the youngest (and smallest) group; average alphas were .71, .78, and .77, respectively, for the three groups. The scales performed with reasonable, but not ideal, factorial validity for the 6-factor model; NFI= .777, CFI= .836, RMSE= .063, PClose= .000, CMIN/DF= 3.089. A single factor hierarchical model did not improve fit. Results suggest that the Ryff scales are reliable across age groups but that there may be factor solutions that are superior to the original Ryff six factors.

## INTERPROFESSIONAL PRACTICE: NEW DIRECTIONS IN THE FIELD OF AGING

P. Kelly, L. White-Ryan, J. Heyman, Fordham University

As the health care system advances toward integrative care, there is an ongoing effort to improve patient care with interprofessional teams. Education of students is needed so they understand the value of interprofessional practice. This research explores the attitudes of social work students toward interprofessional practice and collaborative teams. A cross-sectional study was conducted with students in a large school of social work in order to understand their experiences in the field and classroom (N=125). The survey consisted of questions on demographics, training and education, attitudes toward interprofessional practice and collaborative teamwork, experience in the field of aging, and perceptions of other professionals. Results showed that overall students had positive attitudes toward interprofessional teamwork. However, students did not have extensive experience working or practicing in interprofessional teams. While attitudes were general positive, students indicated that they needed more training in working in health care teams. Insights from students in the field placements with older adult and their families will be discussed. Data on students' perceptions of working with nurses, physicians and other health care professionals will also be presented. The presentation will also include a discussion of different approaches that have been used to strengthen training in interprofessional practice in both the classroom and the field setting. These educational efforts need to be amplified as we move forward in the profession to prepare students for interprofessional teamwork. Important considerations about educational needs and teaching strategies for students working in interprofessional practice with older adults and their families will be underscored.

## LOOKING AT OBJECTIVE AND SUBJECTIVE HEALTH IN CENTENARIANS: ALWAYS IN AGREEMENT?

L. Araujo<sup>1</sup>, L. Teixeira<sup>2</sup>, O. Ribeiro<sup>3</sup>, C. Paul<sup>4</sup>, 1. CINTESIS; ESEV.IPV, 2. ICBAS-UP, 3. University of Aveiro & University of Porto - CINTESIS, 4. Center for Health Technology and Services Research

Centenarians' objective health is often characterized by functional and health problems associated with their long-life and age-related problems. Nevertheless, their self-rated health (SRH) may not be necessarily negative. There is a large body of literature concerning SRH in later life but lack of evidence about one's perception of health and its associated factors in very advanced ages. This study aims to analyse the relationship between subjective and objective health status in a sample of centenarians (n=127; Mage = 101.1 years, SD 1.5). Subjective health was assessed by a SRH single-item, and objective health by considering the number of reported

diseases and a functional capacity scale. Main health characteristics are described as well as examined the association between objective and subjective health indicators and other relevant variables (e.g., individual resources). Results revealed that almost half of the sample has a positive (good, very good or excellent) health appraisal. Many of these individuals have 3 or more diseases and are dependent in their ADL. Objective and subjective measures of health are discordant is some cases. Results revealed that centenarians' SRH could be determined by other factors than the objective health ones. Having diseases and functional dependence at 100 years old may not mean to have a bad SRH. The high variability in SRH and the discordance between objective and subjective measures are a proof of centenarians 'capacity of adaptation and the existence of psychosocial resources that may be decisive for the perception and handling of health status at such an advanced age.

## MEASURING THE WANDERING MIND: USING PUPILLOMETRY TO ASSESS AGE DIFFERENCES IN OFF-TASK THOUGHTS DURING READING

M. Shake, R. Mathews, M. Hughes, C. Meehan, A. Anderson, A. Zwakenberg, Western Kentucky University

Mind-wandering (MW) during reading is a pervasive phenomenon associated with a variety of negative consequences, such as poor comprehension. Interestingly, older adults self-report less MW than younger adults; however, such self-report measures are vulnerable to age differences in reporting bias. Recently, it was shown in younger adults that MW is reflected in increased pupil dilation and blinking rates. The present study investigated whether such pupillometric markers could be used to distinguish age differences in MW. Older and younger participants read a text while wearing an EyeLink II eye-tracker. At random intervals (every 2–4 minutes), the computer interrupted their reading to probe participants whether they had been MW. Pupillometric data were extracted from the 40 words prior to each random probe. Among those who experienced probe-caught episodes of both MW and on-task reading (22 Younger, 19 Older), pupillometric variables (e.g., age-normalized dilation, blinks, fixations) were each assessed in a 2 (Age) x 2 (Probe: Off-Task vs. On-Task) ANOVA. Results showed an effect of MW on Pupil Dilation, F(1,39)=4.09, p=.05, such that participants' pupils were more dilated during episodes of MW. There was also a main effect of Age, F(1,39)=7.72, p<.01, indicating greater age-normalized pupil size in older adults. The interaction was not significant, F(1,39)=1.16, ns. These results indicate pupillometry can be a useful objective tool in understanding MW in older adults. Results are discussed and compared to research in other areas that has reported age differences in pupillary factors as a function of cognitive load.

## NURSING HOME STAFF KNOWLEDGE ABOUT DEMENTIA: THE IMPACT OF TEEPA SNOW'S POSITIVE APPROACH® TO CARE CERTIFICATION

M. Ehlman<sup>1</sup>, S. Nimkar<sup>1</sup>, B. Nolan<sup>2</sup>, P. Thomas<sup>3</sup>, C. Caballero<sup>1</sup>, T. Snow<sup>4</sup>, 1. University of Southern Indiana, 2. Positive Approach, 3. University of Southern Indiana School of Nursing and Health Professions, 4. Positive Approach, LLC