

ways in which dependency-free in England will evolve over the coming 20 years for men and women.

RURAL-URBAN DIFFERENCES IN COGNITIVE LIFE EXPECTANCIES AMONG OLDER ADULTS IN MEXICO

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Objective: To document rural-urban differences by gender in cognitive life expectancies among older adults in Mexico. **Methods:** Sullivan-based life tables were used to estimate cognitively normal, cognitively impaired/no dementia (CIND), and dementia life expectancies for adults 50 years and older in the Mexican Health and Aging Study (2001–2015). **Results:** Overall, rural residents exhibit longer life expectancies than their urban counterparts, regardless of gender. However, rural residents are more likely to have CIND and dementia relative to urban residents. Furthermore, men spend more years after age 50 with CIND, whereas women spend more years after age 50 with dementia, regardless of locality. **Conclusion:** Educational attainment of urban residents remains considerably higher than that of rural residents due to social and economic disadvantages. Social policies specifically aimed at increasing educational attainment for rural populations can potentially have major impacts to decrease urban-rural disparities in cognitive life expectancies.

REGIONAL INEQUALITIES IN HEALTHY LIFE YEARS IN FRANCE: HOW MUCH THE SOCIOECONOMIC AND LONG-TERM CARE CONTEXTS MATTER?

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With large regional variations in mortality and health in developed countries, it is unclear how locally shorter/longer lives combine with unhealthy/healthy lives. Yet it is crucial to address the potential unequal needs for regions to provide long term care (LTC), while managed on local resources in France, as elsewhere. We computed Healthy and Unhealthy Life Years (HLY/ULY) in the hundred French “departments” for men and women aged 60+ in 2014, using the Global Activity Limitation Indicator (Sullivan method): we found a 3.1 year difference between the highest and the lowest regions’ ULY in men and 5.0 year in women, reflecting the variation in years with potential LTC needs. We analyzed this variation through meta-regressions, using indicators of regional socioeconomic contexts and LTC provisions. We present how much the local contexts are linked to healthy aging in France and whether LTC provision matches the potential needs related to longer ULY.

DO U.S. STATES’ SOCIOECONOMIC AND POLICY CONTEXTS SHAPE HEALTHY LIFE EXPECTANCY?

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Recent research highlights the massive disparities across U.S. states in adult mortality and disability. Moreover, this research also points to the importance of socioeconomic and policy contexts in accounting for these disparities. Less clear is how state differences in mortality and disability combine to determine differences in healthy life expectancy (HLE) and how HLE is related to major contextual factors. Drawing on the National Longitudinal Mortality Study and the American Community Survey, we estimate state-specific HLE based on metrics of mobility, self-care, impairments, and cognition. We assess these indicators of population health in light of states’ economic output, income inequality, anti-poverty programs, and public health programs, net of population composition. The results inform states’ policy strategies to improve the health of their population.

HOW WILL DEPENDENCY-FREE LIFE EXPECTANCY IN ENGLAND EVOLVE OVER THE NEXT TWENTY YEARS FOR MEN AND WOMEN?

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Most research on time trends in health expectancy concentrate on disability rather than dependency, inferring care needs from inability to perform Basic Activities of Daily Living (BADL). We use a more transparent measure of care needs/dependency, based on Instrumental ADL, BADL, incontinence and cognitive impairment, which categorises dependency as: high (24-hour care); medium (daily care); low (less than daily); independent. We use the Population Ageing and Care Simulation (PACSim), a dynamic microsimulation model, which simulates individuals’ sociodemographic factors, health behaviours, 12 chronic diseases and geriatric conditions, and dependency, using three longitudinal studies, to estimate years spent in each dependency state from 2015 to 2035, for older men and women. We find that men aged 65 years will see a compression of dependency whilst women aged 65 years will see an expansion of mainly low dependency. We discuss these results in the light of changes in specific diseases/geriatric conditions and multi-morbidity.

SESSION 535 (SYMPOSIUM)

HOW DO DAILY POSITIVE AND NEGATIVE EVENTS AND EMOTIONS INFLUENCE THE COURSE OF DEVELOPMENT?

Chair: S.A. Castro, *Arizona State University, Phoenix, Arizona*

Co-Chair: F.J. Infurna, *Arizona State University, Tempe, Arizona*

Discussant: D.M. Almeida, *Pennsylvania State University, University Park, Pennsylvania*

Evidence indicates that daily stressors, positive events, and their related emotional dynamics have a long-term impact on mental and physical health, inflammation, and longevity. This symposium brings together a collection of papers that utilize daily-diary methodology to advance knowledge of the dynamic interplay between daily stressors and