Ageism, specifically interventions that target students in an intergenerational program and staff members of senior living communities. Results from these evaluations point to an increase in positive attitudes among students and a reduction in ageist behaviors among staff members. All presenters will discuss policy, practice and research implications of their studies.

AGEISM AND ITS IMPACT ON OLDER PERSONS’ HEALTH
Becca Levy, Yale School of Public Health, Woodbridge, Connecticut, United States

Ageism has been called a silent epidemic. The extent to which ageism impacts the health of older persons in different countries was not well understood. In this presentation we will focus on the reach of ageism including negative age beliefs, on older individuals’ health. In an exhaustive systematic review, we found that ageism influenced older individuals in 45 countries and 11 health domains, with the prevalence of significant findings increasing over time (p < .001). In this presentation, we will also explore the mechanism by which this impact occurs and steps that can be taken to address this epidemic.

DISCRIMINATION AND PROTECTIVE FACTORS TO COGNITIVE HEALTH: TESTING NIA’S HEALTH DISPARITIES FRAMEWORK
Ernest Gonzales,1 Cliff Whetung,2 Jane Lee,3 and Yi Wang,4 1. New York University, New York, New York, United States, 2. New York University, New York, New York, United States, 3. University of Hawai‘i, Myron B. Thompson School of Social Work, Honolulu, Hawai‘i, United States, 4. University of Iowa, Iowa City, Iowa, United States

Cognitive impairment is a worldwide epidemic. Informed by NIA’s Health Disparities Framework, this study investigated interpersonal, behavioral, and sociocultural risk and protective factors associated with cognitive health trajectories. Mixed models examined factors associated with cognitive health with data from the Health and Retirement Study among Whites, Blacks, and Hispanics (2008-2014, N=4,511). A majority of respondents who experienced everyday discrimination attributed it to ageism among this racially and ethnically diverse sample. Stratified mixed models of everyday discrimination by attribution (racism or ageism) revealed worse cognitive functioning. Major lifetime discrimination was not statistically associated with cognitive functioning. Economic factors (education, income, assets) and religious activity protected cognitive functioning and were particularly salient for Blacks and Hispanics. Strategies that bolster individual resilience as well as social policies that address discrimination and structural inequities will likely reduce health disparities and improve population health.

PERCEPTIONS OF WORKPLACE FAIRNESS IN THE CONTEXT OF AGE AND INTERSECTIONALITY
Cal Halvorsen,1 Marcie Pitt-Catsouphes,2 and Indrani Saran,2 1. Boston College, Chestnut Hill, Massachusetts, United States, 2. Boston College School of Social Work, Chestnut Hill, Massachusetts, United States

While scholars have focused on workplace fairness (often called organizational justice) for quite some time, the context of diversity—in its many forms—has rarely been included in this conversation. This presentation will review concepts related to workplace fairness, describing how the context of diversity may influence perceptions of it. We then will present the results of a recent survey of 609 respondents aged 18 to 70 with a focus on how holding diverse attributes (e.g., age, gender, and their intersectionality) may shape perceptions of workplace fairness and diversity. Overall, we found that the perceptions of workplace fairness and diversity are similar by age and gender, with a few notable differences (e.g., older respondents value interpersonal justice the most, such as their opinions being considered, and younger respondents see workplace diversity the most positively). These results can inform scholarship and discussions on human resource practices and environmental change in organizations.

APPROACHES TO ANTI-AGEISM INTERVENTIONS
Tracey Gendron, and Jennifer Inker, Virginia Commonwealth University, Richmond, Virginia, United States

Ageism, a multidimensional construct, is also understood as a relational process whereby perceptions and behaviors toward older individuals by younger individuals not only damage the self-esteem of elders, but also create a hostile environment for their own future social interactions and their own future self-development as elders. Anti-ageism interventions have the hefty task of improving attitudes and behaviors toward aging within all of these contexts. This presentation will discuss findings from two different anti-ageism interventions both designed to mitigate the negative impacts of ageism. Results from a study on an intergenerational arts-based program found that after participation students demonstrated a positive change in their attitudes toward older adults. Findings from a video-based ageism intervention among a sample of 265 staff members in 15 senior living communities demonstrated decreased internalized aging anxiety as well as decreased ageist behaviors directly after the training and at three month post follow-up. Given the complex and systemic nature of ageism, diversity is necessary in scope and type of intervention in order to reach the broadest audience.

SESSION 6030 (SYMPOSIUM)
AN INTERNATIONAL PERSPECTIVE: THE ROLE OF TRANSPORTATION IN SUPPORTING COMMUNITY MOBILITY NEEDS OF OLDER ADULTS
Chair: Anne Dickerson
Discussant: Brenda Vrkljan

This international symposium brings together leading scholars in occupational therapy research whose shared aim is to support community mobility in older adulthood. In this session, five groups of researchers will share their collective and individual research outcomes supporting continued community mobility of older adults, especially when driving is no longer an option. The first presentation will be their collective international, cross sectional study of 247 older adults from seven countries. This study compared community
destinations, methods of transportation and factors that influence community mobility. Each presentation that follows will highlight unique studies with the overarching goal of improving mobility options for older adults to “age in place of choice.” Our discussant will summarize the potential for expanding this research by engaging the audience through interactive questions, as to where local and global opportunities for innovations that support community mobility will be raised.

AN INTERNATIONAL COMPARISON OF THE COMMUNITY MOBILITY PATTERNS OF OLDER ADULTS
Lizette Swanepoel, Isabelle Gelinas, and Barbara Mazer,
1. Stellenbosch University, Cape Town, Western Cape, South Africa, 2. McGill University, Montreal, Quebec, Canada, 3. McGill University School of Physical and Occupational Therapy, Montreal, Quebec, Canada

Community mobility in older adults is important for maintaining health, quality of life and social participation. Globally, older adults who are non-drivers, access their community through various modes of transport to maintain community mobility. This international cross-sectional cohort study (n=246) explored the mobility patterns of older adults and examined their access to out-of-home activities and health related quality of life in seven countries. Quality of life was determined using EQ-5D-5L and was generally high among all participants. Findings from the study indicate that a complex myriad of factors influence safe transport mobility in older adults. Results suggested that inclement weather and place of residence negatively impacted access to out-of-home activities, yet these factors but did not increase use of public transport. Given the complexity of transportation use and mobility patterns in older adults, an individualised approach may be necessary to keep older adults connected to their out-of-home activities.

A PILOT STUDY USING THE LIFE SPACE ASSESSMENT AMONG COMMUNITY-DWELLING OLDER ADULTS IN IRELAND
Tadhg Stapleton, Trinity College Dublin, Dublin, Dublin, Ireland

Forty older adults (27, 67.5% female), mean age 74.3 years (range 65-89), current drivers 31 (77.5%), 23 (57.5%) rural dwellers and 17 (42.5%) urban dwellers participated in the survey. Median LSA score was 74 (range 27-102). All participants were readily accessing life spaces within and immediately outside their own home. Over half (n=23, 57.5%) accessed spaces in their neighbourhood on a daily basis. Decreased frequency of access to spaces outside of local neighbourhood and town was noted. No significant difference in LSA scores between genders (P=0.549), current driving status (P=0.235), but urban dwellers had significantly higher LSA scores than rural dwellers (P=0.024). Spearman correlations found statistically significant negative correlation between age and LSA scores (rho=-0.445, P=0.004), and significant positive correlation between LSA and Euroqol (EQ) VAS scores (rho=0.405, P=0.010). Findings are limited by the small sample size but highlight decreasing frequency of wider community participation with increasing age.

COMPARISON OF USA AND AUSTRALIAN MOBILITY DEVICE USERS’ AND AMBULANT BUS USERS’ VIEWS OF RERAINTS ON PUBLIC BUSES
Carolyn Unsworth, Central Queensland University, Melbourne, Victoria, Australia

Many older people use powered wheelchairs and mobility scooters to access the community on buses but have increased injury risk if the mobility device tips or slides. Wheelchair tie-down and occupant restraint systems (WTORS) are mandated on USA transit buses, and their introduction investigated in Australia. This study examined the views of mobility device and ambulant bus users in the USA and Australia on WTORS. A Qualtrics survey with 448 respondents showed strong support for WTORS use and found the most important factors underpinning use were Safety, Comfort, and Transit time. US research indicates dwell time while fitting WTORS is 4 minutes, and participants reported 3.65(SD3.06) minutes is acceptable. There was no difference in USA and Australian participants who have slid or tipped in their device, despite being restrained in the USA: X2(1,n=220)=0.03,p=.53, phi=-.016). This research suggests all bus users are supportive of WTORS, but their effectiveness requires investigation.

PLACES VISITED, MAINTAINED, OR ABANDONED OUTSIDE HOME: A COMMUNITY MOBILITY NEED OF OLDER ADULTS WITH DEMENTIA
Isabel Margot-Cattin, Sophie Gaber, Nicolas Kuhne, Camilla Malinowski, and Louise Nygard, 1. University of Applied Sciences and Arts of Western Switzerland (HES-SO), Lausanne, Vaud, Switzerland, 2. Karolinska Institutet, Stockholm, Stockholm Lans, Sweden, 3. University of Applied Sciences and Arts of Western Switzerland (HES-SO), Lausanne, Vaud, Switzerland, 4. Karolinska Institutet, Huddinge, Stockholms Lan, Sweden, 5. Karolinska Institute, Stockholm, Stockholms Lan, Sweden

For older adults to “age in place”, they need to keep engaged and mobile in their communities, whatever their health condition. The impact of age and cognitive decline on community mobility is a growing problem in Europe and worldwide. Engaging in occupations outside home implies being able to get to those places where activities are performed. Yet little is known regarding the types of places visited, maintained or abandoned for older adults with/without dementia. This study addresses community mobility needs through the places people visit, maintain or abandon. People with and without dementia, aged 55+, were interviewed using the Participation in ACTivities and Places OUTside the Home (ACT-OUT) questionnaire across Switzerland (n=70), Sweden (n=69) and the UK (n=128). Results show that people with dementia experience a higher rate of abandonment for more places than regular older adults. Insights about driving cessation and access to travel passes will be presented.

SESSION 6035 (SYMPOSIUM)

APPLIED SCHOLARSHIP IN LGBTQ AGING: IMPLICATIONS FOR POLICY AND PRACTICE
Chair: Austin Oswald
Discussant: Vanessa Fabtree