subjective age being least related to the other measures. The highest overlap was observed between optimism and global self-perceptions of aging (.69) and it was for these global self-perceptions that the highest amount of variance could be explained by correlates in a regression analysis (R-square=.55). In contrast, only 10% of variance could be explained for subjective age. Our results underline the merit of taking the multidimensional nature of subjective aging into account since global measures appear less distinct from general personality traits.

THE ASSESSMENT OF VIEWS ON AGING: A REVIEW OF SELF-REPORT MEASURES AND INNOVATIVE EXTENSIONS

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Individual views on aging refer to either older people in general or to a person's own age and aging. Classical approaches seem to hardly map the multidimensional, multidirectional, and highly individual nature of experiences as well as the malleability of perceptions of aging. For this paper, we reviewed existing measures of views of aging. These were categorized based on eight dimensions which were defined by an expert panel and based on current characterizations of views on aging in the literature. Results on 96 instruments call for a strengthening of the affective and the behavioral components in contrast to the apparently cognitive focus of the measures and argue for a stronger emphasis on the developmental nature of views on aging (time references, changes). This is particularly important when aiming to study the lifelong dynamics of views on aging. The suitability of innovative extensions will be discussed.

DO SERIOUS HEALTH EVENTS CHANGE HOW WE VIEW OUR OWN AGING? ON THE ROLE OF CARDIOVASCULAR EVENTS

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Several studies have demonstrated beneficial effects of views on aging (VoA) on health, while the reverse relationship is seldom in focus. Serious health events (e.g., myocardial infarction) are life-threatening and remind individuals of the finitude of life possibly changing their VoA. The present study investigates the effect of cardiovascular events (CVE) on longitudinal changes in VoA using pooled data of three waves of the German Ageing Survey (2008, 2011, 2014, age-range: 40-95 years). To account for alternative explanations, individuals without CVE were matched to the individuals with CVE (n = 202) using a propensity-score-matching approach. Individuals who

experienced a CVE showed more adverse changes in three VoA indicators (aging associated with physical losses, ongoing development, felt age) than individuals without CVE. Results show that CVE can change how we view our own aging which in turn affects future health changes. Following a CVE people may benefit from promoting positive VoA.

YOUNG PEOPLE FEEL WISE, OLD PEOPLE FEEL ENERGETIC: COMPARING AGE STEREOTYPES AND SELF-EVALUATIONS ACROSS ADULTHOOD

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Using questionnaire data from the MIDUS study (N=6.325) we examined the extent to which people in their late 20s, 40s, and 60s think that positive stereotypic "old" and "young" characteristics describe themselves, their age peers, and other age groups. A constellation of "old" characteristics (e.g., wise, caring, calm) was seen as more descriptive of older adults, while a constellation of "young" characteristics (e.g., healthy, energetic) was seen as more descriptive of younger adults. Selfevaluations were highly positive and largely consistent across age groups. Compared to their age peers, younger adults saw themselves as having as many positive "young" characteristics but more positive "old" characteristics whereas older adults saw themselves as having more positive "young" characteristics but fewer positive "old" characteristics. The results support the stability of the aging self despite the existence of age stereotypes and the role of negative age stereotypes as a frame of reference for making self-evaluations.

SESSION 4000 (SYMPOSIUM)

AGING IN LATIN AMERICA: A FOCUS ON MIDDLE-INCOME COUNTRIES

Chair: Catherine Garcia, *University of Southern California*, Los Angeles, California, United States Discussant: Maria P. Aranda, *University of Southern*

Discussant: Maria P. Aranda, University of Southern California, Los Angeles, California, United States

Population aging is occurring rapidly across Latin America, a region that includes some of the world's most racially, ethnically, and culturally diverse populations. Aging in this region is occurring in a context of high levels of poverty and income inequality, which has implications for disease risk, cognitive health, and overall well-being. This symposium focuses on Mexico and Colombia, two of Latin America's largest middle-income countries, which have recently undergone rapid epidemiological and demographic transitions. The papers in this symposium examine a variety of health dimensions among older Latinos that include physiological functioning, cognition, and psychological and physical well-being. García uses the Mexican Health and Aging Study (MHAS) and the Health and Retirement Study (HRS) to examine biomarkers known to predict health risk among Mexican-origin populations: Mexicoborn living in Mexico, Mexico-born living in the U.S., and U.S.-born Mexican-Americans. Saenz examines the importance of education on late-life cognitive ability among Mexicans