

two or more types of social participation (OR=1.223). This study demonstrates that social trust and social support are the protective factors of smoking behavior among Chinese older adults, while social participation was a risk factor. The Chinese government has launched "the 2030 Plan for healthy China" to promote people's healthy behaviors, and this study will provide good evidence for actions aiming at reducing smoking behaviors among Chinese older adults.

SESSION LB2570 (LATE BREAKING POSTER)

LATE BREAKING POSTER SESSION III

30-DAY READMISSION IN PATIENTS WITH CARDIOVASCULAR DISEASE: DO PATIENTS KNOW THEIR RISK BEFORE DISCHARGE?

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Cardiovascular disease (CVD) is the leading cause of disability and death in the United States, and older adults with CVD are at a high risk of readmission after discharge. This study examined whether patients' perceived risk of readmission at discharge was associated with actual 30-day readmissions in patients with CVD. A standardized survey and electronic health records (EHR) were used to collect sociodemographic, psychosocial, behavioral, and clinical data on patients admitted to the Duke Heart Center (n=730). Prior to discharge, patients were asked their perceived likelihood of returning to the hospital for an unplanned/emergency visit within 30-days. Logistic regression models were used to examine all-cause 30-day readmission among patients who perceived low versus high readmission risk. Nearly 1-in-3 patients (31.4%) perceived high-risk of readmission at the time of discharge. Life stressors, poor self-rated health, and ADL limitations were associated with perceptions of high-risk. Patients who perceived high-risk had significantly higher subsequent readmissions compared with low-risk (23.3% vs. 15.6% p=0.016). Among patients who perceived low-risk of readmission, those who were widowed, had inadequate health literacy, and reported difficulty accessing care exhibited a higher likelihood of being readmitted. In those perceiving a high-risk, nonwhites and those with poor self-rated health, difficulty accessing care, and prior hospitalizations in the past year were significantly more likely to be readmitted. These findings have important implications for identifying CVD patients at high risk of readmission within 30 days after discharge, particularly older adults who may lack adequate resources (e.g., social support, literacy, access to care).

PREMIGRATION, DISPLACEMENT, AND POSTMIGRATION EXPERIENCES OF LONELINESS AMONG HMONG OLDER ADULTS

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Available evidence highlights the detrimental impact of loneliness on the mental and physiological health of older adults. While immigrant older adults report higher prevalence for experiencing loneliness compared to native born older adults, minimal research has simultaneously explored the premigration, displacement, and postmigration experiences of loneliness among older adults with a refugee history. This study aimed to explore loneliness in these three phases among Hmong older adults, an ethnic minority group resettled in the United States as refugees over 40 years ago. Drawing on data from a constructivist grounded theory study guided by an intersectionality framework, the first author interviewed 17 community-dwelling Hmong older adults age 65 and older residing in Fresno and Sacramento, California. Two coders coded and analyzed the transcribed interviews. Findings revealed negative, disruptive, and discriminatory experiences underscored by systems of oppression grounded on the social, political, psychological, and cultural context of each phase. Influencing factors that contributed to loneliness were identified as: trust, loss, aging-related issues, isolation, sense of community, access to cultural community, instability, violence, and cultural adjustments. In specific phases, particular influencing factors were more evident and persistent in producing loneliness. Some influencing factors remained a problem for participants across all phases. With the unprecedented growth of refugees all over the world, this study highlights the need for more research, practice, and policy focused on the context of the refugee experience to gain greater insight into their loneliness experiences and expand the notion of loneliness as an individual experience.

FACTORS AFFECTING BEHAVIORAL AND PSYCHOLOGICAL SYMPTOMS IN OLDER ADULTS WITH DEMENTIA

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The purpose of this study was to identify factors predicting behavioral and psychological symptoms of dementia(BPSD) in older adults with Dementia. This is a cross-sectional study, recruiting 157 participants from neurology general hospital as study subjects. Data collection was performed from June 2018 to May 2019. BPSD were classified using a modified version of the Cohen-Mansfield agitation inventory(CMAI), which are physically non-aggressive behaviors(PNAB), physically aggressive behaviors(PGAB), verbally non-aggressive behaviors(VNAB), verbally aggressive behaviors(VAGB). The Cornell scale for depression in dementia(CSDD), korea activity of daily living scale(K-ADL), korean mini-mental state examination(K-MMSE), activity and sleep time through using actigraphy for 2weeks, salivary melatonin and cortisol level at 4 times a day done after waking up, after breakfast, before and after dinner, and medication were measured as influencing factors. The generalized linear mixed model analyses indicated that VNAB and VAGB were associated with severe depression(p<0.01, respectively), low melatonin level at the after waking up (p<0.05, respectively), and high melatonin