teaching, research, and service in a way that embraces, enhances, and extends the field of gerontology.

THROUGH THE GERONTOLOGICAL LOOKING GLASS: PERSPECTIVES FROM LATER LIFE
Edward Ansello, Virginia Commonwealth University, Richmond, Virginia, United States

Do dominant gerontological research and education models help us understand our own aging? “(These) seemingly made no impact on my expectations for my own late life” (Cohen, 2017). The gerontological looking glass tends to favor research and teaching that identify large patterns, populations, and research cell sizes of “sufficient” numbers to produce data about external, descriptive assessments; and are compliant with nomothetic ideology: general, universal, and consistent. Even qualitative data rely on numbers of respondents to identify themes. In contrast, idiographic ideology emphasizes the individual and unique. While not meant to yield general findings, neither does it produce the incompleteness of descriptive statistical approaches, i.e., trying to capture the external persona. As human aging is both inherently universal and profoundly individual, one is likely to appreciate idiographic gerontology with awareness of one’s own aging. Various complementary perspectives—including humanistic gerontology, positive and conscious aging, and the curriculum palette—are relevant.

THE SELF AS SUBJECT AND OBJECT: REFLECTIONS ON BEING A DOUBLE AGENT OF AGING
Phillip Clark, University of Rhode Island, Kingston, Rhode Island, United States

Being both a gerontologist and an older adult places one in a double narrative: one is the scientific story and academic life of research and education, the other is the personal experience of living through this phase of life. These two narratives become intertwined in a way that both enriches and poses challenges. This paper explores what being a “double agent of aging” means as an individual and a scholar, and offers some insights for the field of gerontology. These implications include: (1) the growing importance of values and life wisdom, (2) health behavior hypocrisy, and (3) the experience of ageing and marginalization. The implications for the field of gerontology include: (1) valuing the voices of older adults in our research and teaching, (2) being more active in confronting ageism in our own institutions, and (3) acknowledging the limitations of studying aging as a younger adult.

SCIENCE AND SELF: AGING AS WOVEN
Helen Kivnick, University of Minnesota, St. Paul, Minnesota, United States

Gerontology is a field both scientific and practice-based. Aging, the subject of this field, is an experience in which all human beings participate. But scientific pillars of objectivity, quantifiability, control, and external validity have long mitigated against gerontological scholars effectively moving back and forth between professional scholarship and practice, on the one hand, and personal experience, on the other. Qualitative research approaches, informed by the humanities and arts, utilize alternative ways of knowing that, when added to positivistic science, enable us to construct a body of gerontological knowledge that is robust and useful, and that also incorporates wisdom. Aging, wisdom, and integrity—these all matter. Although often mischaracterized, Erikson’s theory of healthy psychosocial development throughout the life-cycle (Erikson, Erikson, & Kivnick, 1986) weaves these constructs together in ways that can meaningfully inform professional and personal experiences of gerontology. This presentation illustrates one aging gerontologist’s engagement with such weaving.

ARCS AND STAGES: RETROSPECTIVELY CONCEPTUALIZING A GERONTOLOGICAL CAREER
Kenneth Hepburn, Emory University, Atlanta, Georgia, United States

The arc of a gerontologist’s career is that of a “work in progress,” work unlikely to be completed. Early efforts might develop interdisciplinary collaborations and establish the principles and mechanisms of a central line of work and inquiry. Mid-stage work may entail expansion and adaptation of preliminary efforts and identification of exciting areas of exploration that both fit within the gerontologist’s overall thematic trajectory and extend beyond the reasonable scope of pursuit. In late stage, the most pressing concern is to sustain, but not constrain, the work’s trajectory. This may best be accomplished by identifying and supporting students and early career researchers who are passionate about the work and who are likely to move it forward and expand it in their own unique and divergent ways. Emeriti gerontologists may seek to remain generatively engaged in ways that both contribute to and let go of the continuing arc of the work.

SESSION 6025 (SYMPOSIUM)

AGE MATTERS: THE IMPACT OF AGEISM ON HEALTH, COGNITIVE IMPAIRMENT, WORK LIVES, AND ANTI-AGEIST INTERVENTIONS
Chair: Philip Rozario
Discussant: Nancy Morrow-Howell

Age is a social constructions. The treatment of people on the basis of their age, imposes serious psycho-emotional, social and economic costs on society and older people. The experiences of ageism may be exacerbated when other forms of acute and chronic forms of oppression are experienced due to racism, sexism, etc. The first paper looks at the impact of ageism on older people’s health. Their systematic review of studies showed that ageism detrimentally and consistently impacted older individuals in 11 health domains, with the prevalence of significant findings increasing over time. Informed by NIA’s Health Disparities Framework, the second paper examines the relationships between discrimination and protective factors on cognitive functioning. Their analyses of the Health and Retirement Survey data reveal, among other things, that everyday experiences of ageism significantly worsen older adults cognitive functioning. Using survey data of adults throughout the life-span, our third presenter examines how multiple identities (such as age and gender) influence employees’ perspectives on workplace fairness in hypothetical situations. The findings are informative to human resource departments in ensuring workplace fairness within the context of a multigenerational workforce. The final paper examines two efforts to disrupt
ageism, specifically interventions that target students in an intergenerational program and staff members of senior living communities. Results from these evaluations point to an increase in positive attitudes among students and a reduction in ageist behaviors among staff members. All presenters will discuss policy, practice and research implications of their studies.

AGEISM AND ITS IMPACT ON OLDER PERSONS' HEALTH
Becca Levy, Yale School of Public Health, Woodbridge, Connecticut, United States

Ageism has been called a silent epidemic. The extent to which ageism impacts the health of older persons in different countries was not well understood. In this presentation we will focus on the reach of ageism including negative age beliefs, on older individuals’ health. In an exhaustive systematic review, we found that ageism influenced older individuals in 45 countries and 11 health domains, with the prevalence of significant findings increasing over time (p < .001). In this presentation, we will also explore the mechanism by which this impact occurs and steps that can be taken to address this epidemic.

DISCRIMINATION AND PROTECTIVE FACTORS TO COGNITIVE HEALTH: TESTING NIA’S HEALTH DISPARITIES FRAMEWORK
Ernest Gonzales,1 Cliff Whetung,2 Jane Lee,3 and Yi Wang,4 1. New York University, New York, New York, United States, 2. New York University, New York, New York, United States, 3. University of Hawai‘i, Myron B. Thompson School of Social Work, Honolulu, Hawaii, United States, 4. University of Iowa, Iowa City, Iowa, United States

Cognitive impairment is a worldwide epidemic. Informed by NIA’s Health Disparities Framework, this study investigated interpersonal, behavioral, and sociocultural risk and protective factors associated with cognitive health trajectories. Mixed models examined factors associated with cognitive health with data from the Health and Retirement Study among Whites, Blacks, and Hispanics (2008-2014, N=4,511). A majority of respondents who experienced everyday discrimination attributed it to ageism among this racially and ethnically diverse sample. Stratified mixed models of everyday discrimination by attribution (racism or ageism) revealed worse cognitive functioning. Major lifetime discrimination was not statistically associated with cognitive functioning. Economic factors (education, income, assets) and religious activity protected cognitive functioning and were particularly salient for Blacks and Hispanics. Strategies that bolster individual resilience as well as social policies that address discrimination and structural inequities will likely reduce health disparities and improve population health.

PERCEPTIONS OF WORKPLACE FAIRNESS IN THE CONTEXT OF AGE AND INTERSECTIONALITY
Cal Halvorsen,1 Marcie Pitt-Catsouphes,2 and Indrani Saran,2 1. Boston College, Chestnut Hill, Massachusetts, United States, 2. Boston College School of Social Work, Chestnut Hill, Massachusetts, United States

While scholars have focused on workplace fairness (often called organizational justice) for quite some time, the context of diversity—in its many forms—has rarely been included in this conversation. This presentation will review concepts related to workplace fairness, describing how the context of diversity may influence perceptions of it. We then will present the results of a recent survey of 609 respondents aged 18 to 70 with a focus on how holding diverse attributes (e.g., age, gender, and their intersectionality) may shape perceptions of workplace fairness and diversity. Overall, we found that the perceptions of workplace fairness and diversity are similar by age and gender, with a few notable differences (e.g., older respondents value interpersonal justice the most, such as their opinions being considered, and younger respondents see workplace diversity the most positively). These results can inform scholarship and discussions on human resource practices and environmental change in organizations.

APPROACHES TO ANTI-AGEISM INTERVENTIONS
Tracey Gendron, and Jennifer Inker, Virginia Commonwealth University, Richmond, Virginia, United States

Ageism, a multidimensional construct, is also understood as a relational process whereby perceptions and behaviors toward older individuals by younger individuals not only damage the self-esteem of elders, but also create a hostile environment for their own future social interactions and their own future self-development as elders. Anti-ageism interventions have the hefty task of improving attitudes and behaviors toward aging within all of these contexts. This presentation will discuss findings from two different anti-ageism interventions both designed to mitigate the negative impacts of ageism. Results from a study on an intergenerational arts-based program found that after participation students demonstrated a positive change in their attitudes toward older adults. Findings from a video-based ageism intervention among a sample of 265 staff members in 15 senior living communities demonstrated decreased internalized aging anxiety as well as decreased ageist behaviors directly after the training and at three month post-follow-up. Given the complex and systemic nature of ageism, diversity is necessary in scope and type of intervention in order to reach the broadest audience.

SESSION 6030 (SYMPOSIUM)
AN INTERNATIONAL PERSPECTIVE: THE ROLE OF TRANSPORTATION IN SUPPORTING COMMUNITY MOBILITY NEEDS OF OLDER ADULTS
Chair: Anne Dickerson
Discussant: Brenda Vrkljan

This international symposium brings together leading scholars in occupational therapy research whose shared aim is to support community mobility in older adulthood. In this session, five groups of researchers will share their collective and individual research outcomes supporting continued community mobility of older adults, especially when driving is no longer an option. The first presentation will be their collective international, cross sectional study of 247 older adults from seven countries. This study compared community