planning and conducting studies now that they hope to publish later.

GSA MANAGING EDITORS’ PERSPECTIVE ON SUBMISSION DOS AND DON’TS
Kathleen Jackson, The Gerontological Society of America, Washington, District of Columbia, United States

In this presentation, the managing editors of GSA’s peer-reviewed journals will discuss how the editorial offices operate and their roles in the publishing process. The topics will include how to navigate the ScholarOne submission system, why it is important to read the Instructions to Authors, and how authors can work with the editorial offices to increase the visibility and impact of their published articles.

Session 2255 (Symposium)

LEVERAGING A POPULATION-BASED DYADIC DATA SET TO PROMOTE HEALTH EQUITY AMONG CHINESE AMERICANS
Chair: XinQi Dong, Co-Chair: Dexia Kong

Recognizing the central role of family-oriented values in Chinese culture, developing a family-based understanding of health and wellbeing in Chinese Americans is imperative. By linking two unique population-based datasets (one on Chinese older adults, and another on their corresponding adult children caregivers), the purpose of this symposium is to present interactive analyses of dyad-level data to achieve an interpersonal understanding of health outcomes of Chinese older adults and their adult children within the family context. Data were obtained from 807 Chinese older adults-adult children dyads by merging data from two epidemiological studies, namely the Population Study of ChinEse Elderly in Chicago (the PINE study) and the PIETY study of corresponding adult children caregivers of PINE participants. Specifically, this symposium presents findings from five interconnected research projects. Session 1 provides an overview of study design and sample characteristics of the dyadic dataset. Session 2 examines the relationship between adult children’s endorsement of the filial piety value and older parents’ mental health outcomes. Session 3 investigates the level of congruence between older parents’ self-perceived mental health and adult children’s evaluation of their parents’ mental health. Session 4 investigates the extent to which depressive symptoms among older parents were associated with those of their adult children. Session 5 explores the relationship between older parents’ physical function and adult children’s perceived caregiving burden. Taken together, this symposium presents potential contributions of dyad-level analyses in advancing minority population health. Study findings have the potential to inform the development of family-centered intervention strategies targeting Chinese Americans.

DYADIC DATA ON U.S. CHINESE OLDER ADULTS AND THEIR ADULT CHILDREN: STUDY DESIGN AND SAMPLE OVERVIEW
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This paper aims to describe study design of the unique dyadic older Chinese American-adult children dataset, and present sample characteristics of the dyads. A total of 807 older parents were matched with their adult children (characteristics of matched versus not matched participants will be compared). On average, adult children were 48 years old, had 12 years of education, lived with 3 persons in household, had 2 children, and lived in U.S. for 17 years. Approximately 65% of the adult children sample were female, 82% married, 93% preferred to speak Chinese dialects, and over 97% foreign-born immigrants. On the other hand, older parents were 74 years old, had 7 years of education, lived with 3 persons in household, had 3 children, and lived in U.S. for 17 years on average. About 60% of the older parent sample were female, 73% married, over 99% foreign-born immigrants who preferred to speak Chinese dialects. Filial piety is an important Chinese cultural value that prescribes child behavior towards their parents, but little is known about its relationship to the parents’ psychological wellbeing. This study utilizes dyad data from the PINE and PIETY Studies. Filial piety was measured by asking how much the participant thought children should 1) care; 2) respect; 3) greet; 4) please and make happy; 5) obey; and 6) provide financial support to their parents. Depressive symptoms were measured by Patient Health Questionnaire-9 with a cutoff of 5 indicating the presence of depressive symptoms. Logistic regressions were used to examine the associations controlling for both children’s and parents’ sociodemographic characteristics. Higher filial piety in happy (OR:0.80, (0.63-0.99)) or obey (OR:0.83, (0.68-1.00)) was associated with a lower likelihood of depressive symptoms among parents. Future research should explore the potential causal relationships between children’s filial piety and parents’ mental health.

PARENTS’ SELF-REPORTED VERSUS CHILD EVALUATION OF PARENTS’ MENTAL HEALTH OUTCOMES: IS THERE A DIFFERENCE
Dexia Kong,1 Qun Le,1 XinQi Dong,2 and Yingxiao Hua,1 1. Rutgers University, New Brunswick, New Jersey, United States, 2. Rutgers University, Rutgers Institute for Health, New Jersey, United States

Older Chinese-Americans are more likely to experience depressive symptoms compared to the general U.S. aging population. This paper aims to examine the level of congruence between parents’ self-reported mental health and children’s evaluation of their parents’ mental health. Dyad-level understanding is particularly relevant considering the family-based medical decision-making preference in the Chinese-community. Older parents’ depressive symptoms were measured by PHQ-9 with a cutoff of 5 indicating the