

Intergenerational contact is beneficial for improving attitudes toward older people, including age stereotypes (AS). To date, however, research on the topic has focused on younger adults (intergenerational contact), overlooking the possible perks for older adults themselves (contact with same-age peers). The current study investigated the association between contact with older adults and views of the self in old age (VSOA) among younger and older adults in a domain-specific way. The sample comprised younger (39-55 years, $n = 1,012$) and older (65-90 years, $n = 1,344$) adults from the Ageing as Future international study. Findings indicated that contact with older adults was related to more positive VSOA and this was partly mediated by AS. These relations were stronger for older adults, indicating that interactions with other older adults may help favorably shape how older adults view their ingroup and aging. Beneficial effects emerged mostly in the friends and leisure domains.

SELECTIVE ENGAGEMENT IN PREPARATIONS FOR OLD AGE: DETERMINANTS OF MOTIVATION

Jeongsoo Park, *Ajou University, Suwon-si, Kyonggi-do, Republic of Korea*

Preparations for old age in general are beneficial for one's adjustment in later life. Using Selective Engagement Theory (SET) as a conceptual framework, we examined how the importance attached to functioning, as well as perceived control over functioning in different domains (e.g., family, social relations, finances, health, etc.) predicted engagement in preparing for old age five years later. Two-wave data was obtained from Ageing as Future Study. The sample consisted of $N = 1,255$ aged from 30-85 in the US ($n=315$), Hong Kong ($n=317$), and Germany ($n=623$). Consistent with SET, ratings of importance were strongly predictive of subsequent preparations and more predictive than perceived control, with evidence in several domains of functioning that this was particularly true for older adults. These findings highlight the interaction between personal goals and resources in determining older adults' willingness to prepare for old age.

RELEVANT YET UNCONTROLLABLE: PERCEIVED CONTROL AS A MEDIATOR OF CROSS-CULTURAL DIFFERENCES IN OLD-AGE PREPARATION

Helene Fung¹, Nicole Long Ki Fung¹, and Dwight Cheuk Kit Tse², *1. The Chinese University of Hong Kong, Hong Kong, Hong Kong, 2. University of Strathclyde, Glasgow, Scotland, United Kingdom*

Previous studies have shown that there are cross-cultural differences in old-age preparation rate (e.g. Kornadt et al., 2019). Drawing from the transactional stress-and-coping model (Lazarus & Folkman, 1984), we proposed that perceived control, self-relevance and responsibility for old-age preparation could mediate the cultural differences in old-age preparation. We recruited a sample aged 18 to 96 from Germany ($N=366$, $Mage=52.63$) and Hong Kong ($N=252$, $Mage=57.47$) to complete two online questionnaires across two years. Compared with German adults, Hong Kong adults prepared less ($b=-2.159$, $p<.001$), had lower perceived control ($b=-0.899$, $p<.001$) and responsibility ($b=-0.713$, $p<.001$), yet similar level of self-relevance over preparation. Preparation at time2 was related to self-relevance ($b=1.004$, $p<.001$) and control ($b=0.785$, $p<.001$) at time1. The cultural differences in

preparation at time2 were only mediated by perceived control at time1 (indirect effect= 0.706 , $p<.001$). Findings highlight the importance to enhance individual perceived control over old age in promoting society-wide old-age preparation.

PREPARING FOR A GOLDEN AGE? APPROACH AND AVOIDANCE MOTIVATION IN THE CONTEXT OF OLD-AGE PREPARATION

Fiona Rupprecht, and Jana Nikitin, *University of Vienna, Vienna, Wien, Austria*

When it comes to old-age preparation, individuals may be motivated by positive outcomes they wish to approach (e.g., social connectedness) or by negative outcomes they wish to avoid (e.g., loneliness). We expected approach motivation to be adaptive in younger ages, when resources and possibilities for old-age preparation should be plentiful. For older adults, whose resources and time for (continued) old-age preparation are limited, the maintenance- and loss-oriented perspective of avoidance motivation may however be the more adaptive one. Using data from 2054 individuals aged 18 to 96 years and representing five cultures, we adopted a domain-specific, cross-cultural, and age-differential perspective on our research question. Results indicate that individuals tend to be both approach- and avoidance-motivated when it comes to old-age preparation and confirm the age-differential adaptivity of approach and avoidance motivation in terms of both, actual preparatory behavior and psychological well-being.

SESSION 2490 (SYMPOSIUM)

A PUBLIC HEALTH APPROACH TO ALZHEIMER'S DISEASE RISK REDUCTION: WHERE WE ARE AND WHERE WE'RE HEADED

Chair: John Omura Co-Chair: Eva Jackson Discussant: Kelly O'Brien

A growing body of evidence has identified potential modifiable risk factors for Alzheimer's disease and related dementias (ADRD). In 2021, the National Plan to Address Alzheimer's Disease (National Plan) included a new goal to promote healthy aging and address risk factors to help delay onset or slow progression of ADRD. Applying a robust public health approach to ADRD risk reduction can help achieve meaningful progress at the population level. The activities outlined in the Building Our Largest Dementia (BOLD) Infrastructure for Alzheimer's Act (P.L. 115-406) are designed to create a uniform national public health infrastructure with a focus on various issues including risk reduction. The purpose of this session is to illustrate a public health approach to ADRD risk reduction, including its current status along with future directions and priorities. An overview of the National Plan's new goal regarding ADRD risk reduction (McGuire) and data highlighting the current burden of key modifiable risk factors in the United States along with important disparities (Omura) will be presented. Holt will describe how ADRD risk reduction is integrated into the work of BOLD funding recipients, and Head will present experiences implementing public health activities that support ADRD risk reduction in the field along with successes and lessons learned. Finally, priorities and future directions for