

*the Care of the Elderly, Toronto, Ontario, Canada,*  
 2. *National Initiative for the Care of the Elderly, Toronto, Canada,*  
 3. *University of Toronto, Toronto, Canada,*  
 4. *University of Toronto, Toronto, Ontario, Canada*

Influenza persists as a common communicable disease and remains a significant cause of disease burden across the world. Despite preventative therapies, such as influenza vaccination to reduce its spread and transmission, influenza continues to be a source of morbidity and mortality, even in developed countries. For the population over the age of 65, the effects of influenza virus may be more severe when they are compounded by pre-existing conditions and reduced natural immune function. In light of plateauing vaccination rates, a scoping review was conducted to map the literature and determine why seniors aged 65 and above refuse or fail to receive seasonal influenza vaccination. Nine peer-reviewed academic databases covering both social sciences and medical research were searched, along with the grey literature. A total of 6,562 references were identified; after the screening process, 118 references were included in the final review. Thematic analysis focused on the broad areas that positively or negatively influence older adults' decision-making regarding influenza vaccination, and this resulted in five main themes: (1) barriers to obtaining vaccination; (2) social factors; (3) personal characteristics; (4) individual subjectivity; and (5) direct clinical interventions. This review aims to identify gaps in knowledge and synthesize currently available information to make recommendations for future research, policy development and clinical practice. Increasing the vaccination rate among Canadian older adults will contribute to ongoing efforts to reduce the spread of the influenza virus among the population, reducing influenza-associated hospital admissions and deaths.

#### **HUM ALONG WITH THE SILENT DISCO HEADPHONES: LESSONS LEARNED IN IMPLEMENTING THE HEADPHONE PROGRAM IN A HOSPITAL UNIT**

Lillian Hung, *University of British Columbia, Vancouver, British Columbia, Canada*

Silent disco headphones have been used among young people in concerts and parties; such headphones have extended distance coverage for broadcasting from a transmitter, features of noise cancelation, and three channels of music. Rather than using a speaker system, music is delivered by wireless headphones and facilitated by a DJ via a built-in microphone. No study has yet tested whether it is feasible to use such headphones to support well-being among older people in hospital settings. This study examined the feasibility of using silent disco headphones with older adults with dementia staying in a geriatric hospital unit. We employed a video-ethnographic design, including conversational interviews and observations, with video recording among ten patient participants in a hospital unit. Two focus groups were conducted with ten hospital staff across disciplines. Thematic analysis yielded three themes: (a) "it just made me feel happy," (b) "it brings him back alive," (c) "it unlocks dementia". Delivering music and meditation programs via the silent disco headphones in the hospital unit has the potential to be a beneficial intervention that can enhance mood and energy, support self-expression, and promote wellness. Our findings

suggested that witnessing the positive effects of headphones on patients changed the staff's view of how music could be used in the clinical setting to support patients' well-being. We identified enablers and barriers to implementing the headphone program in the hospital setting. Future research should further investigate how headphones may help to reduce stress and promote wellness for patients in the clinical environment.

#### **OLDER ADULTS LIVING WITH FOOD INSECURITY: THE IMPACT ON PSYCHOLOGICAL HEALTH**

Robina Sandhu,<sup>1</sup> Victoria Marshall,<sup>2</sup> Carolyn Becker,<sup>3</sup> Lisa Kilpela,<sup>1</sup> and Keesha Middlemass,<sup>4</sup> 1. *UT Health San Antonio, San Antonio, Texas, United States,*  
 2. *UT Health San Antonio, San Antonio, United States,*  
 3. *Trinity University, San Antonio, Texas, United States,*  
 4. *Howard University, Washington D.C., District of Columbia, United States*

Food insecurity (FI) refers to inadequate access to nutritious foods, either in terms of quality or quantity. In older adults, FI is associated with functional impairment, isolation, financial vulnerability, lower quality of life, and poorer health (e.g., diabetes, cardiovascular disease; Fernandes, et al). The effects of FI on psychological health broadly, however, have not been well-documented among older adults. This study sought to examine the impact of FI severity on psychological health indices among older adults. Older adult clients of local food pantries completed self-report measures of FI severity, worry, internalized weight stigma, trauma history, and eating disorder (ED) symptoms/behaviors. Participants (N=124, aged 66+) included: 68.5% women, 67.7% Hispanic, 75.8% high school education, 51.0% household income < \$10,000/year. Controlling for gender in all analyses, results indicated that FI severity predicted increased worry ( $p < .001$ , 21.9% variance), greater internalized weight stigma ( $p = .04$ , 3.9% variance), and a trend for increased risk for lifetime traumatic event exposure (OR = 1.4, 95% CI [1.98, 2.01]). Regarding ED symptoms, male gender (OR = 6.60, 95% CI [1.96, 22.23] and higher FI severity predicted risk for self-induced vomiting in the past month (OR = 2.5, 95% CI [1.15, 5.36]), risk for laxative/diuretic use for weight control (OR = 2.16, 95% CI [1.03, 4.52]), and greater dietary restraint ( $p < .001$ , 16.1% variance). Male gender was associated with higher risk for binge eating in the past month (OR = 3.19, 95% CI [1.10, 9.24]), while FI severity was not. Implications will be discussed.

#### **PATIENT-REPORTED HEALTH OUTCOMES AMONG OLDER ADULTS UNDERGOING TOTAL KNEE ARTHROPLASTY**

Suttiwan Chawengkiattikul,<sup>1</sup> Suparb Aree-Ue,<sup>2</sup> Phichpraorn Youngcharoen,<sup>3</sup> and Viroj Kawinwonggowit,<sup>4</sup> 1. *Faculty of Medicine Ramathibodi Hospital, Mahidol University, BKK, Thailand,* 2. *Mahidol, Bangkok, Thailand,* 3. *Mahidol University, BKK, Thailand,* 4. *Mahidol University, Bangkok, Thailand*

Backgrounds Total knee arthroplasty (TKA) is a remedy treatment for severe knee osteoarthritis; yet, postoperative outcomes vary. Preoperative patients' expectations to functional abilities are important factors influencing postoperative outcomes and satisfaction. Objectives To