differently. The context in which gender shapes key aspects of life contributes to self-perceptions of aging in later life.

SESSION 5750 (SYMPOSIUM)

SOCIAL PARTICIPATION, SOCIAL SUPPORT, AND SOCIAL POLICY AMONG OLDER ADULTS

Chair: Linda Waite

The social world is closely linked to other dimensions of health, including physical health and illness, physical functioning, cognition and emotional well-being, and these links may change across generations and may depend on social and policy context. The papers in this symposium focus on these links. Carr examines the associations between productive engagement in later life and perceptions of social support and interactions with friends and family. She finds that volunteer engagement is associated with greater perceived social support and interaction with friends and family but not with support from spouse. Waite, Duvoisin and Kotwal measure changes in social participation between the Silent Generation cohort, born between 1938 and 1947, and the Baby Boom cohort, born from 1948-1958. They find that the gender differences shown in the Silent Generation cohort are reduced among those born during the Baby Boom. Azar examines the moderating role of social policy, particularly defamilization, on the link between loneliness and health, using data from 30 European countries and the U.S. Choi compares marital and partnership status, social support and strain in Silent Generation vs. Baby Boom cohorts. Her results suggest that those born during the Baby Boom are embedded in looser social relationships compared to their older counterparts. Together, these papers point to the importance of considering various dimensions of social life, gender, and context, including historical time and the life cycle, in understanding how the social world acts to affect well-being.

COHORT DIFFERENCES IN SOCIAL PARTICIPATION IN THE NATIONAL SOCAL LIFE, HEALTH, AND AGING PROJECT

Linda Waite,1 Rebecca Duvoisin,2 and Ashwin Kotwal,3 1. University of Chicago, Chicago, Illinois, United States, 2. NORC at the University of Chicago, Chicago, Illinois, United States, 3. University of California, San Francisco, San Francisco, California, United States

Has American society become more socially disconnected as Robert Putnam argues in Bowling Alone? Claude Fischer disputes this contention with evidence that Americans remain about as connected to friends and family as in the past. We address this debate with data for older adults from the National Social Life, Health and Aging Study, collected in 2005, 2010, and 2015. We compare social participation as reported at ages 57 to 68 for members of the Silent Generation cohort vs. the Baby Boom cohort. We find that the gender gap in social participation evident for the Silent Generation does not exist at all for younger Baby Boomers, only appearing after age 62. These same cohort differences appear for participation in religious services and organized groups. This suggests that the gendered separation of social roles that characterized older generations is becoming less pronounced, with implications for social support and social isolation.

SESSION 5755 (SYMPOSIUM)

SOCIAL PROCESSES IN LATE-LIFE SUICIDE

Chair: Elizabeth Necka

Suicide is the tenth leading cause of death in the United States, and social isolation—either real or perceived—is one of the primary risk factors for a suicidal attempt (Calati et al., 2019). Late adulthood is characterized by both rapid increases in both social isolation (Cornwell, 2011) and loneliness (i.e., perceived social isolation; Hawkley, Wrobleski, Kaiser, Luhmann, & Schumm, 2019), which enhance risk of mental disorders (Santini et al., 2020), as well as by suicide rates that are higher than in any other age group (SAMSHA, 2017). What are the mechanisms by which social isolation confers risk (and social connection confers resilience) to suicidal thoughts and behaviors in aging, and what promising interventions exist for addressing social impediments in older adulthood? What barriers exist to providing services to socially isolated older adults contemplating suicide, and what are the public health implications of social isolation and suicide in late life? This symposium will feature talks on the role of social motivation and empathy in the development of (or resilience to) suicidal ideation in older adults, on interventions that draw upon the Interpersonal Theory of Suicide and utilize social engagement and digital ‘mHealth’ services to reduce late-life social isolation, depression, and suicidal ideation, and on National Institute of Mental Health funding priorities and efforts to address suicide. After attending this session, participants will be able to articulate mechanisms by which social isolation confers risk for suicide in older adulthood and to identify opportunities and obstacles for effective intervention implementation.

THE NATIONAL INSTITUTE OF MENTAL HEALTH: RESEARCH AGENDA AND PRIORITIES IN GERIATRICS AND AGING

Elizabeth Necka, National Institute of Mental Health, Rockville, Maryland, United States

The Geriatrics and Aging Processes Research Branch of the National Institute of Mental Health (NIMH) supports research on the etiology, pathophysiology, and trajectory of late life mental disorders. The branch encourages research using neuroscience, cognitive and affective science, and social and behavioral science to translate basic and preclinical research to clinical research. The branch prioritizes research that investigates neuropsychiatric disorders of aging, how they interact with neurodevelopment/neurodegeneration, and how to assess, treat, and prevent them. Of particular interest is research on social isolation and suicide. Suicide prevention research is an urgent priority: NIMH's portfolio includes projects aimed at identifying those at risk for suicide, understanding causes of suicide risk, developing suicide prevention interventions, and testing the effectiveness of these interventions and services in real-world settings. In this talk, a NIMH program official will discuss the NIMH research agenda in the domain of late-life mental illness, social isolation, and suicide.

SOCIAL DECISION MAKING AND SUICIDAL BEHAVIOR IN LATE-LIFE DEPRESSION
Katalin Szanto, University of Pittsburgh, Pittsburgh, Pennsylvania, United States

Social motivations to engage in suicide in late life frequently include interpersonal problems and escape from perceived defeat. To describe decision making patterns that may contribute to the catastrophic decision to take one’s life, we used behavioral experiments and assessed cognitive abilities and personality traits. We found that neuroticism, low extraversion, and low conscientiousness characterize older adults who contemplate suicide and those with low-lethality suicide attempts. Employing a novel version of the Ultimatum Game, we measured empathy’s moderating response to social conflict. We found that older suicide attempters were less influenced by empathy scenarios, indicating that a failure to integrate others’ emotions into decisions may undermine social deterrents to suicide. To simulate social status loss, we used a newly developed, competitive task (rigged toward primarily losing outcomes) paired with performance ranking. We found that suicide attempters, especially those with narcissistic traits, engaged in more excessive compensatory behaviors than older non-attempters.

NEUROBIOLOGY INFORMED, MOBILE TECHNOLOGY AUGMENTED INTERVENTIONS FOR LATE-LIFE DEPRESSION AND SUICIDALITY
George Alexopoulos, Weill Medical College of Cornell University, White Plains, New York, United States

Depression is a major risk factor of suicide in late life. Evidence based psychotherapies for late-life depression are underutilized, mainly because of their complexity. In response, we created “Engage”, an innovative streamlined psychotherapy that relies on neurobiology findings to identify core behavioral pathology of late-life depression and targets it with simple cognitive-behavioral strategies of known efficacy, co-designed with community therapists so that its interventions can be mastered by community based clinicians. We demonstrated that “Engage” is non-inferior to the evidence based Problem Solving Therapy and documented that behavioral activation precedes improvement of depression. We have also shown that activities with important others have reliably influenced outcomes paired with performance ranking. We found that suicide attempters, especially those with narcissistic traits, engaged in more excessive compensatory behaviors than older non-attempters.

THE HOPE PROJECT (HELPING OLDER PEOPLE ENGAGE): RELEVANCE TO UPSTREAM SUICIDE PREVENTION
Kim Van Orden, Yeates Conwell, Ben Chapman, Geoff Williams, Silvia Sörensen, and Jody Rowe, University of Rochester School of Medicine and Dentistry, Rochester, New York, United States, 2. University of Rochester, Rochester, New York, United States, 3. URMC, Rochester, New York, United States, 4. Lifespan of the Greater Rochester Area, Rochester, New York, United States

The HOPE Project is an ongoing RCT testing whether Senior Corps volunteering for lonely older adults (age 60+) leads to reduced loneliness and improved quality of life—outcomes associated with suicide in later life. We have randomly assigned 130 participants to 12-months of volunteering or active control. We will describe the trial as well as baseline characteristics of participants that may predict non-compliance with volunteering/control. We found no difference between conditions nor demographic characteristics (age, gender) on non-compliance. Participants demonstrated wide variability in depression at baseline (PROMIS t-score range 38.9 to 71.4) and 18% reported suicide ideation; neither were associated with compliance (p>-.20). These preliminary findings indicate that those with more severe mental health symptoms were equally willing/able to engage in volunteering as those without depression and suicide ideation. Volunteering is a highly scal-able intervention (given nationwide Senior Corps infrastructure) that may function as upstream suicide prevention.

SESSION 5760 (SYMPOSIUM)

SOUNDS OF HEALTHY AGING: ASSESSING EVERYDAY COGNITIVE ACTIVITY FROM REAL-LIFE AUDIO DATA
Chair: Burcu Demiray
Co-Chair: Minxia Luo
Discussant: Matthew Grilli

The healthy aging model of the World Health Organization (2015) highlights the value of assessing and monitoring everyday activities in understanding health in old age. This symposium includes four studies that used the Electronically Activated Recorder (EAR), a portable recording device that periodically collects sound snippets in everyday life, to assess various real-life cognitive activities in the context of healthy aging. The four studies collected over 100,000 sound snippets (30-seconds long) over a few days from young and older adults in the US and Switzerland. Participants’ speech in the sound snippets were transcribed and coded for different cognitive activity information. Specifically, Haas and Kliegel have investigated the “prospective memory paradox” by examining the commonality and differences in utterances about retrospective and prospective memory failure in young and older adults’ everyday conversations. Demiray and colleagues investigated the relation between autobiographical memory functions and conversation types in young and older adults in relation to well-being. Luo and colleagues have identified the compensatory function of real-world contexts in cognitive aging: Their study showed that older adults benefited from talking with their spouse in producing complex grammatical structures. Finally, Poliselli and colleagues found robust associations between language markers (e.g., prepositions, more numbers) and executive functions, highlighting the potential use of spontaneous speech in predicting cognitive status in healthy older adults. Finally, Prof. Matthew Grilli will serve as a discussant and provide an integrative discussion of the papers, informed by his extensive work on clinical and cognitive neuroscience of memory in relation to real-life contexts.

FUNCTIONS OF REAL-LIFE CONVERSATIONAL TIME TRAVEL IN THE CONTEXT OF HEALTHY AGING
Burcu Demiray, Minxia Luo, and Mike Martin, University of Zurich, Zurich, Zurich, Switzerland

Using smartphone sensing in real life, we examined conversational time travel (i.e., talking about the personal past versus future), its functions and relation with positive affect (i.e., laughing