Fit Model posits that users have varying needs, abilities, and attitudes; technology systems and tasks vary in demands; social, physical, and policy environments influence a person's access to and support for technology transactions; and human-technology interactions are dynamic. A focus of the presentation will be on how a user-centered design approach is compatible with the P-E Fit model and can optimize the fit between older adults and technology systems.

Session 4485 (Paper)

Work and Retirement

IQ IN YOUNG ADULTHOOD AND DEPRESSIVE SYMPTOMS OVER THE RETIREMENT TRANSITION

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Retirement can be a challenging life transition for mental health. Higher levels of IQ in young adulthood have been shown to be advantageous for different outcomes later in life such as quality of life and well-being. However, it remains unclear whether possessing higher cognitive abilities in early life also favors individuals' mental health when facing challenges related to the retirement transition. In this study, we therefore investigated the relationship between IQ in young adulthood and depressive symptoms over the retirement transition. We used data of six waves from the longitudinal population-based HEalth, Aging and Retirement in Sweden (HEARTS) study, as well as data on IQ in young adulthood from conscription. In a piecewise structural equation model, we modelled trajectories of depressive symptoms (measured by the CES-D scale) before and after retirement and in relation to young adulthood IQ (n = 1722 men). Results indicated an average decrease in depressive symptoms over the retirement transition for this sample of men. Higher childhood IQ was associated with further reduction in post-retirement depressive symptoms while controlling for education, retirement age, and memory ability and cardiovascular health at baseline. Our findings support the conclusion that higher IQ in young adulthood may act as a protective factor for mental health in the retirement transition. Individuals with higher IQ in young adulthood may have acquired coping strategies throughout their life-course, which they can apply when handling challenges related to retiring.

LEARNING TO WORK WITH CHRONIC HEALTH CONDITIONS: HOW TIME SINCE DIAGNOSIS AFFECTS OLDER WORKERS' VITALITY AND WORRIES

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Background. Chronic health conditions (CHCs) pose stark detrimental effects on the health and abilities of older workers. The extent of these effects depend on the CHC,

the time since its diagnosis and the type of health measure: a rarely explored combination of heterogeneities. Objective. This study examined how four existing and newly diagnosed CHCs influences older workers' vitality and worries about enduring physically and mentally until retirement age. Method. Data from two waves of the NIDI Pension Panel survey conducted in the Netherlands in 2015 and 2018 were used. We analyzed a sample of 1,894 older workers between the ages of 60-62 years at wave 1 using conditional change ordinal least square regression models. Results. Having a CHC at wave 1 was associated with lower levels of vitality and higher levels of worries at wave 2. These effects of CHCs on vitality and worries were much larger for older workers who were newly diagnosed with CHCs compared to those who experienced CHCs for longer. Intriguingly, the new diagnosis of physically disabling conditions increased worries about physical endurance at wave 2, while the new diagnosis of mentally disabling conditions increased worries about mental endurance at wave 2. Conclusion. By distinguishing the effects of four existing and newly diagnosed CHCs on vitality and worries, this study allows the identification of vulnerable groups of older workers. The findings may inform work accommodations and interventions which could improve both the quality and sustainability of work lives, while promoting healthy ageing of older workers.

WORK EXPECTATIONS AND TRAJECTORIES OF DEPRESSIVE SYMPTOMS AND PASSIVE SUICIDAL IDEATION AMONG BABY BOOMERS

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Expectations regarding work (e.g., probability of retiring at a certain age), whether realized or not, may influence mental health, however there is limited quantitative research on this question. This study examined the longitudinal relationship between expectations of full-time work after age 62 and depressive symptoms and passive suicidal ideation among Baby Boomers, a generation that experienced the Great Recession as they neared retirement. Data came from the Health and Retirement Study, 2008 - 2016 (N = 8,954, mean age = 55.3, 52.2% female, 77.8% non-Hispanic White). Clinically-relevant depressive symptoms were indexed by the Composite International Diagnostic Interview (CIDI). Expectation (probability) of working after age 62 was modeled continuously (range: 0 to 1). Multivariate mixed-effects logistic regression models of screening positive on the CIDI and passive suicide ideation were fit, separately, adjusting for demographics, household income and wealth, and health characteristics. Respondents working at baseline were less likely to screen positive on the CIDI longitudinally (OR: 0.36, 95% CI: 0.26 - 0.51), and while expectations were inversely associated with screening positive on the CIDI this was not significant after accounting for work status (OR: 0.68, 95% CI: 0.43 - 1.09, p=0.104). Longitudinally, higher expectations of working were inversely associated with passive suicidal ideation (OR: 0.54, 95% CI: 0.32 - 0.92) even after accounting for working status. Future research will examine variation in these relationships by contextual factors like