COPING VARIABILITY AND ITS ASSOCIATION WITH ALL-CAUSE MORTALITY
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Coping strategies – cognitive, behavioral, and emotional tactics used to manage stressors – are associated with morbidity and mortality. Between-strategy coping variability, defined as (un)evenness in usage across coping strategies, may reflect context-specific coping and account for additional variance in health outcomes beyond mean strategy use. This study examined prospective associations of mean coping strategy use and between-strategy coping variability with time to death in 823 men from the Normative Aging Study. In Cox proportional hazard models, 1-SD higher in mean usage of positive action, negative action, prayer, withdrawal, and substance use strategies was associated with 17-32% greater risk of all-cause mortality over 27 years, after adjusting for baseline demographics, health status, and depression. Contrary to prior research, mortality risk did not differ by coping variability. We will consider findings within the stress and coping framework and discuss implications for biobehavioral pathways linking coping to all-cause mortality.

SESSION 2630 (AWARD LECTURE)

M. POWELL LAWTON AWARD PRESENTATION AND LECTURE
Chair: Tiffany Washington

The M. Powell Lawton Award Lecture will feature an address by the 2021 recipient David L. Roth, PhD, FGSA, of Johns Hopkins University. This session will also include the presentation of the 2022 M. Powell Lawton Award to recipient Jon Pynoos, PhD, FGSA, FAGHE, of the University of Southern California. The M. Powell Lawton Award is presented annually to an individual who has made outstanding contributions from applied research that has benefited older people and their care. The Lawton Award is generously funded by the Polisher Research Institute of Abramson Senior Care.

FROM STRESSED CAREGIVERS TO HEALTHY CAREGIVING: THE IMPLICATIONS OF BALANCED PERSPECTIVES AND UPDATED FINDINGS
David Roth, Johns Hopkins University, Baltimore, Maryland, United States

Research on family caregiving continues to evolve and stress process models are now frequently balanced by perspectives of benefits emanating from prosocial behaviors including caregiving and volunteering. Initial findings that caregivers have elevated inflammation levels and shorter life expectancies than non-caregivers have been contradicted by numerous more recent findings from larger, population-based, epidemiological studies. In many ways, the caregiving literature shows a bias pattern that is sometimes found in other areas, where initial studies with relatively small samples and alarming results are widely cited, whereas subsequent studies with larger samples and contradicting results are given much less attention. A minority of caregivers are highly stressed, but most caregivers are resilient and face other challenges besides stress-related health problems. Caregivers are the backbone of long-term care, and interventions and policy initiatives to support caregivers are vital, but should be based on replicable findings of verifiable challenges to vulnerable caregiving subgroups.

SESSION 2640 (SYMPOSIUM)

METHODOLOGICAL APPROACHES TO GERONTOLOGICAL CANCER RESEARCH
Chair: Sean Halpin

The wide range of gerontological cancer research necessitates a variety of methodological approaches. In our symposium, we bring together researchers who represent varied approaches to studying multiple cancer types—with a focus on demonstrating how to apply different methods. First, Ye, will discuss the use of a unique cross-sequential design to facilitate comparison between health change in long-term older cancer survivors and demographically-matched older adults with no history of cancer. Zanwar, will present disparities in cancer screening using secondary nationally representative complex survey data, provide examples of survey data that can be utilized in aging and cancer prevention and control research, and present challenges and opportunities for using survey data. Von Ah, will discuss research methods pertaining to a series of non-pharmacological clinical trials and offer insight to reducing barriers and improving acceptability to technology-based intervention programs in older breast cancer survivors. Next, Castaneda will present quantitative (i.e., group trajectory modeling, conditional Poisson regression) and qualitative approaches to understand the role of monoclonal gammopathy of undetermined significance in healthcare utilization and progression to multiple myeloma. Last, Halpin will discuss the use of naturally occurring data such as participant observation and audio recordings to evaluate education for patients with multiple myeloma preparing for autologous stem cell transplant. Understanding how a variety of methodological approaches are applied to gerontological cancer research will help facilitate a broader understanding of the tools available for these studies.

DIFFERENCES IN HEALTH TRAJECTORIES BETWEEN CANCER SURVIVORS AND NONCANCER OLDER ADULTS
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The current study addresses how cancer and aging influence older adults’ health trajectories differently. The unique cross-sequential design allowed the study to compare the health changes between long-term (5 years +) older cancer survivors (breast, prostate, and colorectal cancer) and demographically-matched older adults without a history of cancer in the same geographic area within