

### TRADITIONAL CULTURAL PRACTICES PROVIDE MORE FREQUENT FEELINGS OF HAPPINESS AND CALM FOR NATIVE AMERICAN ELDERS

Collette Adamsen,<sup>1</sup> and Ramona Danielson,<sup>2</sup> 1. *University of North Dakota, Grand Forks, North Dakota, United States*, 2. *North Dakota State University, Fargo, North Dakota, United States*

Though American Indian, Alaska Native, and Native Hawaiian (AI/AN/NH) elders are an understudied population, available data demonstrates higher rates of depressive symptoms among these elders. In addition, AI/AN/NH elders are a medically underserved population, with geographic isolation a common barrier to accessing emotional/mental health services. However, cultural practices are important sources of resilience for AI/AN/NH elders. Survey data from “Identifying our Needs: A Survey of Elders” Cycle VI (2014-2017), conducted by the National Resource Center on Native American Aging, were analyzed using ordinal logistic regression; N=18,134 adults age 55+ from 164 tribal survey sites. Respondents indicated how often (from none to all of the time) they participate in cultural practices (e.g., traditional food, music, customs). Frequency of participation varied; 27% of elders reported participating in traditional cultural practices a good bit of the time or more, 28% some of the time, 18% a little of the time, and 27% did not ever participate. We explored the relationship between frequency of cultural practices and frequency of feelings of happiness, calm/peacefulness, nervousness, and being downhearted/blue. A significant positive association was found between higher frequency of cultural participation and feelings of happiness and calm/peacefulness; no association was found with nervousness or depressive symptoms. While the frequency of participation by elders in cultural practices is directly related to better self-reported levels of happiness and peacefulness, nearly half (45%) never/almost never participated in these types of practices, which underscores the need to support availability of and elders’ participation in cultural practices.

### VIEWS ON HIV DISCLOSURE AMONG OLDER ADULTS LIVING WITH HIV WHO ARE CHILDHOOD SEXUAL ABUSE SURVIVORS

Monique Brown, Titilayo James, Chigozie Nkwonta, and Amandeep Kaur, *University of South Carolina, Columbia, South Carolina, United States*

Rates of childhood sexual abuse (CSA) among people living with HIV are twice the CSA estimates among the general population. These statistics suggest that CSA prevalence may range from 16-22% among older adults living HIV (OALH). HIV disclosure continues to be a key consideration among people living with HIV. However, studies examining the views on HIV disclosure among OALH who are CSA survivors are lacking. Therefore, the aim of this study was to explore the views on HIV disclosure among OALH who are CSA survivors using a qualitative approach. Twenty-four adults aged 50-67 years, living with HIV and with a CSA history participated in the study. In-depth semi-structured interviews were conducted, audio-recorded and were analyzed using thematic analysis. The iterative analytic process included discussion of initial thoughts and key

concepts, identification and reconciliation of codes, and naming of emergent themes. Three themes emerged: “You don’t have to tell the person if it’s just casual sex”, “Nothing ought to be hidden especially when you get ready to engage in sex”, and “As for me, I don’t disclose”. Views on HIV disclosure among OALH varied. Some participants stated that disclosure of HIV status should be dependent on the type of sexual relationship, while some OALH stated that participants should disclose regardless of type of relationship. Some participants were hesitant to disclose their HIV status due to anticipated HIV-related stigma. Understanding the perspectives on HIV disclosure among OALH with a CSA history may help to inform disclosure intervention programs for this vulnerable population.

### DIVERSE RACE AND ETHNIC POPULATIONS II

#### A MODERATING MODEL OF SELF-EFFICACY IN CAREGIVERS OF LATINA BREAST CANCER SURVIVORS

Megan Thomas Hebdon,<sup>1</sup> Tracy Crane,<sup>2</sup> Pamela Reed,<sup>2</sup> and Terry Badger,<sup>2</sup> 1. *University of Utah, Blacksburg, Virginia, United States*, 2. *University of Arizona, Tucson, United States*

In caregivers of Latina breast cancer survivors, contextual factors such as informational support, Anglo-orientation, and spiritual well-being may affect physical and mental health. The purpose of this study was to test if caregiver self-efficacy moderated relationships between contextual factors and health outcomes. A model, derived from Bandura’s Social Cognitive Theory, included self-efficacy cancer knowledge (survivor) and self-efficacy symptom management (caregiver) as moderators of relationships between contextual factors and global health and depression. Secondary analysis of baseline caregiver data from an experimental study testing two psychoeducational interventions with Latina breast cancer survivors and their caregivers was conducted. Both self-efficacy measures were tested as moderators for relationships between contextual factors and health outcomes with fixed cutoffs (medium: mean, low/high:  $\pm 1$  SD). Caregiver participants (N=233) were 43 years on average (SD=13), primarily women (70%), low-income (78%), and of Mexican-American ethnicity (55%). Anglo-orientation was significantly associated with global health ( $r(233)=.27$ ,  $p<.001$ ) and depression ( $r(233)=-.13$ ,  $p=.05$ ). High levels of self-efficacy cancer knowledge strengthened the negative relationship between depression and Anglo-orientation, while a slightly positive relationship was noted at low self-efficacy levels. Informational support was significantly related to global health ( $r(233)=.39$ ,  $p<.001$ ) and depression ( $r(233)=-.43$ ,  $p<.001$ ). Self-efficacy symptom management strengthened the negative relationship between informational support and depression. Correlational and moderation relationships were not significant for spiritual well-being. Both caregiver- and survivor-focused self-efficacy affected relationships between contextual factors and depression in caregivers of Latina breast cancer survivors. Further research should address both types of self-efficacy in caregiver health.