GAMING TECHNOLOGY TO SUPPORT LEISURE ACTIVITIES AMONG OLDER ADULTS
Walter Boot, Florida State University, Tallahassee, Florida, United States

There has been a great deal of research on technology to support older adults in their performance of Activities and Instrumental Activities of Daily Living. There has been substantially less research, however, on exploring technology solutions that support hobbies and leisure. This is unfortunate, as quality of life and well-being are determined by more than just one’s ability to manage everyday tasks. An overview will be presented of research the Center for Research and Education on Aging and Technology Enhancement (CREATE) has conducted over two decades with the goals of understanding and supporting older adults’ performance of technology-based leisure activities. Many of these studies have involved videogaming, where there exists a substantial age-related digital divide. CREATE has evaluated older adults’ attitudes and game experiences through survey and research studies and has even recorded longitudinal gameplay. How these findings can be applied to support technology-based leisure activities will be expanded upon. Part of a symposium sponsored by Technology and Aging Interest Group.

FEASIBILITY AND ENJOYMENT OF EXERCISE VIDEO GAMES IN OLDER ADULTS
Sara Freed,1 Briana Sprague,2 and Lesley Ross,3 1. Penn State University, University Park, Pennsylvania, United States, 2. University of Pittsburgh, Pittsburgh, Pennsylvania, United States, 3. The Pennsylvania State University, University Park, Pennsylvania, United States

Interventions using exercise video games, or exergames, have shown short-term cognitive and physical benefits to older adults, though long-term effects are less promising. Enjoyment of exergames may promote exergame use after the intervention period, though little work has examined older adults’ views of exergames before and after gameplay experience. We invited 20 older adults between 65 and 84 years of age (M=73.30, SD=5.95) to play two Xbox Kinect games, Just Dance and Kinect Sports Rivals, for twenty minutes. In our presentation, we will present qualitative and quantitative findings of this pilot study, including findings that older adults reported that they were not likely to play similar exergames in the future and that they did not find the exergames to be more fun compared to other ways of exercising. We will discuss implications for game design and research relevant to game developers, manufacturers, and researchers. Part of a symposium sponsored by Technology and Aging Interest Group.

A NOVEL TOUCH-SCREEN, DUAL-LANGUAGE INTERVENTION PROGRAM FOR OLDER ADULTS
W. Quin Yow, Hui-Ching Chen, Tharshini Lokanathan, Attila Achenbach, and Lucienne Blessing, Singapore University of Technology & Design, Singapore, Singapore

Although cognitive training in healthy older adults (OA) has been controversial, specific and isolated cognitive skills such as semantic memory can be improved with appropriate designs. Semantic memory has been considered as a clinical marker for cognitive decline in dementia. The current study, as part of a larger touch-screen dual-language intervention program with cognitive training tools, aims to slow down the rate of cognitive decline in OA with dementia (OwD). A set of neuropsychological tests was conducted before and after the training program. After 24 training sessions over 8-12 weeks, OwD (11 females, 1 male, mean=85.8yo) improved significantly in their verbal working memory (Rey Auditory Verbal Learning Test; RAVLT) while performance of the cognitive-healthy OA (5 females, 3 males, mean=76.3yo) remained the same post-intervention. Our findings suggest that touch-screen technology can help OwD improve their semantic memory. The strengths and limitations of our game design and intervention will be discussed. Part of a symposium sponsored by Technology and Aging Interest Group.

GO&GROW: A SOCIAL EXERGAME TO PROMOTE WELL-BEING AMONG DEMENTIA CAREGIVERS
Xin Yao Lin,1 Herman Saksono,2 Elizabeth Stowell,2 Margie Lachman,1 Carmen Castaneda-Sceppa,2 and Andrea Parker,3 1. Brandeis University, Waltham, Massachusetts, United States, 2. Northeastern University, Boston, Massachusetts, United States, 3. Georgia Institute of Technology, Atlanta, Georgia, United States

Dementia caregivers are at risk for poor health outcomes due to high stress and little time for health-promoting behaviors. The current study examined whether Go&Grow, an exergame (digital game in which play involved real-world physical activity), could increase caregivers’ physical activity and social contact and reduce their stress. Go&Grow allows participants to grow flowers virtually as they increase their physical activity. Participants can also interact with others on Go&Grow. Go&Grow was piloted with 18 dementia caregivers (ages 22-70) over a six-week period. Multilevel modeling results showed that weeks with more Go&Grow usage were associated with more steps and more social contact. Days with more social contacts on Go&Grow were associated with more physical activity. Participants reported they were able to manage their distress better at posttest compared to the pretest. The discussion will highlight study limitations as well as implications for technology-based game and intervention design for caregiver well-being. Part of a symposium sponsored by Technology and Aging Interest Group.

SESSION 5325 (SYMPOSIUM)

AGING EXPERIENCES AROUND THE WORLD: LOCAL FINDINGS AND GLOBAL INSIGHTS FROM POPULATION SURVEYS OF AGING
Chair: Jennifer Ailshire
Discussant: Jinkook Lee

International comparisons of the aging experience offer a unique opportunity to understand how much the aging process varies according to differences in social environments. Despite the potential knowledge gained from global comparisons of health and aging, conducting cross-national comparisons can be challenging. The HRS-family of surveys, which have been harmonized within the Gateway to Global Aging, provides remarkable opportunities for cross-national comparative analysis. The papers in this session use harmonized data to compare the aging experience across different social dimensions in multiple countries from around the world, including examinations of: 1) the role of social engagement
among married couples in cognitive function in Mexico and the United States; 2) the importance of work histories and macro-economic policies on later life health in England and Europe; 3) gender differences in the receipt of informal care in the U.S., Korea, and China; 4) the association between sensory impairment and disability-free life expectancy in England and the U.S.; and 5) end-of-life care arrangements and health care utilization in the context of different health systems across multiple countries.

HEALTHCARE SYSTEMS AND VARIATION IN HEALTHCARE UTILIZATION AT THE END OF LIFE ACROSS COUNTRIES
Jennifer Ailshire,\(^1\), Cristian Herra,\(^2\) and Margarita Maria Osuna,\(^1\) 1. University of Southern California, Los Angeles, California, United States, 2. Organisation for Economic Cooperation and Development OECD, Paris, Ile-de-France, France, 3. University of Southern California Leonard Davis School of Gerontology, Los Angeles, California, United States

With rapid population ageing, providing better end-of-life care (EOLC) is becoming a source of social demand and financial pressure for public and private budgets in many countries. This paper uses data from harmonized end-of-life interviews in the HRS family of studies to assess variation in health care utilization across different income groups and how they differ across different health care systems. Hospital stay did not vary across health care systems, but nursing home stays were lower in countries with either national or statist social health insurance systems. Hospice use was low in all countries, but particularly in national and social health insurance systems. Lower income was associated with greater use of nursing homes in both the private and social health care systems. Low income was also associated with greater use of hospice in national health service, but lower use in social health service.

VISION AND HEARING IMPAIRMENTS IN RELATION TO DISABILITY-FREE LIFE EXPECTANCY IN PEOPLE FROM ENGLAND AND THE UNITED STATES
Paola Zaninotto,\(^1\) Giorgio Di Gessa,\(^2\) and Jenny Head,\(^1\) 1. University College London, London, United Kingdom, 2. University College London, London, England, United Kingdom, 3. UCL, London, England, United Kingdom

Both hearing and vision impairments are some of the most common deficits experienced by older adults. We examined the impact of self-reported vision and hearing impairments on disability-free life expectancy (DFLE). We used harmonized data from the Gateway to Global Aging Data from the US Health and Retirement Study (HRS) and the English Longitudinal Study of Ageing (ELSA). We used discrete-time multistate life table models to estimate disability-free life expectancy by sex, age and country. In both countries and at all ages either vision or hearing impairment was associated with shorter DFLE compared to those who reported no impairments. Reporting both vision and hearing impairments reduced DFLE. For example, at the age of 50, men and women with both vision and hearing impairments could expect to live up to 12 fewer years free from disability compared with men and women with no impairments, similar results were found in both countries.

ADVERSE EMPLOYMENT HISTORIES AND LATER HEALTH FUNCTIONING: EUROPEAN FINDINGS BASED ON LIFE HISTORIES FROM SHARE AND ELSA
Christian Deindl,\(^1\) and Morten Wahrendorf,\(^1\) 1. Heinrich-Heine-Universität Düsseldorf, Duesseldorf, Nordrhein-Westfalen, Germany, 2. Centre for Health and Society, Institute of Medical Sociology, Medical Faculty, University of Düsseldorf, Duesseldorf, Nordrhein-Westfalen, Germany

We investigate associations between adverse employment histories over time and health functioning in later life, and explore moderation by national labor market policies. Harmonized life history data come from two studies, SHARE and ELSA, with health beyond age 50 (men= 11,621; women= 10,999). Adverse employment histories consist of precarious, discontinued and disadvantaged careers between age 25 and 50, and we use depressive symptoms, grip strength and verbal memory as outcomes. Adverse employment histories are associated with poor health functioning later in life, especially repeated periods of unemployment, involuntary job losses, weak labor market ties and disadvantaged occupational positions. We find no variations of the associations by national labor market policies. Our study highlights the need to improve working conditions at early career stages. Despite the importance in shaping employment histories, the role of national policies in modifying the impact of employment on health is less clear.

GENDER MATTERS IN THE RECEIPT OF INFORMAL CARE IN LATER LIFE: A CROSS-NATIONAL COMPARISON ACROSS THE USA, KOREA, AND CHINA
Minyoung Kwak,\(^1\) BoRin Kim,\(^2\) hyunjoo Lee,\(^2\) and Jiaan Zhang,\(^2\) 1. Daegu University, Gyeongsan, Republic of Korea, 2. University of New Hampshire, Durham, New Hampshire, United States, 3. Fudan University, Shanghai, China

This study compares patterns of gender difference in the receipt of informal care among community-dwelling older adults across the United States, Korea, and China. Data came from the 2014 HRS, the 2014 KLoSA, and the 2015 CHARLS. Logistic regression models were used to predict the receipt of informal care by gender. We also examined how the effects of health and living arrangement on the receipt of informal care differ depending on gender. In the United States and China, older women were more likely to receive informal care than men. However, older Korean women were less likely to receive informal care than men. The effects of health and living arrangement on the use of informal care were moderated by gender in different ways across countries. Discussions include implications for practice and policy to reduce the gender gap in the receipt of informal care.

SOCIAL ENGAGEMENT AND COGNITIVE FUNCTION OF OLDER ADULTS IN MEXICO AND THE UNITED STATES
Bret Howrey, Jaqueline Avila, Brian Downer, and Rebeca Wong, 1. University of Texas Medical Branch at Galveston, Galveston, Texas, United States

Social engagement is linked to better cognition, but it is unclear if the social engagement of husbands and wives influences their own cognition as well as each other’s cognition in two