an evaluation of Virtual Geriatrics, a network of Veterans Affairs tele-geriatric care hubs. Interviews were recorded, transcribed, and analyzed using rapid qualitative analysis. Caregivers deemed telemedicine a convenient option that prevented burdensome travel to remote specialists, facilitated caregiver involvement in visits, and matched quality of in-person visits. Caregivers often managed technology, enabling their loved one to participate in video visits. Telephone visits, while convenient, sometimes caused missed physical cues and hearing challenges which led providers to lean on caregiver communication. Our findings suggest telemedicine is feasible and acceptable for delivery for geriatrics care among rural adults and their caregivers.

SESSION 1050 (SYMPOSIUM)

COGNITION IN CONTEXT: INVESTIGATING THE ROLE OF BUILT, SOCIAL, AND NATURAL ENVIRONMENTS IN COGNITIVE AGING

Chair: Jessica Finlay Co-Chair: Philippa Clarke Discussant: Lilah Besser

While a growing body of evidence points to potentially modifiable individual risk factors for Alzheimer's Disease and Related Dementias (ADRD), the contexts in which people develop and navigate cognitive decline are largely overlooked. Geographic variation in ADRD rates suggest that environmental risk and protective factors may be important in cognitive aging and dementia caregiving. Community hazards are often heavily concentrated in underserved and underrepresented neighborhoods. This symposium aims to identify specific built, social, and natural environmental features associated with cognitive aging outcomes. The papers provide much-needed evidence on the role of neighborhoods and community networks for cognitive health and well-being among diverse older adults. First, Godina finds significant associations between neighborhood greenspace and microstructural indicators of brain health. Second, Westrick investigates the role of neighborhood disadvantage on long-term memory aging of older adults with and without a cancer diagnosis in later-life. Third, Finlay presents a new concept of Cognability to demonstrate which constellation of positive and negative neighborhood features may contribute most to healthy cognitive aging. Fourth, Nkimbeng identifies community networks and resources needed to inform dementia education and support care among African immigrants. Fifth, expert discussant Besser will share how these findings may inform upstream health promotion and reduce ADRD risk. She will discuss critical future research directions and methods to investigate environments of cognition. The symposium advances research assessing contexts of aging, and may inform public health and policy efforts to ameliorate community barriers and create more equitable opportunities to promote healthy aging in place.

NEIGHBORHOOD GREENSPACE AND GRAY MATTER MICROSTRUCTURAL INTEGRITY: THE HEALTH ABC STUDY

Sara Godina[1], C. Shaaban[2], Caterina Rosano[3], Howard Aizenstein[4], and Andrea Rosso[3], *1. University of Pittsburgh School of Public Health, Pittsburgh, Pennsylvania, United States, 2. Department of Epidemiology, University of Pittsburgh School of Public Health, Pittsburgh, Pennsylvania, United States, 3. University of Pittsburgh, Pittsburgh, Pennsylvania, United States, 4. Department of Psychiatry, University of Pittsburgh School of Medicine, Pittsburgh, Pennsylvania, United States*

Neighborhood greenspace is positively associated with cognition and macrostructural indicators of brain health. Microstructural damage may be a sensitive marker for dementia-related neurodegeneration that precedes such macrostructural changes. We aimed to examine cross-sectional associations between neighborhood (census tract) greenspace and gray matter (GM) microstructure in 265 community-sampled adults (mean age=83, 57% women, 39% Black). Linear mixed effects regression models tested associations between quartiles of percent greenspace derived from the normalized vegetation index and mean diffusivity (MD) quantified using magnetic resonance imaging with diffusion tensor. Greater greenspace was related to higher MD in 4 regions: left calcarine (Q3 vs. Q1 stβ=0.38, p=0.0348), left thalamus (Q2 vs. Q1 stβ=0.35, p=0.0443; Q3 vs. Q1 stβ=0.49, p=0.0061), and bi-lateral precuneus (left Q2 vs. Q1 stβ=0.46, p=0.0096; right Q2 vs. Q1 stβ=0.36, p=0.0385). The relationship between greenspace and cognition may be through paths other than GM microstructure; future research should explore other potential mechanisms.

DOES NEIGHBORHOOD DISADVANTAGE ALTER MEMORY AFTER A CANCER DIAGNOSIS? A US HEALTH AND RETIREMENT STUDY

Ashly Westrick[1], Monica Ospina-Romero[2], Philippa Clarke[1], and Lindsay Kobayashi[1], *1. University of Michigan, Ann Arbor, Michigan, United States, 2. University of Wisconsin, Madison, Wisconsin, United States*

We aimed to determine the influence of neighborhood socioeconomic status (NSES) on long-term cancer-related memory decline of older adults. Incident cancer diagnosis and memory were assessed in the U.S. Health and Retirement Study (N=15,074, 1998-2016). Proportion of female-headed households with children, households with public assistance income, people with income below poverty, and proportion 16+ years unemployed was categorized into NSES tertiles. Linear mixed-effects models compared the standardized memory trajectories by cancer status and NSES. Cancer-free individuals living in more disadvantaged neighborhoods had worse mean memory function at age 75 and steeper memory declines than participants from less disadvantaged neighborhoods. An incident cancer diagnosis was associated with an acute memory drop at diagnosis for those living in the least disadvantaged neighborhoods. Cancer survivors had better memory prior to but not after diagnosis compared to cancer-free individuals across NSES. These findings could inform future interventions to promote cancer survivor's long-term aging.

COGNABILITY: AN ECOLOGICAL THEORY OF NEIGHBORHOODS AND COGNITIVE AGING

Jessica Finlay[1], Esposito Michael[2], Kenneth Langa[1], Suzanne Judd[3], and Philippa Clarke[1], *1. University of Michigan, Ann Arbor, Michigan, United States, 2.*