quality of life, increased coping and adaptation, and decreased depressive symptoms (Earvolino-Ramirez, 2007; Fullen & Gorby, 2016; Hicks & Conner, 2014; (Sharpley, Bitsika, Wootten, & Christie, 2014). However, very few resilience promotion programs are described in the literature. The purpose of the present study was to evaluate a brief, community-based psychoeducation group designed to enhance aging resilience. Participants were recruited through a private mental health practice focused on serving older adults in the Pacific Northwest. Nine participants (M age = 71; 78% female, 100% non-Hispanic white; 100% with some college) completed the pre- and post-assessment measures: An adapted 9 item version of the Communicative Ecology Model of Successful Aging (CEMSA; Fowler, Gasiorek, & Giles, 2015) and the Groningen Ageing Resilience Inventory (GARI; van Abbema et al., 2015). The discussion group consisted of six 90-minute meetings every-other-week, facilitated by a licensed clinical psychologist. Each meeting focused on a different topic related to psycho-social aspects of aging and included understanding ageism, embracing change, creating meaning, normal and "successful" aging, and strengthening social ties. Although not statistically significant, initial results showed lower post-assessment mean scores on the CEMSA indicating lower levels of aging uncertainty, negative attributions, and pessimism as well as higher post-assessment mean scores on the GARI indicating higher perceived resilience. Moreover, 77.7 % of the group agreed or strongly agreed that they had learned a lot from the group. Future directions will be discussed.

IDENTIFYING PREDICTORS OF SURVIVAL TO 100 IN OKLAHOMA USING CENTENARIAN BIOGRAPHIES

Nadia Firdauysa,[1] Jyoti Bhatta,[1] and Alex J. Bishop[1],
1. Oklahoma State University, Stillwater, Oklahoma, United States

The purpose of this study was to identify key predictors of centenarian survival in Oklahoma. Data originated from N = 607 centenarian biographies maintained within Oklahoma Centenarians, Inc. historical records database. Biographies were analyzed and coded for demographic content. IBM/SPSS 23.0 was then used to compute linear regression analyses to examine the association of predictor variables sex, race, education, cohort, and longevity secret relative to days of survival. Only race (std. B = .10, p < .05) and cohort (std. B = -.11, p < .01) emerged as significant predictors of overall survivorship. Non-white centenarians live longer than their White-Caucasian counterparts; whereas earlier-born cohorts have shorter survival. Closer examination of these findings revealed that non-White centenarians have historically lived an average of 300.38 days longer than their White counterparts; whereas later born cohorts have historically an average of 48.10 days shorter than earlier-born cohorts. Despite the fact that sex and subjective longevity secrets failed to yield any significance, further inspection revealed two interesting highlights. First, centenarian males have historically lived an average of 147.89 days less than female centenarians. Second, centenarians who cite God as the secrete to their longevity have historically lived 100.23 fewer days than centenarians who attribute their longevity to something else. Results have implications to further understanding the interplay of race and human longevity, as well as

variables attributed to improved survivorship across successive cohorts. Further discussion relative to health practices and policies to improve longevity in states like Oklahoma will be further highlighted.

SUCCESSFUL AGING AND HEALTHCARE SERVICE UTILIZATION IN EAST ASIA: NATIONAL COMPARISONS OF CHINA, KOREA, AND JAPAN

Jinmyoung Cho,[1] Takeshi Nakagawa,[2] and Dannii Yeung[3], *1. Baylor Scott & White Health, Temple, Texas, United States, 2. National Center for Geriatrics and Gerontology, Aichi, Japan, 3. City University of Hong Kong, Hong Kong, Hong Kong*

As the older population increases and lives longer, the demand for healthcare has been increased dramatically. To date, it is unknown whether older people's healthcare utilization varies between countries and how it relates to successful aging. Using Rowe and Kahn's model, we examine cross-national differences in the relationship between successful aging and healthcare service utilization in East Asia. Harmonized datasets at baseline from China Health and Retirement Longitudinal Study (CHARLS), Korean Longitudinal Study (KLoSA), and Japanese Study on Aging and Retirement (JSTAR) were used. Including 7,651 participants (aged 65-75 years), successful agers were identified using Rowe and Kahn's criteria (i.e., no disease, no disability, high cognitive function, and active engagement). Healthcare service utilization includes hospital visit, number of hospital stay, number of nights per hospital stay, regular medical center visit, number of medical center visits, and possession of private insurance in previous year. Generalized linear models showed that successful agers' healthcare service utilization is significantly different from non-successful agers (e.g., OR=2.19, p<.001 for regular medical center visits), and Korean and Chinese healthcare service utilization is different from Japanese (e.g., OR=0.44 and OR=10.18 for Chinese and Korean number of medical center regular visits, respectively, p<.001). Furthermore, the number of nights in hospital among Chinese and Korean successful agers tend to be greater than that of Japanese successful agers (OR=2.93 and OR=1.99 for Chinese and Korean successful agers, respectively, p<.001). This study indicates cross-national variations in pattern of healthcare service utilization between successful and non-successful agers in East Asia.

THE EFFECT OF DISPOSITIONAL OPTIMISM ON SUCCESSFUL AGING OF OLDER ADULTS AND THEIR PARTNERS

Gina Lee,[1] and Kyuho Lee[2], *1. Iowa State University, Ames, Iowa, United States, 2. Daegu University, Gyeongsan, Korea, Republic of*

The purpose of the study was to examine how dispositional optimism of an older adult influences both the individual's and the spouse's successful aging. Data from the Health and Retirement Study were included in this analysis. The age of participants ranged from 18 to 104 (M = 67.91, SD = 11.26). The successful aging components included low levels of depressive symptoms and low levels of difficulties in activities of daily living, subjective health, and cognition. A structural equation model was computed including