resourcefulness. Of our sample, 53.8% (N=184) reported belonging to a support group. The majority of participants (138) belonged to online support groups on Facebook, 41 reported participating in in-person support groups, 3 belonged to both in-person and online support groups, and 8 did not respond. When asked whether and how well our participants knew other families like theirs, 31% (106) said they did not know any, 40.6% (139) knew of at least one, but not well, and 28.4% (97) said they had at least one friend with a family like her own. Knowing other families like their own affected self-appraised stress, but no other outcomes. Grandmothers participating in support groups had lower mindfulness scores, higher stress, and worse mental health scores than grandmothers not participating in support groups, possibly reflecting the higher need for support among those participants.

THE RELATIONSHIP BETWEEN SOCIAL SUPPORT, AGING EXPECTATIONS, AND HEALTH BEHAVIOR IN MIDDLE AGE

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Midlife is a critical period when individuals need to actively engage in healthy behaviors for healthy aging. Although both social relations and attitudes toward aging are factors related to health behavior, little is known about their relationships based on age-related differences. The purposes of this study were to investigate the influence of social support affecting health behavior through expectations regarding aging and to examine how age affects the relationship. A cross-sectional study was conducted with data from 245 midlife Koreans (mean age= 51.5) collected by a self-administered survey. Data were analyzed using the PROCESS macro in SPSS. Social support was significantly related to expectations regarding aging (r= -.135, p=.034) and health behavior (r= .223, p<.000). There was age-related difference in the relationship between social support and expectations regarding aging (β = .007, p=.038), indicating that the relationship was much stronger in the younger group. In addition, the influence of social support on health behavior through expectations regarding aging was significant in relatively young middle-aged individuals. Our findings emphasize the importance of supportive social relationships, which could affect expectations regarding aging linked to health behavior, especially for young middle-aged individuals. It is necessary to develop psycho-cognitive programs to activate social interaction and to improve positive attitudes toward aging for more active engagement in health behaviors in midlife individuals.

SESSION 2956 (POSTER)

TECHNOLOGY II

A SYSTEMATIC REVIEW OF IN-HOME SMART TECHNOLOGY ADOPTION TO IMPROVE OLDER ADULT HEALTH AND FAMILY CAREGIVING Geunhye Park, and Erin Robinson, *University of Missouri-*Columbia, Columbia, Missouri, United States

In-home and internet-based smart technologies to improve older adult health has been rapidly developing. Technologies such as in-home sensors and smart homes enable older adults to live independently and age in place. These technologies also assist informal caregivers in their roles, thus reducing caregiver burden. However, technology adoption among older adults and family caregivers has been relatively low and reasons for technology acceptance are complex. Therefore, the purpose of this study was to conduct a systematic review of the literature, examining acceptance and adoption of in-home, internet-based smart technologies that are designed to improve health outcomes of older adults and can assist family caregivers in providing supports. This study utilized the Rew method (2011) and included peer-reviewed research articles published between 1991 and 2019 and available in: ISI Web of Science; PubMed; Scopus; CINAHL; and PsycInfo. A total of 1,227 relevant articles were identified with the search strings used and a final sample of 48 articles were included after the title, abstract, and full article review processes. Findings highlight several facilitators and barriers to technology adoption. Some facilitators to adoption include: technology familiarity, safety/security, personally tailored, non-obtrusive design, easy access, and reduction of caregiver burden. A few barriers include: cost, difficulty to use, time, stigma, privacy, data accuracy, and confidence. Additional findings will also be presented. A more thorough understanding of these facilitators and barriers to acceptance/adoption is crucial for the successful dissemination of in-home, internet-based smart technologies. Increased adoption can improve older adult health and reduce caregiver burden.

ADDRESSING THE ROLE OF SMART ROBOTIC HEALTH ASSISTANTS WITHIN THE HUMAN-MACHINE FRONTIER OF GERIATRIC HEALTHCARE

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Data for this study was acquired from three separate stakeholder focus group sessions involving nurse case managers (n = 5), social agency caseworkers (n = 5), and rural outreach providers (n = 5). Participants across all groups were asked to address the question: "When it comes to your work, what would you want a smart robot assistant to do for you?" Data from the three sessions were combined, transcribed verbatim, coded, and analyzed for thematic content. Three shared themes emerged, including health monitoring, behavioral intervention, and healthcare literacy. Relative to health monitoring, participants desired a robot that possessed functions in the form of "taking vital signs," and "tracking water and food intake." There was also a thematic agreement regarding behavioral intervention capabilities. Most notably, advisory stakeholders acknowledged a need for a smart robotic assistant to provide geriatric care recipients with "an alert or reminder to take medication." This was viewed as an essential intervention for improving medication adherence. Healthcare literacy emerged as a final theme among advisory groups. In particular, participants noted that a smart robot

should assist with bi-directional communication and translation of health care information and instructions as a way to "minimize impediments of care due to language barriers." Findings will be further used to highlight how future integration of robotic health assistants represents a viable solution in helping geriatric healthcare workers work effectively alongside machines to meet the diverse care needs of older adults in both urban and rural settings.

AGE DIFFERENCES IN THE RELATIONSHIP BETWEEN DAILY SOCIAL MEDIA USAGE AND AFFECT

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Social media platforms allow people to connect and share content online (e.g., Facebook, Twitter). Although older adults are becoming more frequent users of social media, there continue to be mixed views on whether social media positively or negatively impacts well-being. Past studies have mainly focused on cross-sectional analyses for individual differences. However, both the time spent on social media and one's affect can fluctuate on a daily basis. Thus, it is important to understand how the relationship between daily social media usage and affect varies within individuals from day to day. The current study adds to the literature by examining whether daily variations in time spent with social media are related to daily positive and negative affect and whether there are age differences in these relationships. The current study used an eight-day daily diary from the Midlife in the United States (MIDUS) Refresher dataset for 782 participants (ages 25-75). Multilevel modeling results revealed that age moderated the relationship between daily time spent on social media and negative affect: for younger adults, on days when they spent more time on social media, they had more negative affect. For older adults, on days when they spent more time on social media, they had less negative affect. Surprisingly, daily time spent on social media was not related to daily positive affect, nor did this relationship differ by age. Implications for future research are discussed with a focus on how social media usage can contribute to daily well-being for adults of different ages.

AGE-COHORT DIFFERENCES IN LONGITUDINAL ASSOCIATIONS BETWEEN THE RATE OF INTERNET USE AND MEMORY FUNCTIONING

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Cross-sectional analyses of internet use patterns among older adults find that the rate of internet use is less with greater physical and memory difficulties. It is not clear, however, how age-cohorts differ in their internet use as physical and memory difficulties increase over time. In addition to factors such as increasing accessibility (cost) and social influences, the expansion and cognitive complexity of functions performed by the internet-enabled devices over time could influence internet use patterns. In this study, we investigate how the association between internet use and episodic memory difficulties over time varies between cohorts. We analyzed longitudinal data from the Health and Retirement Study (N = 15,703 in 2002; Aged 51 and older) between years 2002-2016 using mixed effects logistic regression models.

Immediate and delayed word recall measures were used to assess episodic memory. Rate of internet use in the sample increased from 30% in 2002 to 53% in 2016. Rate of internet use among younger age groups was significantly higher in the baseline year. Younger age groups also showed a significantly higher rate of increase in internet use over time. In general, internet use decreased with episodic memory impairment. In addition to these effects, the effect of episodic memory on the rate of increase in internet use over time is lower in younger cohorts. These results indicate that younger cohorts of older adults are more likely to maintain internet use as they continue to age and therefore could better utilize technology for communication, social interactions and health interventions.

DIGITAL HEALTH INFORMATION AS FRIEND OR FOE: THE QUESTION OF (MIS)TRUST AMONG OLDER INTERNET USERS

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Gathering health information is among the major motivations for getting online among older adults who want to be better prepared with knowledge to manage their health and personal care. Prior research also showed significant gender differences in health-related use of the Internet. This research examined the effect of Internet use for health information on (a) mistrust of physician, (b) empowerment, (c) self-care, and (d) worry and/or anxiety. The sample (N=710; Mean= 48.82, SD=16.43) was randomly drawn from a national probability-based online panel. We performed genderstratified sub-sample analyses of older respondents (age ≥60, N= 194). Hierarchical linear regression analyses showed that there is a negative association between older age and feeling empowered because of using the internet for health information ($\beta = -.23$, p < .05) and a positive association between older age and mistrust of diagnosis and/or treatment of physician (β = .19, p < .05). Study respondents did not report better self-care as a result of obtaining information from the Internet ($\beta = -.15$, p > .05). Lastly, older adults reported less worry and/or anxiety because of information stumbled upon the Internet that may not be accurate ($\beta = -.25$, p < .05). Subsample analyses showed that there are gender differences. Particularly, older men reported greater mistrust (β = .32, p < .05), and less worry (β = -.44, p \leq .01) while these associations were not significant among older women. Results call for examination of the synergy of age and gender in perceived benefits of health-related Internet use.

E-MAIL-RELATED PROBLEM-SOLVING BEHAVIORS ACROSS AGE GROUPS: AN ANALYSIS OF LOG FILE DATA

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Email is one of the most common and useful online communication tools. However, older adults tend to have difficulties fully taking advantage of email. Organizing the