

ADAPTING THE SHARE PROGRAM FOR USE WITH FAMILIES FACING THE CHALLENGES OF CHRONIC ILLNESS

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Advances in diagnostic procedures have helped to make diagnosing Alzheimer's disease and other dementias more accurate and to occur earlier in the disease progression. For persons living with dementia and their family care partners, finding programs that meet their needs for support post diagnosis can be challenging. Likewise, for persons with chronic conditions, few programs exist which help care dyads to create a manageable plan of care that addresses each person's concerns and fears. SHARE, (Support, Health, Activities, Resources, and Education), originally designed for dementia care partners, has shown positive outcomes for both members of the care partnership. This presentation describes the development of the six-session SHARE intervention, its implementation in community settings, and its current standing as an evidence-based program and product that has been commercialized. Discussion will also focus on adapting SHARE for use with chronic illness families, highlighting revisions to program procedures, materials, recruitment, and evaluation.

DEVELOPMENT OF A REMOTE ASSESSMENT AND DYNAMIC RESPONSE INTERVENTION FOR DEMENTIA-RELATED CARE NEEDS

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Unmet dementia-related care needs are highly prevalent, and are detrimental to the care dyad's health and well-being, safety, and ability to age in place. The goal of this study was to develop an ecologically-valid needs assessment and integrate it with aspects of the SHARE intervention to inform values-based care planning. Using digital behavioral data collected via an actigraphy watch and multimodal sensors installed in the homes of 76 older adult couples with and without dementia, we created a prototype of the objective measures informing READYR: time spent together or separate as a dyad, exits from the home, sleep habits, physical activity, daily weight, driving habits, and medication taking behavior. These digital behavioral data were then mapped onto care values (e.g. safety, avoiding burden & autonomy) to create a values-based needs assessment protocol that is tailored to the individual care dyad. Discussion will focus on future testing and applications of READYR.

TRANSLATING A GROUP-BASED DYADIC INTERVENTION FOR EARLY-STAGE PEOPLE AND THEIR CARE PARTNERS FOR SPANISH SPEAKERS

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This presentation focuses on the development of and recruitment for a Spanish language version of EPIC, a

group-based dyadic intervention for people with early-stage dementia (EPs) and their care partners (CPs). EPIC involves activities for the entire group together, separate EP or CP groups, and one individualized session for each dyad. EPIC builds on components of SHARE combined with strategies from other psychoeducational interventions (e.g., skills-training, care values clarification, care planning). Findings from 6 focus groups with Latino participants were used to help with cultural responsiveness such as fluent Spanish/bilingual staff, testimonials from Latino families affected by dementia, and minimization of "threatening" language for memory loss. Participants also provided suggestions for recruitment for Spanish speakers such as engaging promotores, using social media across generations, recruiting through Spanish language health classes, and recognizing the impact of the political environment. The presentation will review both recruitment successes and challenges using these approaches.

SESSION 5780 (SYMPOSIUM)

THE COMPLEX ROLE OF DISCRETE EMOTIONS IN SUCCESSFUL AGING

Chair: Jeremy Hamm

Co-Chair: Carsten Wrosch

Research shows that emotions play an important role in successful aging. However, previous studies have largely focused on the implications of dimensional indicators of emotion, such as positive and negative affect. This approach may fail to capture important distinctions between discrete emotions such as sadness, loneliness, calmness, and empathy that could become more or less adaptive with age. The present studies adopt a discrete emotion perspective to examine age-related changes in the consequences of different positive and negative emotions for successful aging. Drawing from an evolutionary-functionalist perspective, Haase, Wu, Verstaen, and Levenson investigate whether sadness becomes more salient and adaptive in old age using a multi-method approach. Lee, Lay, Mahmood, Graf, and Hoppmann address the seemingly contradictory consequences of loneliness by examining how state- and trait- loneliness interact to predict older adults' prosocial behaviors. Hamm, Wrosch, Barlow, and Kunzmann use two studies to examine the diverging salience and 10-year health consequences of discrete positive emotions posited to motivate rest and recovery (calmness) or pursuit of novelty and stimulation (excitement). Barlow and Mauss study the co-occurrence of discrete emotions and their age-dependent associations with well-being using an adult lifespan sample. Finally, Wieck, Katzorreck, Gerstorf, Schilling, Lücke, and Kunzmann examine lifespan changes in the adaptive function of empathy by assessing the extent to which empathic accuracy protects against stress-reactivity as people age. This symposium thus integrates new research on the role of discrete positive and negative emotions and will contribute to a deeper understanding of the complex relationships between emotions and successful aging.

A TALE OF TWO EMOTIONS: THE DIVERGING SALIENCE AND HEALTH CONSEQUENCES OF CALMNESS AND EXCITEMENT IN OLD AGE

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Using two studies, we examined the late life prevalence and health consequences of discrete positive emotions posited to motivate rest and recovery (calmness) or pursuit of novelty and stimulation (excitement). Study 1 assessed the salience of these discrete emotions in older adults ($n=73$, $M_{age}=73$) relative to younger adults ($n=73$, $M_{age}=23$) over a one-week period. Multilevel models showed that older (vs. younger) adults reported higher calmness and lower excitement. Study 2 examined the longitudinal health consequences of calmness and excitement in old age ($n=336$, $M_{age}=75$), as moderated by perceived control. Multilevel growth models showed that calmness, but not excitement, buffered against 10-year declines in psychological well-being (perceived stress, depressive symptoms) and physical health (physical symptoms, chronic conditions) for older adults with low perceived control. Results suggest that positive emotions with disparate motivational functions become more (calmness) or less (excitement) salient and have diverging implications for health in old age.

THE BRIGHT SIDES OF SADNESS IN LATE LIFE

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Sadness is often thought of as unpleasant and dysfunctional. Yet, evolutionary-functional approaches and discrete emotional aging frameworks suggest that sadness is an emotion that helps us deal with loss and thus may become particularly salient and adaptive in late life. This talk presents findings from a multi-study, multi-method research program using age-diverse samples and experimental and longitudinal study designs. Findings show (1) intact or elevated levels of sadness responding in late life (i.e., higher sadness expressions in response to distressing film clips; higher coherence between sad facial expressions and autonomic physiology in response to film clips depicting loss; stability in sadness behaviors in marital conflict interactions). Moreover, (2) higher levels of sadness responding are linked to adaptive outcomes in late life (i.e., higher social connectedness, higher compensatory control strategies) with some effects generalizing across age groups (i.e., links between sadness coherence and well-being). Implications for future research are discussed.

LONELINESS AND SOCIAL ENGAGEMENT: THE UNIQUE ROLES OF STATE AND TRAIT LONELINESS FOR DAILY PROSOCIAL BEHAVIORS

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Loneliness is a distressing yet adaptive emotional experience that alerts us to socially re-engage. However, loneliness can also lead to social withdrawal and isolation. To reconcile the seemingly contradictory consequences of

loneliness, we unpack the timing of the underlying processes by distinguishing between the roles of state loneliness (i.e., daily variations in loneliness) and trait loneliness (i.e., person-average loneliness) in predicting social re-engagement. Using ten days of electronic daily assessments from 95 older adults ($M_{age} = 67.0$ years; 64.2% women), initial findings indicate that trait loneliness moderates time-varying associations between state loneliness and prosocial behavior: On days of elevated state loneliness, older adults low in trait loneliness report increases in prosocial behavior, whereas older adults high in trait loneliness show decreases in prosocial behavior. Findings suggest that transient loneliness may motivate older adults to actively re-engage with others; chronic loneliness may undermine such adaptive responses.

DISCRETE EMOTION NETWORKS ACROSS THE LIFESPAN: IMPLICATIONS FOR WELL-BEING

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Research examining the age-related trajectories and consequences of emotional complexity has largely lumped emotions into broad categories. The present study utilized network analyses to quantify the co-occurrence of discrete emotions and their associations with well-being across the lifespan in a sample of 156 females (aged 23-79). Participants completed assessments of 8 emotions (i.e., sad, angry, anxious, lonely, happy, excited, proud, and calm) for 16 days, and completed measures of psychological and physical well-being at a 4-month follow-up. While certain emotions were found to co-occur at similar rates across the lifespan (e.g. sad-anxious), other emotion pairs become more (e.g. sad-calm) or less (e.g. sad-angry) frequent with age. Additionally, specific emotion pairs were differentially associated with indicators of well-being across the lifespan, while controlling for mean levels of these emotions. These findings point to the importance of considering the co-occurrence of distinct emotions and potential pathways towards successful aging.

EMPATHIC ACCURACY: HELPFUL TO AVOID NEGATIVE AFFECT IN OLD AGE?

Cornelia Wieck,¹ Martin Katzorreck,² Denis Gerstorff,³ Oliver Schilling,⁴ Anna Jori Lücke,⁴ and Ute Kunzmann,² 1. Leipzig University, Leipzig, Sachsen, Germany, 2. University of Leipzig, Leipzig, Sachsen, Germany, 3. Humboldt University Berlin, Berlin, Berlin, Germany, 4. Heidelberg University, Heidelberg, Baden-Wuerttemberg, Germany

Past work suggests age-related declines in empathic accuracy and that these declines may put older people at risk for heightened stress reactivity and low affective well-being. We addressed these questions using data from the fourth wave of the Interdisciplinary Longitudinal Study of Aging (ILSE). To assess empathic accuracy, the young-old ($N=115$, $M_{age}=63.4$, $SD_{age}=1.13$) and old-old ($N=31$, $M_{age}=82.3$, $SD_{age}=.87$) participants of ILSE watched six film clips of individuals, who thought-aloud about an emotional autobiographical event, and were asked to rate each individual's emotions. Subsequently, participants watched a film about Alzheimer's disease and their subjective and cardiovascular stress reactions