

contribution of demographics factors versus health system-level factors to catastrophic out-of-pocket medical spending. The proportion of respondents with catastrophic out-of-pocket medical expenditure was higher in the US; the proportion was 5.8% and 3.0% in the US and South Korea, respectively. Both in the US and South Korea, respondents who were in the lower-income quartiles, who had experienced a stroke or had diabetes, and who rated their health as poor had higher odds of catastrophic out-of-pocket medical expenditure. The Blinder-Oaxaca non-linear decomposition showed that the significant difference in the rate of catastrophic out-of-pocket medical spending between the two countries was attributable to unobservable system-level factors, not observed differences in the sociodemographic characteristics between the two countries.

NON-RESPONSE TO POPULATION AGING IN SUB-SAHARAN AFRICA: A SURVEY OF GERONTOLOGY SCHOLARS

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Life expectancy is increasing globally, with the biggest gains expected in sub-Saharan Africa. In fact, most of the population growth globally in the next few decades will occur in sub-Saharan Africa. Using an online survey we investigated the perspectives of gerontology scholars on the challenges of aging in sub-Saharan Africa as well as the assets of elders. Respondents (n=72) from 17 countries, primarily in Africa, and representing 16 disciplines, identified the top issues facing African elders as: poverty, lack of trained professionals, food insecurity, disability/health issues, and long-term care. Older adults' unique strengths were noted as indigenous knowledge systems, being holders of cultural heritage, and their contributions to development. Respondents' biggest concerns about older adults in sub-Saharan Africa were the lack of government attention to aging issues (63%) and a lack of social services targeted to elders' needs (57%). Government funding (77.8%) and international partnerships (38.9%) were noted as resources needed to support aging research in sub-Saharan Africa. The response or non-response of governments in sub-Saharan Africa will determine whether the growing number of older adults will increasingly experience unmet needs and whether their assets will be considered in development efforts. Establishing professional networks of gerontology scholars in the region will help to document the challenges faced by elders, to plan for the coming demographic shift, and to empower elders to thrive as valued community members.

OLDER CANCER SURVIVORS LIVING WITH FINANCIAL HARDSHIP IN CHINA: THE INFLUENCE OF CONFUCIAN FAMILY VALUES

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Background: Financial hardship has not been well studied among older cancer survivors, despite its debilitating effects on their health and well-being. Aim: To describe the lived

experience of older Chinese cancer survivors and explore the financial impacts following a cancer diagnosis. Design: A qualitative study conducted using semi-structured interviews with patients and family caregivers. Methods: We individually interviewed twenty-one cancer survivors (aged \square 60) with financial hardship and twenty family caregivers in Shandong province between August 2020 and January 2021. A content analysis was performed by multiple coders. Findings: Confucianism culture and the Chinese health system considerably impact the construct of financial hardship and its components. Four main categories were revealed: (1) healthcare providers were reluctant to discuss the diagnosis and costs of care with cancer patients; (2) financial transfer from adult children to older parents became prevalent after a cancer diagnosis; (3) cancer-related financial worries and stress spilled out into children's family; (4) coping and adjustment strategies were taken by the extended family. Conclusion: Both older cancer survivors and their adult children experienced financial distress mediating through filial piety in China. Instruments are needed to screen for cancer-related financial hardship adapted to the healthcare system and Confucian family values. Key words: Cancer survivors; older; financial hardship; qualitative; China

ORGANIZATIONAL PRACTICES FOR THE AGING WORKFORCE: VALIDATION OF AN ENGLISH VERSION OF THE LATER LIFE WORKPLACE INDEX

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Due to aging workforces, research on organizational practices for older employees becomes more important for individuals and organizations. However, existing measures for such organizational practices tend to capture the construct with unidimensional scales, use single-item operationalizations, or focus on a specific area. Hence, Wöhrmann, Deller, and Pundt (2018) developed the Later Life Workplace Index (LLWI) to provide a multidimensional framework to measure organizational practices for older employees on nine dimensions, namely organizational climate, leadership, work design, health management, individual development, knowledge management, transition to retirement, continued employment after retirement, and health and retirement coverage. The LLWI has recently been operationalized and validated in Germany (Wilckens, Wöhrmann, Deller, & Wang, 2020). However, to utilize the index beyond German-speaking countries, a validated English version is required. Thus, we aimed to validate an English version of the LLWI using a sample of older U.S. employees (N = 279). Results support the domain level factor structure of the LLWI but show some redundancy among the 80 items for the overall nine domain factor structure. A comparison between the U.S. sample and a German sample (N = 349) confirmed configural and (partial) metric measurement invariance of the English version. Results further supported convergent, discriminant, criterion, as well as incremental validity. Researchers can utilize the new measure