

GOALS OF THE ENDGAME

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At all stages of life, the body can be considered an occupational resource that interacts with social structures in identity formation and complicates personal adaptation to life transitions. As the body declines, the economic and social standing it confers also tends to decline, leading to socially embedded fears about physical decline and marginalization. This paper applies theoretical work from embodiment theory and the life course perspective to examine how perceptions of aging and life experience with sport (or lack thereof) influence exercise participation and athletic identity. Using a narrative approach, I examine in-depth interviews I conducted with elite athletes, masters' athletes, coaches, athletic program directors, mature adults. Some participants struggled to exercise regularly, and others are exercising more in their later years than at any other point in their lives. Three key themes emerged: 1) bodily identity is tremendously important in relation to other forms of identity when it is affected by aging, ill-health, or other physical processes; 2) physical functional mobility becomes increasingly important with age; and 3) experiences with sports and athletic identity (or lack thereof) influence engagement in exercise in later life in surprising ways. The paper challenges society's focus on youth in sports and elite athletes, to discuss how our greater longevity means that we must place more emphasis on identifying ways to keep physically active and mobile throughout adulthood.

SOCIAL ACTIVITIES AND DEPRESSIVE SYMPTOMS AMONG OLDER ADULTS IN MEXICO: IMPLICATIONS OF GENDER AND PHYSICAL HEALTH

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Studies in developed countries indicate that social activities can make a difference in mental health in later life. Yet, research on potential benefits of social activities for older adults in developing countries, including Mexico, has been scarce. This study uses the two most recent waves (2012, 2015) of the Mexican Health and Aging Study to investigate the impact of social activities on depressive symptoms among older men ($n = 4,749$) and women ($n = 6,527$), aged 50+, in Mexico. The results of Ordinary Least Squares regressions indicate that it is important to differentiate among specific social activities in later life. Particularly, not only group-based but also solitary social activities were predictive of better mental health. Moreover, the findings demonstrate several gender differences and similarities. Participation in clubs, communication with relatives and friends, physical exercise, and watching television were beneficial for mental health among men, whereas volunteering, playing games, and making crafts were associated with fewer depressive symptoms among women. At the same time, reading as well as doing household chores were related to better mental health among older Mexicans, regardless of gender. Furthermore, this study shows that self-reported health, functional limitations, chronic conditions, and frequent pain might shape the implications of social activities for depressive symptoms among older adults in Mexico. The insights from this study can be helpful for intervention programs that are being

developed to promote benefits of group-based and solitary social activities for mental health among older men and women with different levels of physical health.

SOCIAL COHESION, TRANSPORTATION, AND PARTICIPATION IN SOCIAL ACTIVITIES AMONG OLDER ADULTS

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Objectives: The purpose of this research is to examine the role that social cohesion and access (conceptualized as mobility and transportation) plays on participation in social activities (i.e., visiting friends/family, attending religious services, participating in organizations, and going out for enjoyment). Participation in valued, social activities promotes of well-being through social interactions and the maintenance of personally meaningful relationships and lifestyles. **Methods:** Data from the National Health and Aging Trends (NHATS) study were used. The NHATS is representative of U.S. Medicare recipients ages 65 and older. The NHATS collects information on health and participation as well as detailed environmental measures, which makes it well suited for this research. **Results:** Higher ratings of social cohesion were associated with higher cumulative odds of participating in social activities among older adults, net of sociodemographic characteristics, personal network size, neighborhood disorder, and health factors. Taking public transportation services and walking places were associated with higher cumulative odds of participating in social activities. An interaction between social cohesion and walking places was significant ($p=0.002$). Older adults who reported high levels of social cohesion and walked to get around their community were more likely to participate in social activities compared with those reporting low social cohesion and walking as a transportation. **Discussion:** This research provides evidence that socially cohesive neighborhoods enable greater access to social activities through transportation services. Offering a range of transportation services is only piece of creating an age-friendly community—older adults must also feel comfortable using these options.

SESSION 1155 (SYMPOSIUM)**BEYOND FUNCTIONAL SUPPORT: PAID CAREGIVERS AND THE HEALTH OF OLDER ADULTS**

Chair: Jennifer M. Reckrey, *Icahn School of Medicine at Mount Sinai, New York, New York, United States*

Discussant: Barbara Bowers, *University of Wisconsin-Madison, School of Nursing, Madison, Wisconsin, United States*

This symposium will explore role that paid caregivers (e.g. home health aides, personal care attendants, and other direct care workers) play in the health and team-based healthcare of older adults living in the community. The large and growing workforce of paid caregivers witness the changes in health status, chronic health needs, and psychosocial stressors of the older adults they care for. Yet existing research on paid caregivers has largely been limited to workforce issues such as