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, 1.
Hunter College, City University of New York, New York, 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
Tam Perry1, Evan Villeneuve2, Brenda Butler1, Fatima Hazimeh3, and Ventra Asana1, 1.
Wayne State University, Detroit, Michigan, United States, 2.
ClearCORPS Detroit, Detroit, Michigan, United States, 3.
Detroit’s Eastside Community Network/Marklowe Stoudamire Wellness Hub, Detroit, Michigan, United States, 4.
Wayne State University, Dearborn, Michigan, United States, 5.
Independent Scholar, Detroit, Michigan, United States