A mode of transportation was driving compared to those who were transportation cost-burdened (p = .016). Results suggest that transportation experiences are significant factors in the social relationships among senior center members. Finding ways to reduce transportation cost burden and the frequency of attendance, having missed going to the senior center due to a lack of transportation was associated among 42 senior center members. Several transportation-related factors and the frequency of contact with others) demonstrated significant associations with CD. The stratified analyses showed that the CD-mortality association was stronger among those with a small SN (1.62 [1.40–1.87]) than a large SN (1.26 [1.12–1.41]). Conversely, the association was weaker in living-alone individuals (1.11 [0.90–1.38]) than in cohabiting individuals (1.46 [1.33–1.61]). Although living alone and having a small SN (1.62 [1.40–1.87]) than a large SN (1.26 [1.12–1.53]). We examined the interaction between socio-demographics, health behaviors/conditions, and CD on mortality risk (hazard ratio [95% confidence interval] = 1.40 [1.28–1.53]). We found that CD was associated with a higher mortality. Only household composition and social network (SN; [1.28–1.53]). We examined the interaction between socio-demographics, health behaviors/conditions, and CD on mortality risk (hazard ratio [95% confidence interval] = 1.40 [1.28–1.53]). We found that CD was associated with a higher mortality risk.
that have marginalized identities themselves and deal with serving marginalized populations are more likely to have staff workers. Additionally, long-term care services and supports unemployed or face more challenges at work than younger COVID-19. For older workers, they are more likely to remain experienced discrimination over the life course are at increased risks and life outcomes. Marginalized older adults who have experienced discrimination over the life course are at increased risks and life outcomes. Marginalized older adults who have experienced discrimination over the life course are at increased risks and life outcomes. Marginalized older adults who have experienced discrimination over the life course are at increased risks and life outcomes.

Rowan-Virtua School of Osteopathic Medicine, The New Jersey Institute for Successful Aging (NJISA), in collaboration with the New Jersey Division of Aging Services (DoAS) and Respecting Choices, implemented a state-wide project training workforce professionals in Advanced Care Planning (ACP) conversations with older adults. The concept: pro-actively leverage the long-term care management relationships in community-based, high-touch programs. NJISA identified Respecting Choices, an evidenced-based program approved by the Administration for Community Living. Respecting Choices offers standardized certification for ACP facilitators and instructors, paving a pathway for workforce sustainability. To achieve state-wide penetration, NJISA partnered with NJ DoAS to target staff and professionals serving the state aging network. NJ DoAS provided access to county-level case managers serving the Jersey Assistance for Community Caregiving (JACC) program, Program of All-Inclusive Care for the Elderly (PACE) nurses and social workers, and NJ DoAS staff. Also included in training efforts were staff from select senior affordable housing sites. With funding support through the New Jersey Health Foundation, NJISA and Respecting Choices offered virtual, live training course for certification of First Steps ACP facilitators and instructors and Design and Implementation for state aging networks, and ACP Instructors. NJ DoAS modified the electronic documentation system utilized by JACC staff to capture ongoing ACP conversations and outcomes. Despite barriers and mid-course corrections, training totals include (30) certified ACP Facilitators, (3) leaders for Design and Implementation, and (5) certified ACP Instructors. Response to curriculum was positive; participants indicating greater confidence navigating ACP conversations. Future plans to continue dissemination have been discussed.