The bereavement literature in adulthood has largely focused on spousal loss. Yet the death of a parent is an influential – and expected – loss experience in middle and later life. This study analyzed prospective data from two waves of the Family Exchanges Study (2008 and 2013) to explore adults’ (N = 192; Mage = 56.76) experience of a recent parent death in the past 5 years, including grief responses and positive memories of the deceased parent. We examined how pre-loss relationships with the deceased parent (e.g., positive and negative relationship quality, relationship importance) are associated with different bereavement responses among the bereaved children. Findings showed that the levels of grief were higher for children who placed more importance on the parent prior to that parent’s death. Positive relationship quality was associated with positive memories after a parent’s death. However, negative relationship quality was not associated with any bereavement responses.

DEATH OF A GRANDPARENT IN ADULTHOOD: GENDER, GRIEF, AND THE ROLE OF MIDDLE-GENERATION PARENTS

Jeffrey E. Stokes, Kyungmin Kim, and Karen L. Fingerman

Although the death of a grandparent in adulthood is often an expected or “on-time” life event, this loss may still result in grief for adult grandchildren. Structural aspects of relationships, including gender of the grandparent, adult grandchild, and/or middle-generation parent, may affect the response such a loss elicits from adult grandchildren. Further, adult grandchildren’s relationship quality and/or coresidence with middle-generation parents may also impact the effect of grandparent loss on adult grandchildren’s grief. Using data from Wave 2 of the Family Exchanges Study (2013), we found that (a) grandsons report less grief than granddaughters, irrespective of grandparents’ or middle-generation parents’ gender; (b) relationship quality with and worry about middle-generation parents matter most for granddaughters and those who lost a maternal grandparent; and (c) worry about middle-generation parents matters most for bereaved grandchildren who coreside with middle-generation parents. Results highlight the intersection of gender and relationship quality in a multigenerational context.

SESSION 3155 (SYMPOSIUM)

BEYOND REPRODUCTION: EXPLORING DETERMINANTS OF FUNCTIONAL HEALTH AND WELL-BEING IN AGING WOMEN

Chair: Cassandra M. Germain

The goal of this symposium is to explore the various factors that influence functional health and general well-being in women during late life. We will explore 1) the role of depression on functional impairment in a group of diverse community dwelling women; 2) the relationship between chronic pain and depression, as well as strategies for intervention; 3) the desire for sexual intimacy among older women and its relationship to wellbeing and 4) the importance of physical appearance in older women and its association with self-confidence and wellbeing.

ETHNICITY, DEPRESSION, AND FUNCTIONAL OUTCOMES IN OLDER WOMEN

Cassandra M. Germain, North Carolina A&T State University, Greensboro, North Carolina, United States

Women continue to have higher prevalence rates of functional impairment and depressive symptoms than men. In addition, women from certain ethnic groups experience disproportionately higher rates of ADL limitation, and are less likely to be screened for depression. The current study examines the association between race/ethnicity and depressive symptoms on functional limitations in Black, White and Hispanic women. We examined prevalence and adjusted odds of ADL limitations by race in n=9,846 women aged 50+ with low (CESD <4) and high (CESD =>4) depressive symptoms from the 2014 wave of the Health and Retirement Study. Overall, Black and Hispanic women had significantly higher rates of depression (p <.001) and ADL limitations (p<.001) than White women. Among those with high depressive symptoms, Black OR 1.98 [1.17, 3.34] and Hispanic OR 2.82 [1.42, 5.6] women have significantly higher rates of ADL limitations as compared to White women.

AGING APPEARANCE AND ITS SIGNIFICANCE TO WELL-BEING

Naomi Woodspring, University of the West of England, Bristol, United Kingdom

Ageing is a profoundly embodied process, yet elder’s concerns about appearance are perceived, by many, as trivial. Notions of appearance as a core human concern continues as a significant aspect throughout our lives. Self-presentation choices convey a sense of our identity. This paper is based on a qualitative study which aimed to explore current notions of beauty and age. A diverse group of postwar women (born between 1945 -1955) from the US and the UK were interviewed with a focus on their own self-presentation and the acts of seeing and being seen. This paper explores some of the findings from this study. The majority of women, and the all women of colour, reported feeling more confident in their appearance and appreciative of other older women’s appearance. This led to a more robust sense of well-being and suggests that age and appearance may be significantly linked to well-being.

INTIMACY IN LATER LIFE: A POTENTIAL PATHWAY FOR IMPROVING WELL-BEING IN OLDER WOMEN

Renee J. Flores, UT Houston McGovern Medical School, Houston, Texas, United States

Despite benefits to overall health and well-being, healthcare professionals’ knowledge and research is limited in regards to older women’s sexuality and intimacy desires. There are barriers that impede fulfilling these desires and lack of understanding hinders ways to address this issue, which negatively affects the well-being of older women. A sexuality and intimacy survey of 29 women between the ages of 60-86 revealed that the majority were having sex at least once a month and expressed the desire to increase the frequency of sexual encounters. These data suggests that later-life sexuality and intimacy encounters are important for improving well-being.
BELIEFS SURROUNDING THE PAIN AND DEPRESSION CYCLE AMONG OLDER AFRICAN AMERICAN WOMEN: FINDINGS FROM FOCUS GROUPS

Emerald Rivers,1 Brittany Drazich,1 Sarah Szanton,1
Manka Nkimbeng,1 and Janiece Taylor1, 1. Johns Hopkins University, Baltimore, Maryland, United States

Older African American women experience high rates of comorbid conditions and functional limitations that put them at risk of experiencing a cycle of pain and depressive symptoms. This cycle is often shaped by individual's behaviors, emotions, physical responses, and thoughts. Increased pain severity is associated with comorbid pain and depression making it essential for older African American women to communicate their experiences with these conditions. Hence, we explored older adult African American women's relevant beliefs, and identified strategies to address them in adapting the intervention, Get Busy Get Better. In three focus groups, we found that older African American women (mean age 60.7, n=11): (1) relied on companionship (emotions), (2) used physical activity strategies for pain and depression relief (behaviors), (3) had a general function reduction from pain (physical response), and (4) saw connections between depression and pain (thoughts). Thus, when adapting the intervention, strategies incorporate these four elements.

SESSION 3160 (SYMPOSIUM)

DISPARITIES OF DENTAL CARE AND CONSEQUENCE OF POOR ORAL HEALTH AMONG OLDER ADULTS IN THE U.S.

Chair: Yanyan Wu, University of Hawai‘i at Mānoa, Honolulu, Hawaii, United States
Co-Chair: Wei Zhang, University of Hawai‘i at Mānoa, Honolulu, Hawaii, United States
Discussant: Bei Wu, New York University, New York, New York, United States

Oral health is an essential part of staying healthy. Neglect of dental care may lead to tooth decay/loss, poor nutrition, and affects individuals’ quality of life. Over the past decades, dental care utilization has risen considerably, however, racial/ethnic and socioeconomic disparities still persist in the U.S. Additionally, poor oral health is a contributing factor to, and a consequence of chronic diseases such as cognitive impairment, diabetes and cardiovascular disease. Faced with the complex and intertwined health and social challenges, it’s imperative to understand the disparities of dental care utilization and the relationships among oral health and chronic diseases so that effective policies and preventive strategies can be implemented to improve quality of care. In this symposium, we present findings for older adults from diverse racial/ethnic populations in the U.S. We begin with results from two national-wide trend analyses: a 15-year review of dental care utilization and the evaluation of dental care performance over a 16-year period in nursing homes. The next study presents the barriers of dental care utilization in Hawaii. Finally, we present results of the negative effects of diabetes and poor oral health on cognitive function. Our studies address the disparities of dental care utilization among minority and under-represented ethnic groups as well as the connections between oral health and chronic conditions. Our results are helpful in educating policy makers and health practitioners about how to improve dental care and how dental care can be effectively integrated into chronic disease prevention and health promotion activities.

DISPARITIES OF DENTAL CARE UTILIZATION AMONG WHITE, BLACK, HISPANIC, AND ASIAN FROM 2002 TO 2016

Yanyan Wu,1 Wei Zhang,1 and Bei Wu2, 1. University of Hawaii at Mānoa, Honolulu, Hawaii, United States, 2. New York University, New York, New York, United States

Utilizing eight waves (2002-2016) of data from the Behavioral Risk Factor Surveillance System (BRFSS), this study examines the disparities and trend of dental care utilization among dentate adults aged 50 years or older in the U.S. Findings reveal that there was a significant increase of dental care utilization among Asians and Blacks in older adults. The rates increased from 73% (95%CI: 69%-78%) to 81% (95%CI: 79%-84%) and 54% (95%CI: 52%-56%) to 60% (95%CI: 61%-62%) for Asians and Blacks respectively in the 75-79 age-group. Early in 2002, there was a linear decreasing pattern of dental care utilization with age. However, the 65-69 age-group became a turning point in 2018 with a lower rate of dental care utilization before 65-69 years of age and higher rate in the older age groups. Overall, Hispanics and Blacks had much lower rates of dental care utilization than that of Whites and Asians.

THE QUALITY OF DENTAL CARE IN NURSING HOMES: VARIATION BY FACILITY AND MARKET CHARACTERISTICS

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Nursing home (NH) residents are disproportionately affected by poor oral health. But little we known about the root causes. We analyzed the 2000-2016 national inspection survey data for all certified-NHs (n=248,975 facility-years). Dental care performance was measured by two designated deficiency citations. Generalized estimating equation models were used to predict if the NH facility and market characteristics were associated with low performance. The rates of deficiency citation tripled from 1.2% in 2000 to 3.4% in 2016 (p<0.001) with substantial variation across states. NHs with more minority residents and poorer resources (higher share of Medicaid and lack of registered nurse), and NHs with high competing priorities (larger, for profit, chain-affiliated and urban locations) were more likely to receive deficiency citations. Residents in these facilities are at greater risks of poor oral health. This presentation will provide discussion on relevant policy and practice to improve dental care quality in nursing homes.