the methylobe as physiologically relevant and implicates culture aging as an important feature in known epigenetic aging phenomena.

Session 1020 (Symposium)

AN EXPLORATION ON TRUST
Chair: Elena Portacolone

“Trust is a form of love,” explained a study participant. As a form of love, trust nourishes connections and accelerates progress. As a result, the purpose of this session is to reflect upon the notion of trust and examine how trust moves science and social justice forward. Trust must be seen as sustained or broken over multiple generations. Moreover, trust between older adults and medical and social support institutions has profound implications for this historical moment. In the COVID-19 pandemic, trust can be viewed as a facilitator of emergency responses in the State of Washington as noted in Dr. Berridge’s paper. On the other hand, distrust and a related sense of abandonment contributes to Black Americans’ limited uptake of COVID-19 vaccinations, as noted in Dr. Johnson’s work. On a related note, Dr. Perry’s work shows that lack of trust over time has led those aging with hemophilia to withdraw from care at different points in their own trajectories. Finally, on a positive note, Dr. Kotwal’s work illustrates the role of a peer outreach intervention in facilitating trusting relationships among diverse, low-income older adults which led to sustained reductions, over a 2-year period, in loneliness, barriers to socializing, and depression. This symposium on trust highlights how researchers work, either consciously or unconsciously, within a continuum of trust in their participants’ communities. At a broader level, systemic attention to building trust from academia, government, and national advocacy organizations holds the potential to foster meaningful scientific engagement and empowerment of historically marginalized communities.

THE SIGNIFICANCE OF TRUST IN WASHINGTON STATE’S AGING NETWORK COVID RESPONSE

In late summer of 2020, we interviewed 45 senior leaders of social services and health care organizations serving older adults throughout Washington State about service demand, new challenges, and organizational adaptations. These organizations work with people made particularly vulnerable in the pandemic. A significant share reported that half or more of their clients live at or below the poverty line (54%), are people of color (29%), or have limited English language proficiency (20%). The state’s aging network leveraged strong partnerships, expertise, and community knowledge to provide trusted essential services to older Washingtonians and their caregivers. The role of trust as an enabler of emergency response and connection in the context of gentrification, the digital divide, employment loss, and language service gaps will be discussed, as will lack of trust as a barrier to service access, particularly for Latinx immigrant and migrant older adults.

A PEER INTERVENTION FACILITATES TRUST AND IMPROVES PSYCHOSOCIAL WELL-BEING IN DIVERSE, LOW-INCOME OLDER ADULTS
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We evaluate a peer outreach intervention to improve the psychosocial well-being of diverse, low-income older adults. Participants (N=74, Age 58-96 years) were recruited from an urban senior center and matched with peers who were >55 years old, received mental health training, and connected participants with health or social activities. We conducted surveys at baseline and 6-month follow-up for 2 years with validated measures of loneliness, social interaction, barriers to socializing, and depression, and thematically analyzed qualitative, semi-structured interviews conducted among a subset of participants (n=15) and peers (n=6). Participants were 58% male, 18% African-American, 19% Latinx, and 8% Asian. Over 2 years, participants experienced sustained reductions in loneliness (p=0.015), depression (p<0.001), and barriers to socializing (p<0.001). Qualitative interviews detailed the role of longitudinal relationships, program flexibility, and the matching process in facilitating trust, motivation, and improved mood. Results can inform larger efficacy studies and implementation of peer-driven community programs.

CHANGING TIME HORIZONS AND TRUST EXPERIENCES OF AGING WITH HEMOPHILIA
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Trust among those who have experienced a lifetime of medical encounters warrants attention to how trust is both cumulative and complex. This study of a historically isolated cohort incorporates interviews (n=25 older adults/professionals) and focus groups uses a lens of trust to highlight the experiences of those aging with hemophilia, individuals who never expected to age. Understood through the lens of trust, the data show evidence of the absence of safe spaces particularly during the early 80s - blood contamination concerns and homophobia-leading often to social withdrawal. Over time, however, some individuals and families created trusted venues to begin demanding research, treatment and policy change. Advocacy re-engaged the community to organize, educate and advance safety protocols for blood product manufacturing and distribution. This presentation will illuminate how experiences with medical providers, contaminated blood supplies, stigma and uncertain in other spheres of one’s life make trust a co-constructed, fragile concept.