adoption and wellbeing. Despite recognizing the dynamic nature of ethnic identity development, extant research has predominantly focused on adolescence, overlooking the development and impact of ethnic identity in adulthood, when individuals’ experiences are continuously shaped by critical life events (e.g., moving to a new country). Additionally, there is a lack of longitudinal research on mid-late adulthood. Filling these gaps, this study utilized a three-wave longitudinal dataset of 595 Mexican-origin female adults (Mage.wave1 = 38.39) to examine their initial levels and trajectories of ethnic identity development (i.e., exploration, centrality, and resolution) and understand how these individuals’ initial levels and trajectories of ethnic identity are associated with their wellbeing (i.e., life meaning, resilience, and depressive symptoms) at Wave 3. Using latent growth curve modeling, unconditional models revealed that initial levels of ethnic identity in Mexican-origin female adults were moderately high, and that their centrality and resolution of ethnic identity remained stable while their exploration of heritage identity increased over time. The conditional model also showed that Mexican-origin female adults’ higher initial levels of centrality and resolution were associated with a greater sense of life meaning (and resiliency, only true for resolution levels) but not with depressive symptoms. These findings suggest that ethnic heritage is associated with more positive perception in life and may inform interventions on developing a positive ethnic identity that is related to better wellbeing.

LIMITED ENGLISH PROFICIENCY AND HEALTH LITERACY IN KOREAN OLDER ADULTS: MEDIATING EFFECT OF ACCULTURATION

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Language proficiency and comprehension in the culture and health systems of the host country are imperative factors enabling appropriate health literacy (HL) for non-English speaking immigrants. Older immigrants with limited English proficiency have fewer opportunities and limited abilities to improve their English skills. Increasing individuals’ acculturation levels can be an effective strategy for older immigrants than solely educating English language skills. The purpose of this study is to investigate the mediating effect of acculturation between English proficiency and HL in older Korean immigrants. From June to October of 2020, a total of 244 older Korean immigrants aged 50 years or older residing in the Southern US were recruited. English proficiency was categorized into limited (very limited to fair) and fluent (fluent to very fluent). HL and acculturation were measured using the Health Literacy Survey-12 Questionnaires (HLS-Q12), and the East Asian Acculturation Measure (EAAM), respectively. Covariates were gender, age, monthly income, education, and length of residency in the U.S. The statistically significant differences were shown in age, gender, education, perceived health, and length of residency in the US by the level of English proficiency. The limited English proficiency was negatively associated with HL (β = -.192, p < .002) and acculturation had a mediating effect between English proficiency and HL (β = -.133, p < .001). To alleviate the language barrier that causes low HL in older Korean immigrants, enhancing their understanding of the host country’s culture as well as improving organizational HL should be considered.

CORRELATES OF HEALTH LITERACY IN THE BLACK BELT AREAS OF ALABAMA: IMPORTANCE OF INTERNET ACCESS

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Health literacy, which is defined as being able to understand and utilize information related to one's health, is an essential part of the health care process as it is related to health outcomes. However, little is known about health literacy in Black Belt communities in Alabama although this rural area has shown very high rates of health concerns such as diabetes, cardiovascular disease, stroke, and cancer (CDC Interactive Atlas, 2022). Study participants were recruited from the Black Belt areas of Alabama. A total of 180 African-American participants with a mean age of 57.5 completed a survey. A regression analysis was conducted to understand if sociodemographic and other relevant factors would predict health literacy. Lower education, gender, age, perceived racism, and perception that race impacts health care quality predicted health literacy. Interestingly, those with less internet access had significantly lower health literacy. Access to internet and smart phones was a reported concern for over a third of the participants. Only a quarter of participants reported use of the internet to assist with lifestyle modifications while almost half reported internet use to obtain health information; suggesting this as a potential means to improve health literacy and even potential lifestyle modification in health behaviors. Recommendations are made for interventions to improve health literacy in minority populations of this underserved region.

HOW IS MENTAL HEALTH IN LATE LIFE SHAPED BY STRUCTURAL RACISM?

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Less than one percent of studies on the link between race and health have focused on structural racism. Empirical research on how structural racism affects health in later life is especially rare. Moreover, the conceptualization of structural racism in the race theory literature has often differed from the measurement strategies used in aging and health research. This study advances the field by 1) utilizing a novel, theory-informed latent measure of structural racism in states across multiple domains, including political participation, education, economics, housing, and the judicial system, 2) mapping structural racism across states, and 3) quantifying the association between structural racism and mental health outcomes (depressive symptoms and frequency of poor mental health days) among Black and White older adults. We use administrative data measuring state-level racial stratification linked to geocoded individual-level demographic and health data from the HRS (N=9,126) and the