United States, 3. UCCS, Colorado Springs, Colorado, United States

Type 2 diabetes mellitus (T2DM) is a major public health concern requiring engagement with specific self-care activities for improvement. Due to the increased risk for neuropathy, foot ulcers, and infections, engagement with certain footcare practices (e.g., inspecting feet and inside shoes, washing and drying between toes) is an important part of overall diabetes self-care. However, interventions targeting blood glucose monitoring, medication management, nutrition, and/or physical activity often precede footcare interventions. Question-Behavior Effects (QBEs), which describe the effects of behavior questioning on future engagement in that behavior, provide a unique framework for studying diabetes self-care. Although clinicians may not administer footcare interventions for people with T2DM, footcare behaviors are often still assessed (e.g., through questionnaires) in session and, consistent with QBEs, may improve through the repetition of questioning. The present study evaluated footcare QBEs (specifically, the number of days of foot inspection and cleaning in the past week) across 7 sessions of an at-home diabetes management program without intentional footcare intervention. Paired-samples t-tests (N = 78, ages 40-88 years) revealed significant improvements in the number of days of foot inspection and cleaning from intake to session 1 and intake to session 5. However, from intake to session 7, only significant improvements in foot inspection were detected. These findings reflect the potency of footcare QBEs in the absence of specific footcare interventions. They also reveal differential engagement in foot inspection and cleaning after an extended period of questioning, suggesting certain diabetes self-care behaviors may taper without the intentional introduction of intervention.

STRATEGIES TO SUPPORT PHYSICAL ACTIVITY PARTICIPATION IN OLDER ADULTS WITH HEART FAILURE

Katherine Hall,1 Amy Pastva,1 Heather King,2 Sean Lowers,1 Julie Miller,3 and Jennie Riley,4 1. Duke University, Veterans Health Administration, Durham, North Carolina, United States, 2. Duke University School of Medicine, Durham, North Carolina, United States, 3. Duke University, Durham, United States, 4. Duke Roybal Center, Durham, North Carolina, United States

Physical activity (PA) is recommended for people living with heart failure (HF). Despite evidence of its benefits, participation in PA is low in this population, putting them at risk for loss of functional independence and additional health burdens. The aim of this pilot study was to ask older adults living with stable, chronic HF to identify strategies to support regular PA. Patients in an outpatient HF rehabilitation program were recruited to participate in focus groups about their PA knowledge, attitudes, and preferences as part of a stakeholder engagement project. At the beginning of the focus group, participants completed a questionnaire listing 8 potential strategies to optimize PA, and were asked to identify the top 4 strategies that they thought would be most beneficial to support regular PA participation. This was the focus of the current analysis. Thirteen adults with HF (M age=65; 46% female; 62% African American; M BMI=32.6 kg/m2) were enrolled. Top-rated strategies endorsed by participants to support long-term adherence to PA included provision of an exercise guide to support home-based exercise and supplement health provider-supervised exercise sessions (69%), group education classes (64%), completion of fitness assessments at regular intervals (62%), and provision of a transition pathway from an exercise rehabilitation program to a community-based exercise program (62%). The remaining strategies were endorsed by fewer than 50% of participants, and included remote delivery and support options. These results have important implications for future program development and implementation efforts to support PA among older adults with stable, chronic HF.

SUPPORTING PERSONS WITH SEVERE DEMENTIA IN COMMUNICATING THEIR PREFERENCES

Vanessa Burshnic,1 and Michelle Bourgeois,2 1. Durham VA Medical Center, Durham, North Carolina, United States, 2. University of South Florida, Tampa, Florida, United States

Government mandates require US nursing homes to provide preference-based, person-centered care. Persons with dementia (PWD) are less likely to have a role in preference assessments (PAs) used for care planning due to communication challenges associated with the disease. Thus, PWD are at risk of receiving de-personalized treatments. External supports (photograph and text cues) are known to improve communication in PWD. Yet these cues have never been studied with widely used PAs, such as the MDS 3.0 Section F and Preferences for Everyday Living Inventory (PELI). This study examined the effect of two PA conditions (externally supported; standard verbal) on preference consistency and response types (off-topic, clarification requests, elaboration) of residents with severe dementia (N=21) (BIMS < 7) when assessed twice, one-week apart. PA questions were derived from the MDS 3.0 Section F and PELI. As a social validity measure, naïve judges (N=10) listened to interviews and rated residents’ communication clarity and their confidence understanding residents’ preferences. Results showed that neither condition promoted significantly greater levels of consistency over time. Residents’ clarification requests were significantly fewer with use of external supports. Other response types were not significantly different across conditions. Judges’ ratings were not significantly different across conditions; however, they rated residents’ communication as clear and understandable overall. This study addresses a gap in current research and holds important implications for helping providers meet government mandates and enhance care plan participation by residents with severe dementia and other communication challenges.

SESSION 2980 (POSTER)

EMOTIONAL HEALTH AND REGULATION

AGE AND COGNITIVE ABILITY PREDICT PERCEIVED DEMANDS OF SPECIFIC EMOTION REGULATION STRATEGIES

Claire Growney,1 and Tammy English,2 1. North Carolina State University, Raleigh, North Carolina, United States, 2. Washington University in St. Louis, University City, Missouri, United States
Certain emotion regulation (ER) strategies are often considered to be more or less demanding of cognitive resources. However, age-related differences in the perceptions of these demands are not yet understood. Older adults might perceive greater demands for certain strategies due to differences in cognitive ability and motivation to maintain emotional well-being. In the present study, we examined age and cognitive ability as predictors of perceived effort required to use ER strategies that span all families of the process model. A diverse sample of community participants (age 22–83) completed assessments of cognitive ability and perceived demands associated with ER strategies. Overall, response-focused strategies were rated as highest in demands whereas situation selection and savoring were perceived as least demanding. Older adults reported higher demands associated with situation selection, distraction, and detached reappraisal (but not positive reappraisal) compared with younger adults. Cognitive ability was not associated with perceived demands for ER strategies traditionally viewed as cognitively demanding (e.g., suppression). Rather, higher cognitive ability only predicted lower perceived demands for strategies often considered low in demand: situation selection and savoring. Perceived ER success was not consistently associated with age or cognitive demands. Results suggest that older adults view some, but not all, ER strategies as more demanding than younger adults do. The role of cognitive ability in age-related changes in ER may be more complex than previously expected. Notably, the lack of findings with perceived ER success suggest effort requirements associated with ER may not impede ability to successfully regulate across adulthood.

AGE DIFFERENCES IN THE AFFECTIVE EXPERIENCE OF STATE CURIOSITY

Li Chu,1 and Helene Fung,2 1. The Chinese University of Hong Kong, Shatin, New Territories, China, 2. The Chinese University of Hong Kong, Sha Tin, China

Is feeling curious a pleasant, anxious or mixed feeling experience? Dual process theory posits that curiosity results from an optimal level of knowledge gap anxiety. Yet, personal growth facilitation model suggests that people are intrinsically curious, which is associated with positive affects. While curiosity may be pleasant or anxious, it may also be both. In fact, compared with younger adults, older adults were more likely to experience mixed emotions. However, very few studies investigated age differences in affective experience of curiosity, so the present study utilized a time-sampling dataset to address this question. This 14-day time-sampling study included 85 younger (43 females, age 18-30) and 83 older adults (40 females, age 60-85) who recorded momentary curiosity and affective experiences three times per day. Linear mixed-effects analysis revealed a significant 3-way interaction between age group, happiness and anxiousness on state curiosity (t = .29, p < .001). For younger adults, results suggested that curiosity was higher when they felt either happy or anxious but not when feeling both. Conversely, for older adults, curiosity was higher when they felt both happy and anxious concurrently. In other words, older adults were more likely to experience curiosity as a mixed emotional state, whereas younger adults were more likely to experience curiosity as a pure emotional state. This finding adds to the current mixed emotion and aging literature and has important implications for future interventions to enhance curiosity towards novelities for people from different age groups.

AGE MODERATES THE EFFECT OF AWE ON COGNITIVE BUT NOT EMOTIONAL WELL-BEING

Laura Bernstein, and Julie Patrick, West Virginia University, Morgantown, West Virginia, United States

Evidence suggests that positive emotions may broaden and build our emotional and physical health, and cognitive resources (Fredrickson, 2001). A growing literature shows that happiness and joy can be powerful means for growth. In contrast to happiness, which pushes one to expand and accommodate, research suggests that awe, that feeling of being in the presence of something immense or transcendent, prompts the urge to assimilate. Although promising, few examinations have included older adults and a limited range of positive emotions have been examined. Thus, we sought to address this gap in the literature by assessing the influence of age and awe on emotional well-being. Data from 180 adults (M age = 38; range 18–89) were used to examine the main effects of age and dispositional awe (Shiota et al., 2006), and their interaction, on emotional well-being. Only 12% of the variance was explained \[X^2 (DF = 9) = 344.27, p < .001\]. Awe was positively associated with emotional well-being (Beta = .280*), but neither age nor the interaction between age and awe contributed to the variance explained. We conducted a similar examination with perceived cognitive health \[X^2 (DF=9) = 337.09, p < .001; R^2 = .335\]. A main effect for age and a significant age by awe interaction uniquely contributed to the variance explained in cognitive well-being. A similar model was tested with self-assessed health as the outcome. Neither main effects nor the interaction emerged as significant. Results are discussed within the context of age-invariant contributors to well-being.

AGE SIMILARITY IN EMOTION PERCEPTION BASED ON EYE GAZE MANIPULATION.

Yosra Abualula,1 and Eric Allard,2 1. Cleveland State University, Lakewood, Ohio, United States, 2. Cleveland State University, Cleveland, Ohio, United States

The purpose of this study was to examine age differences in emotion perception as a function of emotion type and gaze direction. Old and young adult participants were presented with facial images showing happiness, sadness, fear, anger and disgust while having their eyes tracked. The image stimuli included a manipulation of eye gaze. Half of the facial expressions had a directed eye gaze while the other half showed an averted gaze. A 2 (age) x 2 (gaze) x 5 (emotion) repeated measures ANOVA was used to analyze emotion perception scores and fixation to eye and mouth regions of the face. The manipulation of eye gaze yielded more age similarities than differences in emotion perception. Overall, we did not detect age differences in recognition ability. However, we found that certain emotion categories differentially impacted emotion perception. Interestingly, we observed that an averted gaze led to beneficial performance for fear and disgust faces. Additionally, participants spent more time fixating on the eye regions of sad facial expressions. We discuss how naturalistic manipulations of various facial