delivery mode through video-conferencing software since the outbreak of COVID-19. The phenomenon is new, and no research has been done to investigate older adults’ experience on it. This study adopted a descriptive qualitative methodologically to understand the phenomenon. Twenty-three older adults (aged 55-89 years), with experience of participating online exercise class since COVID-19 participated in the study. Six major themes regarding their experiences emerged. Regarding positive experiences, older adults experienced convenience, increased exercise regularity, technical transformation and motivation in this new form of home-based exercise. At the same time, they experienced specific technical barriers and compensated supervision quality from the instructor. The findings of the study gave important future research direction and implications to the development of smart aging in community centres in Hong Kong.

SESSION 3850 (SYMPOSIUM)

MULTIDISCIPLINARY PERSPECTIVES ON LATER-LIFE DEPRESSION: THE ROLE OF BRAIN HEALTH
Chair: Ann Steffen Discussant: Jennifer Moye

Bi-directional associations between depression and cognitive functioning are magnified among aging individuals, challenging behavioral health providers who treat older adults experiencing clinical and subsyndromal depression. This symposium contributes to the science and practice of assessing and treating later-life depression while also attending to issues in professional training. The first paper presents pre-treatment data from the multi-site Optimum Study of older adults experiencing treatment-resistant depression (n = 529). The relevance of positive psychological constructs is supported with analyses showing important relationships among cognitive functioning, social participation, and psychological well-being. The second paper describes the development of an updated measure to assess behavioral health providers’ knowledge of later life depression, including brain health concerns. Psychometric data for the measure were generated from a random pool of licensed social workers (N=900) who were mailed the survey packet. The third presentation features an experimental study demonstrating that foundational information about aging, including debunking misconceptions about cognitive aging, influenced continuing education preferences of generalist Licensed Professional Counselors (LPCs). Among the randomly generated pool of LPCs (N = 120), participants who received aging-specific information were more likely to later choose an aging-specific continuing education option. The fourth paper highlights recommendations for mental health practitioners working in primary care and general medical settings with older adults who have co-existing depressive symptoms and cognitive concerns. The fifth and final presentation describes cognitive behavioral clinical tools to address brain health concerns in the context of later-life depression, using the new Brain Health module of a published client workbook.

PSYCHOLOGICAL WELL-BEING IN OLDER ADULTS WITH TREATMENT-RESISTANT DEPRESSION
Selmi Kallmi,1 Ann Steffen1, and Eric Lenze2. 1. University of Missouri-St. Louis, St. Louis, Missouri, United States, 2. Washington University School of Medicine in St. Louis, St. Louis, Missouri, United States

Geriatric psychiatry research has documented the importance of psychological well-being to older adults diagnosed with depression (Lenze et al., 2016). This presentation utilizes pre-treatment data from the Optimum Study of treatment-resistant depression in older adults recruited from five USA and Canadian metropolitan areas (N = 529). Social participation was measured with the PROMIS scale: Ability to Participate in Social Roles and Activities (Hahn et al., 2014). Positive affect and life satisfaction were assessed using scales from the Psychological Well-Being subdomain (Salsman et al., 2013) of the NIH Toolbox for Assessment of Neurological and Behavioral Function - Emotion Battery (NIHTB-EB). Along with associations between social participation and positive affect (r = .38, p < .01) and between social participation and life satisfaction (r = .26, p < .01), path analyses explored social participation as a mediator of the relationship between cognitive functioning (NIHTB-CB; Weintraub et al., 2013) and psychological well-being.

MEASURING PROFESSIONAL KNOWLEDGE OF LATER LIFE DEPRESSION
Abby Laine, and Ann Steffen, University of Missouri-St. Louis, St. Louis, Missouri, United States

Research linking behavioral health providers’ knowledge of later life depression to their clinical practices and patient outcomes is restricted by outdated measures. A multi-stage study was conducted to ameliorate this gap. Qualitative interviews with geropsychology content experts (N = 5) generated 49 true/false items capturing relevant concepts in later life depression, including brain health concerns. Additional content experts (N = 10) completed the questionnaire and a card sort task placing items into categories (Psychopathology, Assessment/Diagnosis, Treatment, Other) to understand measurement structure. This resulted in retention of 42 items. A random pool of licensed social workers (N=900) were mailed the survey packet with option to complete via return mail or online. This presentation will review scale psychometrics, reliability, and construct validity among MSWs from diverse clinical backgrounds. Associations between participant characteristics and knowledge of cognitive and other depressive symptoms will also be highlighted.

SHAPING PREFERENCES FOR AGING-SPECIFIC CONTINUING EDUCATION BY LICENSED PROFESSIONAL COUNSELORS
Nicholas Schmidt1, and Ann Steffen2. 1. Boston VA Healthcare System, Boston, Massachusetts, United States, 2. University of Missouri-St. Louis, St. Louis, Missouri, United States

Although the prevalence of depression, like many other mental health disorders, declines with age, older adults who seek behavioral health services often present with depressive symptoms mixed with cognitive complaints. This creates challenges for generalist practitioners, who are responsible for the majority of mental health care of aging individuals. Ageism and misconceptions about older adults are theorized barriers to clinicians seeking aging-specific specialty training. This completed experimental study showed that assignment to receiving foundational information about aging, including debunking common misconceptions about cognitive aging, influenced choice of continuing education (CE) preferences of generalist Licensed Professional Counselors (LPCs). Among the randomly
generated pool of LPCs (N=120), participants who received aging-specific information were more likely to choose an aging-specific CE option, F(4, 107) = 5.35, p<.001. Demographic variables, perceived competence for working with older adults, knowledge of aging, and ageist beliefs were also collected; analyses including these variables will also be presented.

MANAGEMENT OF DEPRESSION IN OLDER ADULTS RECEIVING CARE IN MEDICAL SETTINGS

Cecilia Poon, Nebraska Medicine, Omaha, Nebraska, United States

Although rates of major depressive disorder are lower among older adults, depressive symptoms are a common presentation for aging individuals in medical settings. Unique challenges arise when treating depressive symptoms co-occurring with brain health concerns in older adults with a complex medical history. This presentation reviews how cognitive behavioral interventions for later-life depression are relevant for mental health practitioners who work in primary care and general medical settings. Specific clinical and multicultural considerations will be highlighted to support clinicians and interdisciplinary teams to work effectively with older adults who have co-existing depressive symptoms and cognitive concerns.

CLINICAL TOOLS TO ADDRESS BRAIN HEALTH CONCERNS IN THE CONTEXT OF LATER-LIFE DEPRESSION

Kelly Bergstrom, University of Missouri-St. Louis, St. Louis, Missouri, United States

GSA's revised KAER Toolkit for Primary Care Teams (Fall, 2021) is an important resource, yet the complexities of depressive and cognitive symptoms in aging individuals create particular challenges for generalist behavioral health providers. Mental health practitioners and their patients can benefit from evidence-based clinical intervention materials that address the intersection of depression and brain health concerns. This presentation highlights treatment strategies and clinical tools from the new Brain Health module of the revised 2021 client workbook, Treating Later-Life Depression: A Cognitive Behavioral Therapy Approach from Oxford University Press. Examples will be presented of large print within-session “Learn pages” that inform both providers and patients about normative cognitive aging and ways in which cognitive functioning can be affected by depression. Between-session “Practice forms” will also be demonstrated that address lifestyle factors to promote brain health, consideration of whether to complete a cognitive evaluation, and strategies to manage brain health changes.

SESSION 3860 (SYMPOSIUM)

NEIGHBORHOOD CHARACTERISTICS INFLUENCE OLDER ADULTS’ HEALTH AND MENTAL HEALTH OUTCOMES

Chair: Weidi Qin Discussant: Weidi Qin

Both social and physical aspects of neighborhood characteristics are related to a wide range of health and mental health outcomes. There has been increasing evidence pointing to the link between neighborhood-level factors and health among older adults. Specifically, older adults living in disadvantaged neighborhoods with under-resourced infrastructure may experience more daily activity limitations, mental health symptoms, and increased morbidity and mortality. Positive aspects of the neighborhood, such as social cohesion, may serve as a social capital resource and protect against adverse health outcomes. On the contrary, negative aspects of the neighborhood, such as physical disorder, can be a substantial stressor leading to poor health. The neighborhood environment also disproportionally affects racial and ethnic minorities in the US. This symposium session will present four studies exploring important topics related to neighborhood factors of health among older adults. Collectively, the findings will inform neighborhood-level interventions to promote health and well-being among community-dwelling older adults. This session will start with a talk by Dr. Chan on the link between neighborhood and disability across six ethnic groups of older Asian Americans residing in New York City. Dr. Perry will present a qualitative study to explore the environmental and infrastructure challenges in the neighborhood from the perspective of older adults in Detroit. This will be followed by Dr. Jiang’s talk on the relationship between neighborhood cohesion and mortality among a sample of older Chinese in Chicago. Finally, the session will conclude with Dr. Qin’s presentation on how neighborhood characteristics affect older adults’ mental health trajectories.

ETHNIC AND NEIGHBORHOOD DIFFERENCES IN POVERTY AND DISABILITY AMONG OLDER ASIAN AMERICANS IN NEW YORK CITY

Keith Chan1, and Christina Marsack-Topolewski2, I. Hunter College, City University of New York, New York City, United States, 2. Eastern Michigan University, Ypsilanti, Michigan, United States

Asian Americans are the fastest growing and aging U.S. population, and occupy both extremes of socioeconomic and health indices. Using the 2016 NYC.gov dataset, multilevel logistic regression analyses were conducted to examine the relationship of poverty, acculturation and neighborhood-level variables with disability for different ethnic groups of Asian older adults (Chinese, South Asian, Filipino, Japanese, Korean and Vietnamese) in New York City. Findings indicated that South Asian older adults had higher odds for disability compared to other ethnic groups. Living in a neighborhood with higher percentages of persons of the same ethnicity was protective for Chinese older adults only. There is an important opportunity for interprofessional collaborations through education, awareness, screening and intervening to enhance systems of care for Asian older adults. Social workers can play a pivotal role in providing key linkages to form interprofessional solutions and shared efforts to address the needs of this understudied and under-resourced population.

UNDEREXPLORED SOLUTIONS IN DETROIT’S NEIGHBORHOODS: THE IMPORTANCE OF LEGACY TO ADDRESS ENVIRONMENTAL CONCERNS

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