfaction almost 7 points over the total respondent average, placing them in the "highly satisfied" range. All members experience the dogpark as a supportive social environment that benefits their physical health, mental health and the well-being of their canine companions. Five qualitative themes were identified: Canine Well-being, Community, Mental Health Benefits, Physical Health Benefits and Fights, Falls & Frustrations. These findings demonstrate the need for more research into the impact and importance of pet ownership, community dog parks and outdoor green spaces on older adults and life satisfaction.

FOSTERING INTERGENERATIONAL CONNECTIONS IN THE TIME OF COVID-19: A FRIENDLY CALLER PROGRAM

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Social isolation affects one in five older adults, significantly increases the risk of premature death from all causes and is associated with higher rates of depression, anxiety and suicide. Covid-19 has exacerbated social isolation, including among older adults that reside in senior apartments. In response, a Friendly Caller Program was developed to foster intergenerational social connections among university students and residents in a large housing community that serves older adults aged 62 and older who have limited income and have mobility impairments. This study aimed to evaluate the Friendly Caller Program from the perspective of the older adult. An online survey includes questions about the participants' demographic characteristics, physical and mental health self-assessment, social support, and ways in which the Friendly Caller Program has affected these areas of their life. An open-ended question assesses older adult participant expectations of the Friendly Caller Program. Results describe the population currently being served by this program and indicate that the program has a positive influence on participants' feelings of safety, support and ability to function. Suggestions for future research include assessing university student perceptions about the benefits of participation as callers in the program and creating a toolkit that can guide other universities to create similar programs in partnership with housing communities that serve older adults.

SAVING FALL-INJURED OLDER ADULTS FROM DE-PRESSIVE SYMPTOMS: THE MEDIATING ROLE OF SOCIAL PARTICIPATION

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Falls are the second primary cause of unintentional injury deaths globally. Prior studies found that fall incidences are associated with depressive symptoms among older adults, which could reversely lead to repeated fall incidences. However, few have investigated the role of social interventions in saving fall-injured older adults from experiencing depressive symptoms among older adults. Using the Chinese Health and Retirement Longitudinal Study (CHARLS) 2011-2018 data and multiple levels of fixed-effect analysis, this study examined the potential mediating role of social participation in alternating the effect of fall injuries on depressive symptoms. For the first time, this study specified the fallinjured older adults among those who had fall incidences. It also implemented the current literature by removing the bias caused by unobservable confounding variables at provincial and city levels. The descriptive results show that 22.2% and 20.6% of rural (n=4,972) and urban (n=3,258) older adults (65+), respectively, experienced fall incidences, among whom 45.1% needed one or more times of medical treatment. The fixed-effect results show that for urban older adults, social participation accounted for partial effects (17.2%) of fall injuries on their depressive symptoms. For rural older adults, fall injuries are significantly associated with more depressive symptoms, but social participation no longer functions as the mediator. Findings from this study emphasize the necessity of collecting efforts from multiple levels to improve the social engagement of urban older adults who had fall injuries. Future studies could further specify what types of social participation would be more helpful in buffering the intervention effects.

TECHNOLOGY ACCEPTANCE AND DEPRESSIVE SYMPTOMS AMONG COMMUNITY-DWELLING OLDER PEOPLE

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Depression is a major public health issue among older adults, with an estimated prevalence between 5% and 10%. The aim of this study is to explore the possible benefits technology acceptance has in reducing depression among older people. Mail-survey data were collected from communitydwelling adults over the age of 65. This method was chosen over face-to-face surveys due to Covid-19. There were 192 total participants. The GDS-5 was used to measure the level of depressive symptoms. Among the participants, 25 participants (13%) scored higher than 2, indicating the presence of depression. Using a hierarchical regression analysis revealed that the equation explained 42.4 % of the variance (adjusted R square =.382) in levels of depression (F (3.176) = 9.973. p <.000). Variance inflation factor (VIF) values were smaller than 10, indicating that multicollinearity among the correlates was not an issue. The correlates of the level of depression were: level of education, overall physical health, level of loneliness, perceived ease of technology use, attitude toward technology use, and intent to purchase new technology for older people. Results indicate that a positive attitude toward technology use might be inversely associated with depression levels. This shows how quality of life related to mental health may be improved by a change in attitude in favor of technology use. Participants were interested in learning to use new technology, and would like more opportunities to do so. Policy changes that increase lifelong learning options would help to make this happen.

THE IMPACT OF ORAL HEALTH ON PSYCHOLOGICAL DISTRESS AMONG OLDER ADULTS IN CALIFORNIA

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In California, the population of adults ages 65 and older is projected to increase from 11% in 2010 to 19% in 2030. The aging of the population requires modifications in public health to ensure that people are not only living longer, but also healthier lives. Oral health is an important, but often overlooked factor that affects the overall health of older adults. Poor oral health increases the risk of physical comorbidities, decreases chewing performance, limits food choices, and exacerbates weight loss. Furthermore, poor oral health disrupts social health via decreases in verbal communication and facial expressions, such as smiling. This study examines the effects of oral health, assessed by tooth condition, on psychological distress among adults ages 65 and older in California. The study uses the 2019 California Health Interview Survey (CHIS), an annual survey of a representative sample of the state's residential, noninstitutionalized population. Logistic regression models are used to determine