

physical and/or cognitive deterioration in oneself or one's partner, which are associated with increased depression and loneliness. Understanding the mechanisms and identifying effective measures that strengthen their capacities to cope are therefore very important. Extensive research has suggested that active music-making with others has many psychosocial benefits for older adults. This study explored in detail the musical experiences drawn from different settings of Japanese and Hong Kong music communities. Semi-structured group interviews were conducted for members of music-making groups in Japan and Hong Kong who regularly practised, rehearsed, and performed their instruments together in community settings. A phenomenological approach was used to capture and analyse their lived experiences. A needs satisfaction theoretical framework was adopted to shed light on links between their musical engagement and wellbeing outcomes. Active musical engagement was found to be an important source of support for older musicians' psychological needs. It was central to their positive identity development and sense of purpose in old age. The presentation will further elaborate on underlying mechanisms that linked social, emotional, and artistic experiences of active musical engagement to wellbeing. This study identified active musical engagement as an effective agent in healthy ageing. Differential manifestations of need-supportive practices in musically and culturally distinct communities in Japan and Hong Kong were also described, giving evidence for the positive value of community music groups for promoting mental health and wellbeing.

QUALITY OF LIFE IN OLDER ADULTS RECEIVING IMMUNE CHECKPOINT INHIBITOR THERAPY

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Immune checkpoint inhibitors (ICIs) have generated significant excitement for their ability to extend survival in patients with lung, head and neck, and other cancers. In older adults with cancer, emerging research suggests that ICIs improve overall and progression-free survival, but few studies have reported on quality of life (QOL). The goal of this study was to examine changes in QOL over time in older (65+ years) vs. younger (<65 years) lung and head and neck cancer patients. Eligible participants scheduled to begin ICI for lung or head and neck cancer completed the Functional Assessment of Cancer Therapy General (FACT-G) every 2-4 weeks until disease progression. Controlling for cancer site, age group differences in QOL over time were evaluated using linear mixed models. A total of 80 lung cancer (mean age=66.5, 55% female, 55% aged 65+) and 55 head and neck cancer patients (mean age=61.5, 15% female, 45% aged 65+) provided consent. At baseline, patients with head and neck cancer reported significantly lower overall QOL, physical well-being, and emotional well-being compared to patients with lung cancer ($p < .0001$). Older patients had marginally higher baseline emotional well-being

than younger patients ($p = .07$). Across groups, there were increases in social well-being ($p = .04$) and a trend toward decreasing physical well-being ($p = .10$) over time. Patients with head and neck cancer reported lower emotional well-being over time than patients with lung cancer ($p < .01$). There were no age differences in QOL over time. Larger longitudinal studies are needed to better understand QOL in older patients receiving ICIs.

PSYCHOSOCIAL FACTORS INFLUENCING DEPRESSIVE SYMPTOMS AMONG OLDER ADULTS FROM NORTHERN INDIA

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Global data show a significant increase in the number of adults 65+ years of age in India. Despite this increase, there is a dearth of available resources to adequately service their mental health needs. Data indicate that residents in Northern India, in particular, report poorer mental health outcomes than those in the South. The prevalence and impact of neuropsychiatric disorders and depression remain particularly significant, but largely unexplored. The aim of this study was to examine possible psychosocial and health factors affecting depressive symptoms in North India. Data were taken from the Longitudinal Ageing Study in India (LASI). Participants included adults aged 45 years and above ($n = 792$), from the states of Rajasthan and Punjab. A multiple linear regression model was calculated to determine the influence of identified demographic and psychosocial factors (e.g., financial and social support, life satisfaction) on depressive symptoms. Data show that low life satisfaction ($\beta = -0.19, p < 0.001$), poorer self-reported health ($\beta = 0.15, p < 0.01$), and being a care provider ($\beta = -0.12, p < 0.01$) were significant predictors of depressive symptoms. These results indicate an increased need for care-giver mental health support along with policy aimed at awareness about caregiver burnout, health care access, and economic instrumental support services. A magnified view of the impact of life satisfaction on depression will be of immense value for understanding the unique needs and challenges of working with this population.

THE IMPACT OF SUBJECTIVE WELL-BEING ON LONGEVITY AMONG OLDER ADULTS

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Objectives: People tend to believe happier people live longer. However, relatively few empirical studies have examined the influence of subjective well-being (SWB) on longevity among older adults. Thus, our study investigated the impact of SWB on longevity among older adult using national representative longitudinal data in the U.S. Methods: Drawn from the National Health and Aging Trends Study, 6,757 older adults aged 65 or older with completed information of SWB from 2011 were selected and followed until 2017 annually. The Kaplan-Meier estimator was used to estimate the survival time between different levels of SWB without covariates. In addition, the Cox Proportional Hazards Model was used to investigate the impact of SWB on longevity while adjusting the influences of covariates. Results: We found that a higher level of SWB predicted longer survival times