technology, and social support facilitates the adoption of technology. The fourth study reported the benefits of using a technology-based body-mind intervention to alter a mismatch between fear of falling and actual fall risk and to increase the accessibility of the fall intervention. The final study indicated that utilizing an alternative online exercise program during the pandemic increased exercise regularity and enhanced motivation. Together, all five studies contribute to strategic implications on global mitigating long-term health consequences and essential issues for further research.

A TECHNOLOGY-BASED BODY-MIND INTERVENTION FOR LOW-INCOME AMERICAN OLDER ADULTS.
Ladda Thiamwong1, Rui Xie2, Joon-Hyuk Park2, Nichole Lighthall2, Victoria Loerzel2, and Jeffrey Stout2, 1. University of Central Florida, Orlando, Florida, United States, 2. College of Nursing, University of Central Florida, Orlando, Florida, United States

Research is limited on the use of technology to help individuals who have a mismatch between physiological fall risk (Body) and perceived fall risk (Mind) and are unable to access traditional fall interventions. We examined the feasibility and acceptability of a technology-based body-mind intervention in low-income older adults during the COVID-19 pandemic and explored barriers to access and adopting the technology. Data were collected using a survey, balance test, accelerometer-based physical activity (PA), and semi-structured interviews with twenty participants who engaged in an 8-week intervention at a low-income setting in Florida. We found that: 1) the technology-based intervention is feasible, 2) participants tend to accept technology to alter their perceptions of fall risk and balance capacity, 3) tailored activities to each component are not a one-size-fits-all approach. There were no statistically significant changes in sedentary time, light PA, and moderate to vigorous PA between pre and post-intervention.

A MULTISITE INVESTIGATION OF FACTORS INFLUENCING QUALITY OF LIFE IN THAI OLD ADULTS DURING THE COVID-19 PANDEMIC
Inthira Roopsawang1, suparb Aree-Ue1, Teepatat Chintapanyakun2, Yuwadee Saraboon2, and Sirirat Intharakasem2, 1. Mahidol University, Bangkok, Krung Thep, Thailand, 2. Department of Nursing, Bangkok, Krung Thep, Thailand, 3. Mahidol University Amnatcharoen Campus, Amnatcharoen, Amnat Charoen, Thailand

Coronavirus-19 outbreak situation is a significant problem affecting the older population globally. The aim of this study was to investigate the association among physical activity, physical frailty, social frailty, life-space mobility, and depressive symptoms on quality of life in Thai older persons with non-communicable diseases prior to the COVID-19 pandemic. A path analysis was used for data analysis with the Mplus program. A total of 2,000 participants aged range 60 – 89 years with a mean age of 65.13 years (SD = 4.62 years) participated in the study. Path analysis indicated that physical frailty was the strongest direct power on quality of life followed by depressive symptoms, and life-space mobility, respectively at the time of COVID-19’s first outbreak. Monitoring and managing changes in physical frailty, depressive symptoms, and life-space mobility are suggested to promote active aging and maintain a good quality of life in this population, specifically age-friendly living areas.

COVID-19 AND THE FEAR OF FALLING AMONG OLDER ADULTS IN SINGAPORE: AN ELECTRONIC SURVEY
Wayne Chong1, Tharshini Lokanathan2, and W. Quin Yow2, 1. Nanyang Technological University, Singapore, Singapore, Singapore, 2. Singapore University of Technology & Design, Singapore, Singapore

We investigated the predictors of fear of falling in Singapore during the COVID-19 pandemic. Older adults aged 60 to 85 (N=144) participated in an electronic survey that assessed their attitudes toward technology, perceived severity and fear of COVID, frailty, social engagement and falls risk. Hierarchical linear regressions revealed that the fear of falling was first predicted by falls risk, beta = .26, p = .001, F(1, 142) = 10.50, then by resistance, beta = .18, p = .03, F(2, 141) = 7.96. When COVID-19 fear, beta = .14, p < .001, and health conditions, beta = -.22, p = .005, were added together, falls risk became non-significant, beta = .14, p = .083, F(4, 139) = 10.50. The interaction between COVID-19 fear and health conditions was found to add significant variance in the final model, beta = -.31, p < .001, R square = .37, R square change = .09.

HOW HAS COVID-19 SHAPED SINGAPORE OLDER ADULTS’ ATTITUDES TOWARD TECHNOLOGY?
W. Quin Yow1, Tharshini Lokanathan2, and Wayne Chong2, 1. Singapore University of Technology & Design, Singapore, Singapore, 2. Nanyang Technological University, Singapore, Singapore, Singapore

This study investigated Singapore older adults’ attitudes toward technology during the COVID-19 pandemic when in-person socializations have been negatively impacted. One hundred and forty-four older adults (range = 60-85 years old) participated in a large-scale survey that included questions such as their attitudes toward technology, severity and fear of COVID, as well as frequency of social support and contact with relatives and friends. Results revealed that the more severe the COVID situation in their area was, the more they believe that technology is useful and could enhance their effectiveness, and the more they like the idea of using technology in their daily activities, Fs>6.60, Bs>1.71, ps<.01. Furthermore, social support could facilitate the adoption of technology in older adults, F=6.31, B=.89, p=.013. Paradoxically, the fear of COVID could collaterally increase the hesitation of using technology in older adults for fear of making mistakes they cannot correct, F=8.50, B=1.30, p=.004.

ONLINE EXERCISE CLASS EXPERIENCE AMONG OLDER ADULTS’ MEMBERS OF COMMUNITY CENTERS IN HONG KONG DURING COVID-19
Janet Lok Chun Lee1, Vivian Wei Qun Lou1, and Rick Kwan1, 1. The Hong Kong Polytechnic University, Hong Kong, Hong Kong, 2. The University of Hong Kong, Hong Kong, Hong Kong, Hong Kong, 3. Tungh Wab College, Hong Kong, Hong Kong

Due to the social distancing measures, community-centres in Hong Kong has been converting exercise classes to online
delivery mode through video-conferencing software since the outbreak of COVID-19. The phenomenon is new, and no research has been done to investigate older adults’ experience on it. This study adopted a descriptive qualitative methodologically to understand the phenomenon. Twenty-three older adults (aged 55-89 years), with experience of participating online exercise class since COVID-19 participated in the study. Six major themes regarding their experiences emerged. Regarding positive experiences, older adults experienced convenience, increased exercise regularity, technical transformation and motivation in this new form of home-based exercise. At the same time, they experienced specific technical barriers and compensated supervision quality from the instructor. The findings of the study gave important future research direction and implications to the development of smart aging in community centres in Hong Kong.

SESSION 3850 (SYMPOSIUM)

MULTIDISCIPLINARY PERSPECTIVES ON LATER-LIFE DEPRESSION: THE ROLE OF BRAIN HEALTH
Chair: Ann Steffen Discussant: Jennifer Moye

Bi-directional associations between depression and cognitive functioning are magnified among aging individuals, challenging behavioral health providers who treat older adults experiencing clinical and subsyndromal depression. This symposium contributes to the science and practice of assessing and treating later-life depression while also attending to issues in professional training. The first paper presents pre-treatment data from the multi-site Optimum Study of older adults experiencing treatment-resistant depression (n = 529). The relevance of positive psychological constructs is supported with analyses showing important relationships among cognitive functioning, social participation, and psychological well-being. The second paper describes the development of an updated measure to assess behavioral health providers’ knowledge of later life depression, including brain health concerns. Psychometric data for the measure were generated from a random pool of licensed social workers (N=900) who were mailed the survey packet. The third presentation features an experimental study demonstrating that foundational information about aging, including debunking misconceptions about cognitive aging, influenced continuing education preferences of generalist Licensed Professional Counselors (LPCs). Among the randomly generated pool of LPCs (N = 120), participants who received aging-specific information were more likely to later choose an aging-specific continuing education option. The fourth paper highlights recommendations for mental health practitioners working in primary care and general medical settings with older adults who have co-existing depressive symptoms and cognitive concerns. The fifth and final presentation describes cognitive behavioral clinical tools to address brain health concerns in the context of later-life depression, using the new Brain Health module of a published client workbook.

PSYCHOLOGICAL WELL-BEING IN OLDER ADULTS WITH TREATMENT-RESISTANT DEPRESSION
Selmi Kallmi1, Ann Steffen1, and Eric Lenze2, 1. University of Missouri-St. Louis, St. Louis, Missouri, United States, 2. Washington University School of Medicine in St. Louis, St. Louis, Missouri, United States

Geriatric psychiatry research has documented the importance of psychological well-being to older adults diagnosed with depression (Lenze et al., 2016). This presentation utilizes pre-treatment data from the Optimum Study of treatment-resistant depression in older adults recruited from five USA and Canadian metropolitan areas (N = 529). Social participation was measured with the PROMIS scale: Ability to Participate in Social Roles and Activities (Hahn et al., 2014). Positive affect and life satisfaction were assessed using scales from the Psychological Well-Being subdomain (Salsman et al., 2013) of the NIH Toolbox for Assessment of Neurological and Behavioral Function - Emotion Battery (NIHTB-EB). Along with associations between social participation and positive affect (r = .38, p < .01) and between social participation and life satisfaction (r = .26, p < .01), path analyses explored social participation as a mediator of the relationship between cognitive functioning (NIHTB-CB; Weintraub et al., 2013) and psychological well-being.

MEASURING PROFESSIONAL KNOWLEDGE OF LATER LIFE DEPRESSION
Abby Laine, and Ann Steffen, University of Missouri-St. Louis, St. Louis, Missouri, United States

Research linking behavioral health providers’ knowledge of later life depression to their clinical practices and patient outcomes is restricted by outdated measures. A multi-stage study was conducted to ameliorate this gap. Qualitative interviews with geropsychology content experts (N = 5) generated 49 true/false items capturing relevant concepts in later life depression, including brain health concerns. Additional content experts (N = 10) completed the questionnaire and a card sort task placing items into categories (Psychopathology, Assessment/Diagnosis, Treatment, Other) to understand measurement structure. This resulted in retention of 42 items. A random pool of licensed social workers (N=900) were mailed the survey packet with option to complete via return mail or online. This presentation will review scale psychometrics, reliability, and construct validity among MSWs from diverse clinical backgrounds. Associations between participant characteristics and knowledge of cognitive and other depressive symptoms will also be highlighted.

SHAPING PREFERENCES FOR AGING-SPECIFIC CONTINUING EDUCATION BY LICENSED PROFESSIONAL COUNSELORS
Nicholas Schmidt1, and Ann Steffen2, 1. Boston VA Healthcare System, Boston, Massachusetts, United States, 2. University of Missouri-St. Louis, St. Louis, Missouri, United States

Although the prevalence of depression, like many other mental health disorders, declines with age, older adults who seek behavioral health services often present with depressive symptoms mixed with cognitive complaints. This creates challenges for generalist practitioners, who are responsible for the majority of mental health care of aging individuals. Ageism and misconceptions about older adults are theorized barriers to clinicians seeking aging-specific specialty training. This completed experimental study showed that assignment to receiving foundational information about aging, including debunking common misconceptions about cognitive aging, influenced choice of continuing education (CE) preferences of generalist Licensed Professional Counselors (LPCs). Among the randomly