does this association vary by age? Analyses are conducted with the Portraits of American Life Study, a national survey of 2,610 American adults aged 18-80+. Results of multivariate logistic and ordered logistic regression models reveal that young adults are most likely to have recently offered advice to family members, friends, or strangers. Interestingly, however, the connection between advice-giving and the sense of life meaningfulness is most pronounced for late-middle age adults—even as contextual factors and social role changes during this part of the life course reduce the likelihood of advice exchange. Consistent with Erikson’s framework, advice appears to be a mechanism for contributing to others’ welfare and for cultivating life meaning. Yet opportunity structures for advice transmission also shift over the course of adulthood and leave late middle age and older adults with fewer opportunities to engage in such generative practices.

SOCIAL PARTICIPATION AND OLDER ADULTS’ SLEEP

Sleep complaints are common among older adults, and sleep duration and quality have been found to predict health outcomes; sleep is increasingly considered a behavioral risk factor for chronic diseases and mortality. Aging strongly influences social involvement, which is beneficial for healthy aging. In this study, we examined the effects of older adult’s social participation on their sleep. We used data from the National Social Life, Health, and Aging Project, a nationally representative sample of non-institutionalized older Americans aged 62-91 that included objective data on sleep duration and quality. Results from cross-sectional analysis suggested that greater social participation was associated with better actigraphic sleep outcomes. In particular, participation in religious services and volunteer work was associated with fewer minutes in WASO, fewer wake bouts, and less sleep fragmentation. When examining changes of social participation on older adults’ sleep, religious attendance remained a strong predictor of sleep characteristics. Increase in religious participation was associated with longer actigraphic sleep duration and fewer wake bouts. There was no association between social participation and changes in social participation on self-reported sleep outcomes. We concluded that greater social participation, in particular religious attendance, may be consequential for sleep outcomes at old ages.

THE INFLUENCE OF VISION FUNCTION AND SOCIAL SUPPORT ON WELL-BEING AMONG OLDEST-OLD ADULTS: FINDINGS FROM THE GEORGIA CENTENARIAN STUDY
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Purpose: Good vision is an important physical factor for oldest-old adults; however, the psychological mechanism between vision and subjective well-being has remained unclear. The current study evaluated the visual function among centenarians and assessed the relationship between vision, social support, and well-being. Methods: This study used the data set of the Georgia Centenarian Study (Poon et al., 2007). The sample included 106 centenarians (18 men and 88 women). We used scores of the Snellen chart for objective vision and self-reports for subjective vision. Social support, depression, and loneliness were also assessed. Results: Approximately 75% of the centenarians showed some level of visual impairment, and 56% of them reported that they had visual impairment. Objective vision impairment was significantly related to depressive symptoms. Multiple regression analysis revealed that both variables of visual function were significantly associated with depression but not loneliness. In the model including depression, a significant interaction was obtained for social support and objective vision. Centenarians who had high levels of visual function reported lower depression when they had social support; however, centenarians who had low level of visual function tended to report higher depression even if they had social support. Discussion: The majority of centenarians were visually impaired. Vision function related to centenarians’ well-being, especially depression. Centenarians who had severe visual impairment reported more depressive symptoms even if they had higher levels of social support. Perhaps excessive social contact becomes burdensome for centenarians whose eyesight is impaired, although social support is thought of enhancing subjective well-being.

SESSION 1015 (SYMPOSIUM)

RELATIONSHIP OF CNA WORK ENVIRONMENT AND ELDER ABUSE/NEGLECT IN NURSING HOMES: AN ECOLOGICAL PERSPECTIVE
Chair: C.E. Pickering, Michigan State University, East Lansing, Michigan
Co-Chair: L.B. Schiamberg, Michigan State University, East Lansing, Michigan

A major issue in addressing elder abuse and neglect in nursing homes is the relative absence of information about the presumed abusers—nursing home staff or typically certified nurse assistants (CNAs). A useful framework for addressing this major shortcoming is the ecological perspective, positing a primary context of nursing home elder abuse as the dyadic relationship between the older adult resident and CNAs. In turn, this perspective gives credence to the distal contexts which can affect this dyadic relationship. This interdisciplinary symposium, using multi-method analytical strategies with data from two sources, focuses on a dimension of the CNA nursing home experience which may both underlie an institutional culture of violence and elder abuse - workplace bullying between CNAs. First, Dr. Schiamberg will present the ecological perspective of abuse in nursing homes and, using data from a structural equation model (SEM) of emotional abuse of residents, will provide support on the behaviors of the CNA and resident which contribute to the quality of the dyadic relationship. Second, Ms. Lee will present findings on types and characteristics of workplace bullying among CNAs in nursing homes using thematic analysis of qualitative data. Third, Dr. Pickering will present findings from a grounded theory study on the connection between workplace bullying among CNAs and the CNA-resident caregiving relationship. Lastly, Ms. Nurenberg...
will present findings from a case study on prevention strategies for workplace bullying among CNAs in nursing homes, and discuss how these strategies may also positively impact resident care.

CLARIFYING CONTRIBUTIONS OF BOTH RESIDENT AND STAFF BEHAVIORS IN EMOTIONAL ABUSE IN NURSING HOMES

Although studies of elder abuse in nursing homes have focused on the contribution of resident or staff (CNA) behaviors, few have examined the contributions in context of the dyadic relationship. SEM modeling was used to estimate the importance of resident behaviors (e.g. ADL/IADL limitations and behavioral problems), staff abusive behaviors (e.g. physical abuse, sexual abuse, restraint abuse) and factors beyond the dyadic relationship (e.g. family member visits) on the incidence of emotional abuse. Data was obtained from a random sample of 452 adults with an older adult relative, ≥ 65 years in a nursing home who completed a telephone survey on elder abuse experienced by the family member. Two latent factors, Resident behaviors (γ=0.0204, T-Value =1.98, p=.05) and staff abusive behaviors (γ=1.676, T-Value =5.734, p=.000) significantly predicted emotional abuse. Results clarify contributions of individual characteristics of the CNA and resident to outcomes which occur within the dyadic relationship.

THE NATURE OF WORKPLACE BULLYING AMONG CNAS IN NURSING HOMES
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While bullying is a critical element in understanding the culture of violence in multiple occupational industries, the detailed nature of the bullying experienced by CNAs in nursing homes has yet to be studied. Presenting results from a thematic analysis of data from in-depth CNA interviews, this study describes the nature of bullying behaviors experienced by CNAs. Findings indicate some distinct features of CNA workplace bullying including the themes of controlling and isolating tactics used towards CNAs. Furthermore, participants reported a higher frequency of bullying behaviors and a greater onset of distress as compared to reports from bullying studies with workers in other occupational settings. This suggests that bullying is a pervasive and concerning problem for the occupational safety and health of CNAs in nursing homes. These findings clarify an important element of the CNA/resident dyadic relationship for which there are implications for the quality of the nursing home environment.

THE INFLUENCE OF WORKPLACE BULLYING ON THE CNA/RESIDENT CAREGIVING RELATIONSHIP
C.E. Pickering, K.M. Nurenberg, J. Lee, L.B. Schiamberg, College of Nursing, Michigan State University, East Lansing, Michigan

Given the pervasive and distressing nature of CNA bullying, it would suggest that the distal context of such bullying may influence the caregiving interactions which occur within the CNA/resident dyadic relationship. As such, the purpose of this grounded theory study is to understand how bullying affects resident care. Constant comparative analysis was used to analyze data from in-depth telephone interviews with CNAs who experienced bullying while employed in a nursing home. Results suggest a direct relationship between the distal context of bullying and the provision of unsafe, abusive and neglectful care within the CNA/resident dyadic relationship. For example, CNAs knowingly choose to provide unsafe, improper or neglectful care in order to appease or avoid a bully. Findings from this study provide for a more theoretically complete view of the development of abuse and neglect in caregiving relationships between residents and CNAs, with implications for the development of effective interventions.

USING HADDON’S INJURY MATRIX TO IDENTIFY PREVENTION STRATEGIES FOR BULLYING IN NURSING HOMES
K.M. Nurenberg, C.E. Pickering, L.B. Schiamberg, J. Lee, Michigan State University, East Lansing, Michigan

Bullying between CNAs has become a prevalent problem in nursing homes which affects the health and well-being of these workers, and ultimately affects the residents. The purpose of this case study is to analyze individual incidences of bullying, as explained by the victim, and determine possible prevention strategies. This study is a secondary analysis of data which has been collected from interviews with CNAs that have had personal experiences with bullying as part of a grounded theory study. Guided by the Haddon’s Matrix, which is a framework used for injury prevention, incidences of bullying in the data were analyzed to determine primary, secondary, and tertiary prevention strategies. The prevention strategies identified in the findings include changing practices at the organizational as well as interpersonal level. By implementing bullying prevention strategies we can reduce the culture of violence, and in doing so may positively impact resident care.

SESSION 1020 (SYMPOSIUM)

AGEING, HEALTH, AND DEPENDENCE ACROSS CULTURES: A 10/66 SYMPOSIUM
Chair: M. PRINCE, KING’S COLLEGE LONDON, London, United Kingdom
Co-Chair: M. Prina, KING’S COLLEGE LONDON, London, United Kingdom

By 2050 the number of people aged 60 and over will have increased to 22 percent of the world’s population. Although Japan, European countries and North America have been the first places to experience ‘population ageing’, the greatest increase in numbers of older people in coming years will be in low and middle income countries. This will lead to a change of priorities for communities, policy-makers and families, with an increased focus in management of chronic diseases, disability and needs for care. The symposium will explore these issues across diverse cultures, using the experiences learned from different studies carried out by our 10/66 Dementia Research Group. The first talk will highlight the