information and services. Despite increases in technology uptake among older people, an age-related digital divide remains. Drawing from research conducted by the Center for Research and Education on Aging and Technology Enhancement (CREATE), this symposium will discuss the acceptance and uptake of technology among older adults and factors influencing technology adoption. S. Czaja will discuss recent technology trends and how they vary according to technology type and subgroups of older adults. Based on CREATE findings, she will also discuss age group and cohort differences in interest in and comfort with technology. W. Boot will present findings from a study that examined adherence to a technology-based cognitive training program and how individual difference factors shaped adherence. N. Charness will present findings regarding whether advanced driver assistance systems (ADAS) can improve older adult driving performance, and older adults’ acceptance and perceptions of value of ADAS systems. M. Harris will discuss health related technology interventions and how integration of technology acceptance and behavior change models can provide insights for the design of health behavior interventions aimed at older adults. J. Sharit will provide findings from a study, which examined the willingness of older adults to adopt a variety of technologies and factors influencing willingness to adopt. Bo Xie will lead a discussion of these issues and outline areas for future research.

OLDER ADULTS’ ADHERENCE TO TECHNOLOGY-BASED INTERVENTION: THE ROLE OF MESSAGING AND INDIVIDUAL DIFFERENCES
Walter Boot,1 Nelson Roque,2 Erin Harrell,1 and Neil Charness,1 1. Florida State University, Tallahassee, Florida, United States, 2. Pennsylvania State University, University Park, Pennsylvania, United States, 3. University of Alabama, Tuscaloosa, Tuscaloosa, Alabama, United States

Adherence to health behaviors is often poor, including adherence to at-home technology-based interventions. This study (N=120) explored adherence to a cognitive training intervention delivered via computer tablet, assessed adherence over a 4.5 month period, explored how individual difference factors shaped adherence, and tested the efficacy of message framing manipulations (positive vs. negative framing) in boosting adherence. Individual difference factors predicted adherence, including variations in self-efficacy and belief in the efficacy of cognitive training. Overall message framing had little impact. However, during the final portion of the study in which participants were asked to play as much or as little as they wanted instead of following a schedule, participants who received positively framed messages engaged with the intervention more. Implications for predicting and boosting adherence to home delivered technology-based interventions will be discussed.

ACCEPTANCE OF TRANSPORTATION TECHNOLOGIES BY AGING ADULTS
Neil Charness,1 Dustin Souders,2 Ryan Best,3 Nelson Roque,4 JongSung Yoon,1 and Cary Stohtar,1 1. Florida State University, Tallahassee, Florida, United States, 2. Purdue University, West Lafayette, Indiana, United States, 3. Rand Corporation, Santa Monica, California, United States, 4. Pennsylvania State University, University Park, Pennsylvania, United States, 5. University of South Dakota, Vermillion, South Dakota, United States, 6. U.S. Army Research Institute for the Behavioral and Social Sciences., Fort Leavenworth, Kansas, United States

Older adults are at greater risk of death and serious injury in transportation crashes which have been increasing in older adult cohorts relative to younger cohorts. Can technology provide a safer road environment? Even if technology can mitigate crash risk, is it acceptable to older road users? We outline the results from several studies that tested 1) whether advanced driver assistance systems (ADAS) can improve older adult driving performance, 2) older adults’ acceptance of ADAS and Autonomous Vehicle (AV) systems, and 3) perceptions of value for ADAS systems, particularly for blind-spot detection systems. We found that collision avoidance warning systems improved older adult simulator driving performance, but not lane departure warning systems. In a young to middle-aged sample the factor “concern with AV” showed age effects with older drivers less favorable. Older drivers, however, valued an active blind spot detection system more than younger drivers.

INTEGRATING TECHNOLOGY ACCEPTANCE AND BEHAVIOR CHANGE THEORIES TO GUIDE TECHNOLOGY INTERVENTIONS
Maurita Harris, and Wendy Rogers, University of Illinois at Urbana-Champaign, Champaign, Illinois, United States

Technology interventions are commonly proposed as an effective means to support health self-management in older adults. For such interventions to be successful, we must identify individuals who are willing to adopt and adhere to these technologies. The general Technology Acceptance Model (TAM; Davis 1989) has been widely used to predict intentions to adopt technology in a variety of contexts. Likewise, the Theory of Planned Behavior (Azjen, 1991) has long been used to provide insights about health behaviors. These theories share three common stages: attitudes, behavior intentions, and acceptance. However, neither perspective provides insight into continued utilization of a technology tool (i.e., long-term adoption). Our goal is to integrate these models with the Transtheoretic Model of Behavior Change (Prochaska & Velicer, 1997) to provide insights that can help design technological interventions for older adults who want to change a health behavior and maintain that change over time.

OLDER ADULTS’ WILLINGNESS TO ADOPT TECHNOLOGIES
Joseph Sharit,1 Sara Czaja,2 and Jerad Moxley,2 1. University of Miami, Miami, Florida, United States, 2. Weill Cornell Medicine, New York, New York, United States

Willingness to adopt technology is an important precursor to technology adoption. This talk will present findings from a study which examined 187 older adults’ willingness to adopt a variety of mobile technologies supporting domains such as transportation, health/wellness, and lifelong learning. Participants aged 65 years and older, including 144 females, were presented with Power Point slides describing each of five technologies, and subsequently rated each technology on their
willingness to adopt it as well as on the technology’s perceived value, the perceived mental effort required to learn it, confidence in one’s ability to learn it, the degree of help available from family/friends for help learning it, and privacy concerns. Other measures, including self-assessment of skills, technology readiness, technology skills, and cognitive abilities, were also collected. Interrelationships among these and other study variables will be presented as a basis for a model for predicting older adults’ willingness to adopt these technologies.

SESSION 5305 (SYMPOSIUM)

ADVANCING THE STUDY OF SUBJECTIVE AGE: MORE SERIOUSLY CONSIDERING GENDER
Chair: Shelbie Turner
Co-Chair: Karen Hooker
Discussant: Toni Calasanti

Socially-cued age expectations inform people’s subjective age - that is, how old they feel relative to their chronological age. Age-graded expectations are widely considered to be gendered, yet gender has not often been empirically examined as the scholarship on subjective age has developed. Because subjective age shapes the experiences a person has becoming and being an older adult, and is an important correlate of later life health, more seriously considering gender’s influence on subjective age is crucial to better understanding gender differences in older adults’ well-being. In our symposium we bring gender to the center of subjective age scholarship. Barrett, Michael, & Noblitt begin by establishing that subjective age research should portray gender as a social-level, rather than individual-level, characteristic. As a complement, Turner, Settersten, and Hooker illustrate how gender has or has not been included in the four theoretical domains of subjective age (self-perceptions of aging, old age stereotypes, age identity, and awareness of age related change), and offer insights into how gender might be included in future studies on each domain. We then shift to two papers presenting new empirical analyses on the role gender plays in subjective age. Kornadt shares how men and women’s commitment to certain social roles differentially informs their subjective age, while Settersten, Day, and Hagestad turn attention to a double standard of aging for women and men with evidence across Europe. Discussant Toni Calasanti closes by offering thoughts on the future of subjective age and gender scholarship, including considering gender beyond the binary.

CONSIDERING GENDER WITHIN THE FOUR THEORETICAL DOMAINS OF SUBJECTIVE AGE
Shelbie Turner,1 Richard Settersten,1 and Karen Hooker,2
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The broad construct of subjective age is informed by four theoretical domains – self-perceptions of aging, old age stereotypes, age identity, and awareness of age related change (Kotter-Gruhn, Kornadt, & Stephan, 2016). Each of the theoretical domains is distinct yet interconnected, and analyzing how gender operates within each yields a more nuanced understanding of gender’s influence on subjective age. In our presentation, we will offer a review of researchers’ consideration of gender in studies of each subjective age theoretical domain, describing (1) how gender has and has not been included, (2) key findings when gender has been included, and (3) insights into how researchers might better include – or even center – gender when studying each domain. In so doing, we highlight the contributions of past scholarship on gender and subjective age and offer insights for future studies on the topic.

PERSONAL AGING IS POLITICAL: A FEMINIST PERSPECTIVE ON SUBJECTIVE AGING
Anne Barrett, Cherish Michael, and Jessica Noblitt, Florida State University, Tallahassee, Florida, United States

An extensive literature examines subjective aging – a construct encompassing many aspects of individuals’ views of aging, such as age identity, aging anxiety, awareness of aging, and views of life stages. A factor receiving attention within this research is gender, with studies revealing much about gender differences not only in subjective aging but also its health and behavioral consequences. However, we argue that the literature is limited by its focus on gender as an individual-level characteristic – rather than a profoundly social element emerging within interactions, pervading institutions, and constituting a system of inequality that intersects with others, including age. Addressing this limitation, our chapter applies a feminist perspective to the study of subjective aging. This perspective draws into focus the implications for subjective aging of gender’s social embeddedness and provides an illustration of the interconnection between the personal and political spheres.

SOCIAL ROLES, SUBJECTIVE AGE, AND GENDER: EXPLORING THE LINKS IN LATER LIFE
Anna Kornadt, University of Luxembourg, Esch-sur-Alzette, Diekirch, Luxembourg

Subjective age (SA) is strongly linked to positive developmental outcomes and successful aging. The social roles people assume are supposed to impact SA, since they incorporate age-graded social experiences and age-stereotypic role expectations. Social roles are also strongly gendered, providing the opportunity to understand gender-specific processes of SA. This study investigates a broad range of social roles and their relation to older men and women’s SA in later life. N = 285 participants aged 50 to 86 years (Mage = 65.04, SD = 8.88) reported on 19 social roles and their SA. Higher commitment to social roles of continued development and engagement was related to a younger subjective age, above and beyond sociodemographic variables, physical and mental health, but only for younger men. Commitment to family roles was related to a younger subjective age only for older men. Implications for the gender-specific understanding of antecedents of SA are discussed.

THE DOUBLE STANDARD OF AGING FOR MEN AND WOMEN: EVIDENCE FROM ACROSS EUROPE, 2006–2018
Richard Settersten,1 Jack Day,2 and Gunhild Hagestad,3
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