We observed well-intentioned responses by community organizations but a lack of centralized coordination across sectors. Most organizations were not aware of the efforts and capabilities of others causing duplication or gaps in services. Our team created a user-friendly, evidence-based roadmap to guide communities through developing and sustaining effective collaborative partnerships for food and nutrition-related problems to address together. We will describe elements of an effective, efficient roadmap development process using currently available evidence-based resources and creating evidence-informed resources when we identify gaps. Expected outcomes are: 1) format of the final roadmap; 2) types of groups willing to use it; 3) how well the roadmap was implemented; 4) feasibility of continued use of the roadmap by groups over the long term; and 5) potential to expand roadmap use to other communities.

TEAMS AND TOOLS: ADDRESSING POLYPHARMACY USING THE ARMOR TOOL IN A RURAL NURSING CARE FACILITY

Angela Zell, and Raza Haque, Michigan State University, East Lansing, Michigan, United States

Federal guidelines by the Centers for Medicare and Medicaid Services around the use of an interdisciplinary team (IDT) approach have been in place for years. However, use of evidence-based tools to address polypharmacy have not been specified. A study was conducted to evaluate the implementation of the ARMOR (Assess, Review, Minimize, Optimize, Reassess) tool to address polypharmacy in a rural nursing care facility. The tool provided a stepwise approach to a standardized process for the IDT to discuss individual resident care plans including psychotropic medications, psychosocial concerns, falls, quality of life, functional status and other factors in their weekly meetings. Surveys and a focus group were used to measure attitudes and skills of the IDT in relation to the use of the evidence-based tool in the IDT process. Data collected presents an overall positive attitude for and improvement in skills in the IDT with the use of the ARMOR tool.

DIGITAL LEARNING AND ONLINE CHAIR YOGA FOR RURAL UNDERSERVED OLDER ADULTS AT RISK OF COGNITIVE DECLINE

Lisa Wiese1, and JuYoung Park2, 1. Florida Atlantic University, Boca Raton, Florida, United States, 2. Florida Atlantic University College of Social Work and Criminal Justice, Boca Raton, Florida, United States

We conducted a randomized control trial to test the feasibility of an online chair yoga intervention among rural older adults at risk for cognitive decline in an underserved, racially/ethnically diverse community. Participants were randomly assigned to either chair yoga (n=15) or computer brain games (n=15). Prior to the 12-week intervention, a computer training program was provided to all participants by local high school students, who followed a previously tested curriculum, and mentored the older adults in attending sessions. Digital literacy and cognitive, physical, and psychosocial measures were collected at baseline, 3 weeks, and post-intervention, with 3 and 6-month follow-up. We assessed students’ attitudes toward older adults pre/post-intervention. Both student and resident samples were 98% minority (African American, Latino, and Afro-Caribbean), with residents’ average age of 67.5 (SD = 8.3), years lived rural 38 (M = 11.5), and initial digital literacy of 48.5%. Additional outcomes will be detailed in this presentation.

THE EFFECTS OF COVID-19 ON THE MIGRATION OF HOME HEALTHCARE WORKER

Pamela Monaghan-Geernaert, Northern State University, Aberdeen, South Dakota, United States

Home health caregivers provide a vital role in allowing people to age in place. Women, and in particular immigrant women, have become the largest provider of home health care in Western Industrialized Countries. Global push-pull factors affecting caregivers were greatly disrupted with the emergence of the global pandemic – COVID-19. The pandemic highlighted how fragile the system is and how the easily the ‘grey economy’ can be compromised. This research looks at border access, immigration restrictions and other factors which impeded the migration of caregivers. Poor countries suffered greatly with restrictions on exporting women who use cross national moves as a means to generate income for families in their homeland, and rich countries faced extreme shortages. The results were devastating for all parties – caregivers and care recipients alike.

ASSESSING THE IMPACT OF COVID-19 ON THE HEALTH AND WELLNESS OF THE LONG-TERM CARE WORKFORCE IN RURAL AND NORTHERN AREAS

Shannon Freeman1, Davina Banner1, Hui Jun Chew1, Tammy Klassen-Ross1, and Piper Jackson2, 1. University of Northern British Columbia, Prince George, British Columbia, Canada, 2. Thompson Rivers University, Kamloops, British Columbia, Canada

There is growing recognition that the mental health and wellbeing of the LTCF workforce have been disproportionately impacted by COVID-19. Therefore, we sought to describe the experiences and challenges LTCF employees faced during COVID-19 in rural and northern communities and highlight factors affecting their ability to be resilient and provide high quality care. We conducted 53 qualitative interviews using zoom with LTCF care providers (care aides, nurses, social workers), staff (food service workers, recreation providers), and management between November 2021 and February 2021. Data was transcribed and thematic analysis undertaken. We will describe participants experiences stratified by LTCF employee type and highlight similarities and differences in participants experiences across geography and facility type (freestanding vs. co-located in hospital) and describe factors affecting well-being, job satisfaction, and retention. We will share an inventory of programs and strategies participants found useful to mitigate negative effects on their mental health and well-being.

SESSION 2220 (SYMPOSIUM)

SELF-PERCEPTIONS OF AGING IN THE CONTEXT OF CHALLENGING EXPERIENCES: PATTERNS OF RISK AND RESILIENCE

Chair: Hannah Giasson Co-Chair: Rachel Koffer
Discussant: Jacqui Smith

Self-perceptions of aging have important implications for health and well-being in later life. Early life experiences,
cultural and societal notions about age, and one’s present health and situational context may contribute to one’s expectations and perceptions of their own aging (e.g., Levy, 2009; Diehl et al., 2014; 2021). However, self-perceptions of aging may also predict people’s responses in the face of current or future challenges. This symposium takes a closer look at self-perceptions of aging in the context of different types of life challenges. Hu and Larkina discuss early life informal caregiving experiences as antecedents of negative self-perceptions of aging in later life. Koffer and Giasson discuss how ten-year longitudinal associations between subjective age and future loneliness differ among current caregivers and non-caregivers. Mejia and colleagues discuss the role of self-perceptions of aging in adaptation to life following a fall, highlighting potential protective effects of positive self-perceptions of aging and sense of control. Finally, Giasson and colleagues discuss positive self-perceptions of aging as predictors of preventive health behavior and resilience in the context of the COVID-19 pandemic. Dr. Jacqui Smith will conclude the session with an integration of common themes, practical implications, and future research directions that emerge from the four studies.

POSITIVE SELF-PERCEPTIONS OF AGING AS PREDICTORS OF COVID-RELATED PREVENTIVE BEHAVIOR AND RESILIENCE
Hannah Giasson, William Chopik, and Alejandro Carrillo, 1. Arizona State University, Tempe, Arizona, United States, 2. Michigan State University, East Lansing, Michigan, United States

Individuals have faced extraordinary challenges throughout the COVID-19 pandemic. Psychosocial strengths may promote individuals’ resilience during this time. Positive self-perceptions of aging (SPA) have been found to predict a variety of health and well-being indicators. We examined SPA as a predictor of COVID-19-related behavior, adaptation, and resilience in a sample of 3,620 adults (Mage=65.88; 61.1% women; 65.4% white) from the 2016 and 2020 waves of the Health and Retirement Study. Linear regression results revealed that more positive SPA in 2016 was associated with more preventative health behavior (β=.07, p<.001), a higher likelihood of staying at home (β=.27, p<.001), less worry (β=.27, p<.001), less stress (β=.30, p<.01), less loneliness (β=.40, p<.001), and greater resilience (β=.20, p<.001) during the first year of the pandemic (2020). Associations held after controlling for demographic covariates. Findings support SPA theories, suggesting linkages between SPA and adaptive behaviors and outcomes in the face of external challenges.

SUBJECTIVE AGE AND FUTURE LONELINESS: COMPARING CAREGIVERS AND NON-CAREGIVERS ACROSS TEN YEARS
Rachel Koffer, and Hannah Giasson, 1. Arizona State University, Phoenix, Arizona, United States, 2. Arizona State University, Tempe, Arizona, United States

Experiences that make age salient can shape how old or young a person feels relative to their chronological age. Caregiving for a loved one may contribute to subjective age as well as the linkages between subjective age and well-being. We examined longitudinal associations between subjective age and future loneliness ten years later among 2,557 caregivers and non-caregivers (Baseline Mage=55) in the Midlife in the United States Study (2004-2014). Linear regression results indicated an interaction between caregiver status and subjective age (β = 0.60, 95% CI=[0.14, 1.06]), such that among non-caregivers, older subjective age predicted greater future loneliness, but among caregivers, younger subjective age predicted greater future loneliness. Associations hold after controlling for age, baseline loneliness, and caregiver status at follow-up. Future subjective aging research should examine the unique context of caregiving to further understand the meaning of subjective age and how it predicts important well-being outcomes among caregivers.

POSSIBLE SELVES THROUGH CAREGIVING: CAREGIVING HISTORY'S EFFECTS ON SELF-PERCEPTIONS OF AGING
Rita Hu, and Marina Larkina, University of Michigan, Ann Arbor, Michigan, United States

Most studies examine the consequences of self-perceptions of aging (SPA). Little is known about the antecedents. The possible selves framework suggests that earlier life experiences can shape people’s scenarios about their own aging. We examine the association between early-life informal caregiving experiences and SPA later in life using data from the HRS Retrospective Life History Mail Survey and the Psychosocial and Lifestyle Questionnaire (N = 2,556, Mage = 72.9). Participants reported up to five periods of unpaid caregiving (≥ 6 months) with family members. SPA was measured by the HRS 8-item scale. Step-wise linear regression revealed that compared with people who had not been caregivers, early-life caregivers reported more negative SPA later in life (β = 0.20, 95% CI[0.12, 0.29]). The association holds after controlling for health-related and demographic covariates. Future research and interventions should focus on the consequences of early-life caregiving on the caregiver’s scenarios about their own aging.

SUBJECTIVE EXPERIENCES OF AGING AND PHYSICAL ACTIVITY IN THE YEARS THAT PRECEDE AND FOLLOW A FALL
Shannon Mejia, Tai-Te Su’u, and Faith-Christina Washington, 1. University of Illinois at Urbana-Champaign, Champaign, Illinois, United States, 2. The University of Illinois Urbana-Champaign, Champaign, Illinois, United States

Falls are the leading preventable cause of death and disability in older adulthood. Subjective experiences of aging could facilitate fall prevention and adaptation to post-falls life. We use data from the 2008-2018 waves of the Health and Retirement Study to follow self-perceptions of aging (SPA), health-domain control (HDC), and physical activity (PA) in 12,000+ adults (Mage=69.09; 59% women; 83% white) to examine trajectories of subjective experiences and health behaviors preceding and following a fall. In total, 57% experienced falling. Both SPA and HDC were lower among fallers. Spline growth models showed that HDC, SPA, and PA significantly decreased over time. Additionally, the rate of decline in HDC and PA increased following the fall. After falling, the protective effect of HDC amplified, while positive SPA dampened change in PA. Our study illustrates the importance of subjective experiences of aging on adaptation and recovery in the context of falling.