2017 Poster Winners

Conference Series on
Aging in the Americas

First: Sean Angst, University of Southern California, *"The Costs of Caring: Familial Dynamics and the Effects of Universal Pension Transfers on Elder Care in Mexico."*

Second: Melanie Plasencia, University of California, Berkeley, *"'No Tengo Dinero, Pero Tengo Mucha Gente': How Older Latinos Age in Place in an Ethnic Enclave."*

Third: Sandra Hernandez, University of Southern California, *"Programa Esperanza: Life Stress Events among Latinos with Late-Life Depression."*

First Place

The Costs of Caring: Familial Dynamics and the Effects of Universal Pension Transfers on Elder Care in Mexico

Sean Angst, University of Southern California

In 2008, the Mexican state of Yucatan began implementation of a noncontributory pension program for adults' age 70 and older in the cities of Valladolid and Motul. This analysis utilizes base-line surveys to assess the distribution of caregiving among family members as well as the effect of elder health, socio-economic status, and family composition on caregiving time. Heckman selection models were used to examine familial caregiving contributions by gender. This analysis was conducted at three levels using the full sample, nuclear family sample, and son – daughter groups overall. The outcome variables of interest include total hours and standardized shares of care hours, which take into account an equitable distribution of responsibilities. The female-to-male caregiving gap was roughly 60.1 hours per month in the total sample, while daughters provided 58% more time caregiving than under an equitable split among siblings. Male caregiving time appears more flexible and was found largely dependent on elder health. In addition, a negative correlation existed between male caregiving time and the number of daughters in a given family. For daughters, those whom were the youngest child experienced greater caregiving time. Improved conditions for caregivers and compensation must be guaranteed to maintain informal care in the future. Initial evidence from this analysis suggests that access to social security benefits may reduce caregiver burden, foster better care, and improve gender equality. Additional interventions needed to alleviate caregiver burden include enhanced training, employment flexibility, and formal support for the elderly.

Second Place

"No Tengo Dinero, Pero Tengo Mucha Gente": How Older Latinos Age in Place in an Ethnic Enclave

Melanie Z. Plasencia, University of California, Berkeley

Previous studies report inconsistent results on obesity as a risk factor for cognitive decline in late-life. This study examined body mass index (BMI) and waist circumference (WC) as predictors of cognitive decline in older Mexican Americans over 17-years. Data are from seven waves of the Hispanic Established Population for the Epidemiological Study of the Elderly (H-EPESE). The outcome was cognitive function measured with the Mini-Mental State Examination (MMSE). BMI and WC were predictors, and socio-demographics, depressive symptoms, and medical conditions were covariates. The sample included 2,061 participants with baseline MMSE scores of 21 or greater and with complete baseline data on all variables. Using linear mixed models, baseline BMI ≥ 35 kg/m2 was associated with the slowest rates of decline in total MMSE and nonmemory domain scores (β= 0.16, SE=0.05, p=0.002 and β= 0.12, SE=0.04, p=0.001, respectively). The underweight category (BMI < 18.5 kg/m2) was associated with the fastest declines in total MMSE and nonmemory domain scores (β= -0.64, SE=0.18, p=0.0004 and β= -0.52, SE=0.14, p=0.0002, respectively). Rates of decline in memory domain scores did not vary by BMI. However, BMI was significantly associated with memory domain scores in the fully-adjusted mixed model only when WC was included. This result indicated that central obesity was associated with relatively poor memory function. Late-life high BMI categories were associated with slower rates of decline in cognition function while underweight BMI was associated with faster cognitive decline. Central obesity was consistently associated with relatively poor memory function over time.

Third Place

Programa Esperanza: Life Stress Events among Latinos with Late-Life Depression

Sandra Hernández, MSW; University of Southern California

Using baseline data from a pragmatic clinical trial, "Programa Esperanza," we examine sociodemographic and clinical data on over 250 participants between 56 and 94 years of age including acute life stress events which are known risk factors for trauma-induced reactions such as depression and anxiety. Our predominantly immigrant (93%) and Spanish-speaking (92%) sample reported on average over 3 (3.41) life events. The top four endorsed events were (1) serious financial problems (54.44%); (2) death of a close other (54.05%); (3) recent illness or injury to self (51.74%), and (4) serious illness/injury in family member/friend. PHQ-9 depression scores at baseline indicate about 1 out of 4 participants scored in the moderate to severe depression range (74.1%). About 57% reported moderate to severe anxiety based on GAD-7 scores. Although our sample on average lived in the USA for over 35 years (35.93 years/non USA-born), they remained monolingual Spanish-speakers into their old age, and preferred all study materials and procedures in Spanish. Our study shows that aging in place for this clinical sample of Latin American immigrants residing in a large metropolitan area includes serious challenges such as high depression and anxiety levels, and serious life events (financial, serious illness including death in close others, and serious illness in self). Psychosocial interventions for depression treatment that are person-centered and culturally-adapted can address these challenges as participants (re) learn managing their psychological, social and physical needs and environments.