

negative attitudes about aging. Implications for women's development will be discussed from an Eriksonian perspective.

UNDERSTANDING ELDERSPEAK: AN EVOLUTIONARY CONCEPT ANALYSIS

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Elderspeak is an inappropriate simplified speech register that sounds like baby talk and is commonly used with older adults, especially in health care settings. Understanding the concept of elderspeak is challenging due to varying views about which communicative components constitute elderspeak and whether elderspeak is beneficial or harmful for older adults. Rodger's evolutionary concept analysis method was used to evaluate the concept of elderspeak by identifying its attributes, antecedents, and consequences. A systematic search using the PubMed, CINAHL, PsychINFO, and Embase databases was completed, resulting in the review of 83 articles. Elderspeak characteristics were categorized by semantic, syntactic, pragmatic, paralinguistic, and nonverbal attributes. The primary antecedent to elderspeak is ageism in which old age cues and signs of functional or cognitive impairment lead to simplified communication from a younger caregiver. Research studies vary in reporting whether elderspeak facilitates or interferes with comprehension by older adults, in part depending on operational definitions and experimental manipulation. Overall, exaggerated prosody, a key feature of elderspeak, is found to reduce comprehension. Elderspeak is generally perceived as patronizing by older adults and speakers are perceived as less respectful. In persons living with dementia, elderspeak also increases the probability of resistiveness to care which is an important correlate of behavioral and psychological symptoms of dementia. Based on this concept analysis, recommendations for consistent operationalization of elderspeak in future research are made. A new definition of elderspeak is proposed, in which attributes that have been found to enhance comprehension are differentiated from those that do not.

WHAT FACTORS INFLUENCE THE PERCEPTION OF LONGEVITY?

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Previous research has highlighted the link between health-related factors and longevity. In particular, indices such as poor cardiovascular reactivity, high BMI, stress, and respiratory functioning have been shown to increase risk of mortality. However, little is known about identifying specific health and psychosocial behaviors that compromise the perception of longevity in African Americans. The Study of Longevity and Stress in African Americans (SOLSAA) was designed to examine psychosocial and health factors that are characteristic of survivorship in African American families. Data from 570 participants in the SOLSAA were used to examine the relationship between psychosocial and

health-related factors among individuals aged 50 to 99 years ($M = 67.6$, $SD = 11.5$). Perception of longevity was positively correlated with sex, $r = .058$, education, $r = .021$, diastolic blood pressure $r = .067$, respiratory functioning, $r = .150$ and body mass index, $r = .027$, but negatively correlated with age, $r = -.205$, systolic blood pressure, $r = -.050$, and perceived stress, $r = -.106$. Regression analyses revealed, not surprisingly, that as participants aged, perception of longevity decreased. Furthermore, women's perception of longevity was greater than that of men even after controlling for age. Given the longer life expectancy for women, this was also expected. Interestingly, high levels of perceived stress predicted reduced perception of longevity. These preliminary results suggest that the perception of stress is an important psychosocial factor for older African American's self-forecasting of their chances for longevity beyond just simply age or physical health status.

SESSION 2979 (POSTER)

CHRONIC DISEASE MANAGEMENT II

A PRELIMINARY ANALYSIS OF HEARING LOSS AND ITS ASSOCIATION WITH MILD COGNITIVE IMPAIRMENT

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Age related hearing loss, or presbycusis, is a global condition that is increasing in its prevalence. Despite being one of the most common chronic conditions among the older population, there is much more to understand about its association with other aspects of physical and emotional health and well-being. Current research is suggesting that hearing loss is more prevalent in those with cognitive impairment compared to those without cognitive impairment. This study analyzed the incidence of hearing loss and its linkage to mild cognitive impairment in a community-dwelling geriatric population. With the increasing prevalence of this condition in both rural and urban communities of Alabama, it becomes a more pressing matter to understand comorbidities and risk factors for future decline in functioning. This study was conducted in an interdisciplinary geriatrics primary care outpatient clinic in a Family, Internal, and Rural Medicine department affiliated with a university medical center in the Deep South. Ninety-one participants completed the Montreal Cognitive Assessment (MoCA) and a hearing screening. Hearing screenings were conducted in quiet rooms in the medical center using Phonak hearing screening cards. Detection of 500, 1000, 2000, and 4000 Hz tones was assessed. Pearson correlation analyses demonstrated an association between hearing loss mild cognitive impairment. Poorer hearing was significantly associated with lower scores on the MoCA. Conducting behavioral health screenings like this in other primary geriatrics clinics and community settings could improve care and identification of patient needs