

recalled in two memory tests (immediate/delayed), ranging 0–20. Significant predictors of memory decline (MD) in a hierarchical regression analysis (Model-1) were: total words remembered at T1, T1-ADL, T1-depression, depression change, T1-age, and T1-education. Early retirement and work type, added to Model-2, were found significant predictors as well, increasing significantly the explained variance of MD (from $R^2=0.28$ to $R^2=0.44$). We conclude that early retirement and work type are significant predictors of MD even when controlling for socio-demographic characteristics, health/function status and changes in health/function. Appropriate interventions to reduce decline in cognitive capabilities should be developed.

WORK, AGING, AND COGNITIVE FUNCTIONING IN JAPAN: TYPE OF WORK MAKES A DIFFERENCE

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This study aims to examine relationship between type of work, retirement process and cognitive functioning in old age. I used macro statistics and panel data from the Japanese Study of Aging and Retirement (JSTAR) to compare with other countries' data (HSR, SHARE, and ELSA). Cognitive function is measured by word recall test.

Based on national statistics, Japanese labor force participation is somewhat higher than European developed countries. The result of descriptive analysis and panel data analysis of JSTAR data is that the cognition score of high-skilled white collar is better than blue collar's one, however is not different from not-working. Additionally, small educational differences exist.

The result is very contrast to European developed countries' evidences. The results suggest the importance of social and institutional aspects of an employment management system and a well-developed inner labor market in Japan.

SESSION 4065 (SYMPOSIUM)

ELDER-CENTERED COMMUNITY CARE: REVISING AND STRENGTHENING CAREGIVING IN ALASKA NATIVES

Chair: R.M. Rosich, *University of Alaska, Anchorage, Anchorage, Alaska*

Co-Chair: J.P. Lewis, *University of Alaska Anchorage, Seattle, Washington*

Discussant: M.C. Crouch, *University of Alaska Anchorage, Wasiila, Alaska*

There is a growing field of research on the health impacts for caregivers and the available and needed support services in rural and tribal communities. Research has mostly focused on a specific western definition of caregiver (i.e., primary caregiver) and the pre-supposed supports needed for these individuals based on a dominant paradigm. In the dominant, western caregiver dyads, there tends to be the individual with Alzheimer's Disease and Related Disorders (ADRD) and their primary caregiver whose role is to take charge of their care, finances, support, and so on. In many cases, it is a family member who assists a person with dementia and their Activities of Daily Living (ADLs). However, the current field of research recognizes that cultural frameworks are an important influence in a family's and community's

approaches to caring for their loved one with dementia. This symposium will discuss the current western models of caregiving dominant in the United States and Alaska, focusing on person centered care, and how they differ from the community-based elder-centered models of care found to be emerging in rural Alaska. We will also share findings from a study to discuss the cultural beliefs of Alaska Native caregivers and Elders around (ADRD) and caregiving. In addition, we will also highlight how these findings can influence policy change to encourage rural and urban agencies and service providers to provide more culturally sensitive and meaningful care.

PERSON-CENTERED CARE AND ALZHEIMER'S DISEASE AND RELATED DISORDERS: ALASKA NATIVE CAREGIVING

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It has been difficult to access prevalence rates for ADRD's within Alaska Natives, however a study focusing upon Alaska Native Elder perceptions of memory functioning/dementia is indicating that is occurring. This study is also indicating that there is a need to understand the health experiences of Alaska Native communities from non-native perspectives in order to develop and implement culturally appropriate and effective supports for Alaska Native primary caregivers dealing with dementia. Within the United States, as well as regionally within Alaska, person centered care (PCC) is an approach that is being utilized with caregivers in meeting the needs of persons with dementia. Although PCC as a concept holds universal appeal, it holds a different meaning for Alaska Natives. This presentation will focus upon person centered care from a western perspective and sets the stage as to how it differs from a community-based elder-centered model of care emerging within rural Alaska.

CAREGIVING AND THE ALASKA NATIVE ELDER: SPIRITUALIZING AND INDIGENIZING SYSTEMS OF CARE

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Alaska Native (AN) peoples represent eight distinct tribal groups comprised of over 220 federally recognized tribes. The diversity and complexity of AN culture is vast and ubiquitous. However, in the face of tribal autonomy, AN peoples share common beliefs, goals, and challenges to care which are made manifest by geography, cultural expectations, access to resources, and the predominance of Western systems of care and caregiving. Preliminary, qualitative analyses of interviews with AN Elders (n =11) concerning indigenous perspectives on Alzheimer's disease and dementia resulted in perceptions rooted in cultural belief systems, spirituality, and holistic approaches to systems of care and familial caregiving. Findings reflect the imperativeness of indigenizing care for AN Elders that represents their lived realities, cultural practices, and accounts for geographic location, cultural diversity, and community-focused, collectivist approaches to the AN lifecycle. Healthcare systems providing services to AN populations could benefit from Elder-centered conceptualizations and approaches to caregiving.