

## WLS at IAGG 2017

**Sunday July 23<sup>rd</sup>. 1:00pm-2:30pm Salon 5 (M)**

SESSION 285 (SYMPOSIUM) THE EFFECT OF FAMILY CAREGIVING ON THE WELL-BEING OF OLDER ADULTS AS CAREGIVERS OR CARE RECIPIENTS Chair: M. Kim, Daegu University, Korea (the Republic of) Co-Chair: L. Park, University of Wisconsin-Madison

*IS IT BENEFICIAL OR DETRIMENTAL TO WELLBEING?: CO-RESIDENCE WITH AN ADULT CHILD IN OLD AGE E. Namkung, University of Wisconsin-Madison, Madison, Wisconsin*

Increased life expectancy in parent generation and prolonged period of financial instability in child generation have made it more likely for aging parents to live with their adult children. However, little has been known about whether co-residing with an adult child has a positive or negative effect on parental well-being in old age. Using the Wisconsin Longitudinal study, this study examined (1) how co-residence affects well-being of aging parents aged 65 or older (n=6,537, Mage=71), and (2) whether the effects are moderated by limitations in Activities in Daily Living (ADL) and marital status of parents. Co-residence predicted greater depressive symptoms and poorer psychological well-being, and these deleterious effects of co-residence in later life were significant regardless of parents' marital status and ADL limitations. Given the strong effects of co-residence status on parental well-being, practitioners should assess whether or not this living situation is optimal for the well-being of the elders

**Sunday July 23 6:30-8:30pm West Hall (CC)**

SESSION LB610 (POSTER) LATE BREAKER POSTER SESSION 1

*THE DIFFERENTIAL IMPACT OF SOCIAL PARTICIPATION AND SOCIAL SUPPORT ON PSYCHOLOGICAL WELL-BEING N. Sharifian, D. Gruhn, North Carolina State University, Raleigh, North Carolina*

Being socially involved is theorized to diminish age-related declines in cognitive and emotional functioning. However, different facets of being socially involved may differentially impact functioning in older adulthood. In the present study, we aimed to expand on it by investigating the impact of two distinct aspects of social engagement - social support and social participation - to assess their impact on change in psychological well-being in two samples from the three-wave Wisconsin Longitudinal Study spanning 19 years (1992– 2011): the original high school graduate respondents and their siblings. The goal of the present study was to examine (a) age-related trajectory of psychological well-being (PWB) and (b) whether interindividual differences in social participation and social support influenced intraindividual change in psychological well-being. Using latent growth curve models, we found general declines in psychological well-being from middle to old adulthood. Social participation predicted the slope of psychological well-being, that is, individuals high in social participation demonstrated a less steep decline in psychological well-being across the three time points than individuals low in social participation. Social support, however, did not demonstrate a buffer effect on declines in psychological well-being. Developmental implications of the age-related trajectory of psychological well-being and the relationship with social participation are discussed.

**Monday July 24<sup>th</sup> 2:00pm-3:30pm Salon 15 (M)**

**SESSION 3040 (SYMPOSIUM) ORAL HEALTH IN LATER LIFE: RESEARCH CHALLENGES, OPPORTUNITIES, AND INNOVATIONS**

***PSYCHOSOCIAL INFLUENCES ON ORAL HEALTH AMONG OLDER ADULTS IN THE U.S.: DATA RESOURCES AND CHALLENGES***  
*S. Zwetchkenbaum<sup>2</sup>, D. Carr<sup>1</sup>, 1. Rutgers University, New Brunswick, New Jersey, 2. Rutgers School of Dental Medicine, Newark, New Jersey*

Disparities in oral health are well documented. Most studies use large cross-sectional health surveys, and document differentials in outcomes such as frequency of dentist visits, edentulism, and untreated tooth decay. However, important questions remain under-explored such as the impact of psychosocial factors shaping oral health treatment, prevention, and quality of life as individuals age. We provide an overview of large longitudinal data sets in the United States that are not widely used for studying oral health, yet have rich information on the family, psychological, and economic factors that enhance or impede oral health. We provide examples of the rich data available in studies like the Wisconsin Longitudinal Study (WLS) and Midlife in the United States (MIDUS), and recommend new data collection and analysis projects informed by the complementary knowledge and skills that social scientists and oral health practitioners bring to the study of later-life oral health.

**Monday July 24<sup>th</sup> 6:00pm-7:30pm Room 3011 (CC)**

**SESSION 3320 (SYMPOSIUM) SOCIAL BARRIERS TO ADVANCE CARE PLANNING IN THE UNITED STATES**

***MASCULINITY BELIEFS AND END-OF-LIFE PLANNING: DOES HEGEMONIC MASCULINITY INHIBIT PLANNING?*** *M. Ahmed, K. Springer, D. Carr, Rutgers University, New Brunswick, New Jersey*

Hegemonic masculinity refers to cultural beliefs and expectations regarding the masculine role, such as beliefs that men should be strong, self-reliant, and unemotional. Although these beliefs have been linked to avoidance of preventative health behaviors, we know of no studies exploring the ways masculinity shapes advance care planning (ACP). Using data from the Wisconsin Longitudinal Study, a longterm study of high school graduates from the class of 1957 and their siblings, we evaluate whether masculinity beliefs predict whether a man has a living will, durable power of attorney for health care (DPAHC), and has discussed his treatment preferences with care providers. We find that men who strongly endorse masculine beliefs are less like to do ACP, although these associations are partly accounted for by socioeconomic status and family structure. We discuss potential health disadvantages associated with beliefs in self-reliance and stoicism, and potential benefits of adherence to the "protector" role.

**Monday July 24<sup>th</sup> 6:00-7:30pm Room 3012 (CC)**

**SESSION 3325 (PAPER) FAMILY CAREGIVING IN CONTEXT**

***THE EFFECT OF PARENT-CHILD RELATIONSHIPS ON THE WELL-BEING OF PARENTS OF ADULTS WITH MENTAL ILLNESS***  
*E. Namkung, J. Greenberg, University of WisconsinMadison, Madison, Wisconsin*

Previous research found that caring for adult children with serious mental illness (SMI) takes a long-term toll on the well-being of aging parents. A stress process model suggests that having a child with SMI has rippling effects on the parents' relationships with their other children that have the potential to negatively affect parental well-being. However, this has rarely been tested in empirical research. We examined (1) whether the quality of relationships between aging parents and their non-disabled children mediates the effect of having a child with SMI on psychological and physical well-being of parents, and (2) whether mothers and fathers are differentially affected. Using the Wisconsin Longitudinal Study, we analyzed 7,411 aging parents (Mage=71) regarding their relationship quality (i.e., feeling of ambivalence, and its positive (solidarity) and negative (conflict) components) with each of their adult children (n=23,440, Mage=44). Structural Equation Modeling was used to estimate the mediation models. Results indicated that parental ambivalence fully mediated the association of parenting a child with SMI on depressive symptoms, and it partially mediated the association on physical health outcomes, including self-rated health, physical symptoms, and health-related quality of life. When feelings of solidarity and conflicts were modeled as separate mediators, only feeling of conflicts significantly mediated the associations. Feelings of ambivalence toward children had stronger effects on the well-being of mothers relative to the effects on the well-being of fathers. In consideration of the role of intergenerational relationships in parental well-being, these findings call for family-level interventions when working with individuals with SMI.

**Tuesday July 25<sup>th</sup> 11:30am-1:30pm West Hall (CC)**

**SESSION 3630 (POSTER) GENETICS**

***VASCULAR DEPRESSION FUNCTIONS INDEPENDENTLY OF APOE GENOTYPE: THE WISCONSIN LONGITUDINAL STUDY***  
*R. Scott, D. Paulson, Department of Psychology, University of Central Florida, Orlando, Florida*

Studies evaluating the effect of Apolipoprotein E (ApoE) on vascular depression are sparse, employ heterogeneous methods, and yield inconsistent results. One possibility is that ApoE is a moderator of another predictor such as cerebrovascular burden (CVB). This longitudinal study examines the relationships between ApoE, CVB, and depressive symptomatology in a large cohort sample from mid-life to laterlife. Data include 3,203 participants across 18 years from the Wisconsin Longitudinal Study (baseline mean age=53). Depressive symptomatology was measured using the CES-D. CVB was operationalized as hypertension, high blood sugar, diabetes, and other heart problems. ApoE genotyping was completed using saliva samples. Hypotheses were examined via repeated-measures ANOVA and a moderated path model. RM-ANOVA results indicated no significant within-subjects effect of time, time×CVB interaction, or time×ApoE-carriage interaction on depressive symptomatology. Between-subjects effects yielded CVB as a significant predictor of depressive symptomatology ( $F(1, 2327)=16.274, p<.001, \eta_p^2=.007$ ); this effect was not evident for ApoE-carriage. Results supported the hypothesized path model (RMSEA=0.041; CFI=0.959), however ApoE-carriage was not a significant moderator of the 2004 or 2011 vascular depression effect. The present findings do not implicate ApoE as a predictor of depressive symptomatology, or as a moderator of the vascular depression effect, in a large sample of adults spanning 18 years. Results are consistent with some past findings and inconsistent with others. Some work suggests genetics research is vulnerable to type-1 errors, though file-drawer effects remain difficult to quantify. Findings suggest ApoE carriage may not influence expression of depressive symptoms among older adults.

**Thursday July 27<sup>th</sup> 8:00am-9:30am Room 3003 (CC)**

***SESSION 5005 (SYMPOSIUM) A PRIMER ON THE WISCONSIN LONGITUDINAL STUDY: 60 YEARS OF SOCIAL DATA COMBINED WITH GENETIC DATA***

The Wisconsin Longitudinal Study is a panel study covering over sixty years, making it an excellent data source for researchers interested in linking early-life characteristics to later-life outcomes. The study is a sample of one in three Wisconsin high school graduates, and a selected sibling, from the class of 1957. WLS is unique among major social scientific resources for the length with which it has followed a large population-based cohort sample and the inclusion of siblings. The most recent round of data was collected between March of 2010 and December of 2012. The data cover nearly every aspect of the participants' lives from early life socioeconomic background, schooling, family and work to health, social participation, civic engagement, well-being, and cognition. The study also has a wealth of unique data including examples such as administrative IQ scores from high school, information collected from high school yearbooks that include measures of attractiveness, proxy measures for obesity, anthropometric and functioning, and complete lists of student activities for all respondents. Examples of administrative data include Medicare records, Social Security records, and resource data on primary and secondary schools attended by participants. At the cellular level, DNA data (to be released in the Fall of 2016) can be merged with fifty-five years of social data. This session will introduce the study to researchers who are not familiar with the data by providing an overview of the study as well as practical information on the structure of the data. Attendees will be provided with a USB containing documentation and the public data.

***WHAT IS IN THE WLS? AN OVERVIEW OF SURVEY CONTENT ACROSS TIME P. Herd, University of Wisconsin, Madison, Wisconsin***

This presentation will provide an overview of the WLS data. Survey years include 1957, 1964, 1975, 1993, 2004, and 2011. The content of the WLS has changed to reflect the life course of participants: education inspired the initial data collection, familial and career outcomes focused data collection in midlife, and later rounds have shifted attention to respondent's health, cognitive status, psychological and other dimensions of wellbeing, non-work activities, and caregiving and social support. Some examples of non-survey derived measures include: parent earnings from state tax records (1957–60), high school IQ scores; characteristics of high schools and colleges, employers, industries, and communities of residence; archival data on high school and elementary school resources; information on social participation, facial obesity, and attractiveness from yearbooks; matches to the National Death Index; Medicare claims data; and Social Security Earnings and Benefits.

***GENETIC AND MICROBIOME DATA IN THE WISCONSIN LONGITUDINAL STUDY C. Atwood, P. Herd, University of Wisconsin, Madison, Wisconsin***

The WLS has GWAS data on 9400 participants. The inclusion of genetic data allows analyses linking genotypic, biomedical, psychosocial, and life course outcomes in novel ways. The WLS is a unique resource that is well suited for replication of findings from existing studies in a populationbased sibling-design sample. More recently we piloted a study to collect stool samples in order to analyze participants' gut microbiome to study its relationship to human health. We are also doing ground-breaking research on the relationship between the gut microbiome and behavioral and social outcomes. One area of interest is examining how the unique mix of microbes in our gut may have much to do with why some diets work for some people but not for others. We expect that a healthy microbiome depends on our genes, diet, and our environment; all of which are measured within the WLS.

*HOW TO ACCESS AND USE DATA FROM THE WISCONSIN LONGITUDINAL STUDY C.L. Roan, University of Wisconsin-Madison, Madison, Wisconsin*

With over 27,000 analysis variables covering more than 55 years of data, new users of the WLS data may find themselves overwhelmed when looking for the measures they need to answer their research questions. We will give detailed instructions on how to use the tools and reference materials developed by WLS staff. Attendees will learn how to search for analysis variables, where to find copies of the survey instruments online, and how to download the public data. We will also explain the organizational structure of the data, variable naming conventions, and offer recommendations on how to break the data into smaller pieces if your computing resources are limited. Participants in this symposium will also learn about the differences between publicly available data and the small subset of data available only by application. Finally we will explain how to apply to use the genetic data and other non-public data.