Social Participation Across Midlife and Later Life: Evidence From the Silent Generation

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Despite the well-established benefits of social participation for individuals and communities, little is known about how it varies throughout the life course. Drawing upon data collected between 1957 and 2011 by the Wisconsin Longitudinal Study (22,023 observations from a cohort of 6,627), this study provides four valuable results. One, I find evidence of five distinct social participation trajectories between the ages of 35 and 71; the majority of which demonstrate social disengagement over time. Two, these participation declines are primarily attributable to changes in meeting friends and group exercise activity. Three, the most pronounced activity differences separating those in more favorable and unfavorable participation trajectories are cultural event attendance and voluntary group membership. Lastly, I identify particular high school activities that are associated with social participation decades later. In total, these results highlight heterogeneity among different types of social activities, and underscore the possible consequences of membership decisions made in early adulthood.

The Effect of Older Adults’ Volunteering on Relational Satisfaction

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Longevity is increasing in what is called the centenarian society. However, the average retirement age of Korea is the lowest among OECD countries. Because of increasing longevity, older adults need activities after retirement. Volunteering can be a substitute that allows Korean older adults to find a social identity. This study examined older adults’ volunteering and how many kinds of volunteering affected relational satisfaction differently. This study used the 6th additional wave of the Korean Retirement and Income Study (2016). The target population of this study was ages over 60 and the sample size was 280. For data analysis, multiple regressions were used. Demographic variables were controlled. As for independent variables, reasons for volunteering whether they were motivated for self or for others were used. For dependent variables, relational satisfaction, such as family, human relation and overall life satisfaction was used. Volunteers’ health is an important factor for relational satisfaction. If volunteering was self-motivated, satisfaction of both family and human relations were negatively affected. Reason for others also affected satisfaction of family and human relations negatively. Volunteering initiated by others increased satisfaction of family and human relations. Doing more than one kind of volunteering affected both satisfaction of family and human relations. For overall life satisfaction, the effect of volunteering for oneself was lower than other reasons. These findings implied that reasons for volunteering affected relational satisfaction differently. In addition, the activities of volunteering, such as taking part in one or more had different effects.

The Effects of Employment on Depression and Life Satisfaction Among Old-Aged Using the DD Method Combined With PSM

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The purpose of this study is to explore the effect of employment on depression and life satisfaction among old-aged. Using 12th (2017) wave and 13th (2018) wave of Korean Welfare Panel Study (KoWePS), three stages of analyses were conducted. First, through propensity score matching (PSM) method, sample with similar propensity scores was matched between the group that did not work in 12th wave but worked in 13th wave (experimental group, N=180), and the group that did not work in 12th and 13th wave (comparative group, N=180). Second, the matched sample was used to conduct multiple regression analysis with the group dummy variable (experimental group, comparative group) as an independent variable, and depression and life satisfaction as the dependent variables. Third, combined model of propensity score matching (PSM) and double difference (DD) method was conducted to more appropriately derive the net effect of employment. The results of multiple regression after propensity matching showed that employment had a positive effect on reducing depression (B= -1.70, p< .01) and increasing life satisfaction (B= .12, p< .01) in old-aged. Furthermore, in combined model of PSM and DD, life satisfaction was improved when employed compared to non-employed (B= .15, p< .05). The results of this study are meaningful in that the meaning of employment in old-aged is more clearly derived by solving selection bias and endogenous problems. Also, this study may provide reference for establishing welfare policies related to employment among old-aged.

The Effects of Situational Peers and Support Groups on the Well-Being of Grandmothers Raising Grandchildren

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Grandmothers raising their grandchildren face not only the demands of parenting, but the added burden of parenting a child they did not expect to raise. Similarly, grandmothers living in multigenerational households need to balance expectations and household/caregiving tasks across the generations. As part of a nationwide RCT designed to lessen the stress associated with the caregiving burden of raising grandchildren, we asked 342 grandmothers raising their grandchildren about their engagement with support groups and whether their social network included other grandfamilies. Here, we examine the effect of situational peers and support group engagement on grandmother’s stress, reward, social support, mental health, mindfulness, and
resourcefulness. Of our sample, 53.8% (N=184) reported belonging to a support group. The majority of participants (138) belonged to online support groups on Facebook, 41 reported participating in in-person support groups, 3 belonged to both in-person and online support groups, and 8 did not respond. When asked whether and how well our participants knew other families like theirs, 31% (106) said they did not know any, 40.6% (139) knew of at least one, but not well, and 28.4% (97) said they had at least one friend with a family like her own. Knowing other families like their own affected self-appraised stress, but no other outcomes. Grandmothers participating in support groups had lower mindfulness scores, higher stress, and worse mental health scores than grandmothers not participating in support groups, possibly reflecting the higher need for support among those participants.

THE RELATIONSHIP BETWEEN SOCIAL SUPPORT, AGING EXPECTATIONS, AND HEALTH BEHAVIOR IN MIDDLE AGE
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Midlife is a critical period when individuals need to actively engage in healthy behaviors for healthy aging. Although both social relations and attitudes toward aging are factors related to health behavior, little is known about their relationships based on age-related differences. The purposes of this study were to investigate the influence of social support affecting health behavior through expectations regarding aging and to examine how age affects the relationship. A cross-sectional study was conducted with data from 245 midlife Koreans (mean age= 51.5) collected by a self-administered survey. Data were analyzed using the PROCESS macro in SPSS. Social support was significantly related to expectations regarding aging (r = -.135, p=.034) and health behavior (r=.223, p<.000). There was age-related difference in the relationship between social support and expectations regarding aging (β=.070, p=.038), indicating that the relationship was much stronger in the younger group. In addition, the influence of social support on health behavior through expectations regarding aging was significant in relatively young middle-aged individuals. Our findings emphasize the importance of supportive social relationships, which could affect expectations regarding aging linked to health behavior, especially for young middle-aged individuals. It is necessary to develop psycho-cognitive programs to activate social interaction and to improve positive attitudes toward aging for more active engagement in health behaviors in midlife individuals.

SESSION 2956 (POSTER)

TECHNOLOGY II

A SYSTEMATIC REVIEW OF IN-HOME SMART TECHNOLOGY ADOPTION TO IMPROVE OLDER ADULT HEALTH AND FAMILY CAREGIVING
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In-home and internet-based smart technologies to improve older adult health has been rapidly developing. Technologies such as in-home sensors and smart homes enable older adults to live independently and age in place. These technologies also assist informal caregivers in their roles, thus reducing caregiver burden. However, technology adoption among older adults and family caregivers has been relatively low and reasons for technology acceptance are complex. Therefore, the purpose of this study was to conduct a systematic review of the literature, examining acceptance and adoption of in-home, internet-based smart technologies that are designed to improve health outcomes of older adults and can assist family caregivers in providing supports. This study utilized the Rew method (2011) and included peer-reviewed research articles published between 1991 and 2019 and available in: ISI Web of Science; PubMed; Scopus; CINAHL; and PsycInfo. A total of 1,227 relevant articles were identified with the search strings used and a final sample of 48 articles were included after the title, abstract, and full article review processes. Findings highlight several facilitators and barriers to technology adoption. Some facilitators to adoption include: technology familiarity, safety/security, personally tailored, non-obtrusive design, easy access, and reduction of caregiver burden. A few barriers include: cost, difficulty to use, time, stigma, privacy, data accuracy, and confidence. Additional findings will also be presented. A more thorough understanding of these facilitators and barriers to acceptance/adoption is crucial for the successful dissemination of in-home, internet-based smart technologies. Increased adoption can improve older adult health and reduce caregiver burden.

ADDRESSING THE ROLE OF SMART ROBOTIC HEALTH ASSISTANTS WITHIN THE HUMAN-MACHINE FRONTIER OF GERIATRIC HEALTHCARE
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Data for this study was acquired from three separate stakeholder focus group sessions involving nurse case managers (n = 5), social agency caseworkers (n = 5), and rural outreach providers (n = 5). Participants across all groups were asked to address the question: “When it comes to your work, what would you want a smart robot assistant to do for you?” Data from the three sessions were combined, transcribed verbatim, coded, and analyzed for thematic content. Three shared themes emerged, including health monitoring, behavioral intervention, and healthcare literacy. Relative to health monitoring, participants desired a robot that possessed functions in the form of “taking vital signs,” and “tracking water and food intake.” There was also a thematic agreement regarding behavioral intervention capabilities. Most notably, advisory stakeholders acknowledged a need for a smart robotic assistant to provide geriatric care recipients with “an alert or reminder to take medication.” This was viewed as an essential intervention for improving medication adherence. Healthcare literacy emerged as a final theme among advisory groups. In particular, participants noted that a smart robot