

facilities to establish clear policy concerning decision-making capacity and intimate relationships among residents. Ideally, policies about sexual expression are based on the ethical considerations of professions represented by staff in these facilities: gerontologists, nurses, social workers and health care administrators. However, qualitative interviews with 12 staff members of these types of facilities found that professional codes of ethics have not played a significant role in staff decision-making about how to address the sexual expression of the older adults they serve, either in adult day health centers or long-term residential facilities. The lack of reference to a professional code of ethics by the study respondents indicates the need for further educational intervention regarding sexuality among older adults, facility policies, and the code of ethics document itself. Additionally, there is a lack of clarity in the code of ethics documents regarding how to handle sexual expression in long-term care facilities. The rapidly-growing population of older adults will surely result in an increase in the number of older adults that will utilize residential and non-residential long-term care. It is essential to prepare for all of the needs of this population, including the basic human need of sexual expression.

#### LONG TERM CARE FOR ELDERS IN DEVELOPING COUNTRIES IN ASIA AND AFRICA: A SYSTEMATIC REVIEW

M.E. Adamek<sup>1</sup>, S. Balaswamy<sup>2</sup>, 1. *School of Social Work, Indiana University, Indianapolis, Indiana*, 2. *Ohio State University, Columbus, Ohio*

Population aging is occurring at a faster pace in developing countries than in developed countries. By 2030, 80% of the world's elders will be living in developing countries. The demand for congregate long term care (LTC) in these countries will accelerate due to the growing number of frail elders who lack family support. Currently, little is known about the policies, programs, and characteristics of institutional LTC for elders in developing countries as defined by the UNO. To fill this gap, a systematic review was conducted using 9 databases and other non-peer review data sources with various combinations of the keywords elder care homes, old age homes, nursing homes and residential facilities to identify research published since 2000. Approximately 157 original publications were identified; 90 articles were eliminated based on PICOS and inclusion criteria, leaving 67 empirical sources that addressed institutional LTC for elders in developing countries. Themes identified across studies in Asia and Africa include private, public and mixed models of LTC, health services, mental health services, dementia care, falls, nutrition, preventative care, and general quality of life. The review found that Asian countries have more well-established LTC programs and services compared to African countries, and research domination is on health-related issues regardless of the continent. Based on this review, recommendations are made for future research, policy, practice and educational training to improve long term care. Collaborative international partnerships are needed to develop solutions to the global gap in long term care.

#### A STUDY OF INTERGROUP CONTACT THEORY: LESBIAN AND GAY OLDER ADULTS AND LONG-TERM CARE STAFF

M.D. Pelts<sup>1,2</sup>, C. Galambos<sup>2</sup>, 1. *School of Social Work, The University of Southern Mississippi, Hattiesburg, Mississippi*, 2. *University of Missouri, Columbia, Missouri*

**Background and Purpose:** Among the growing aging population are an estimated 1.5 million Americans over the age of 65 that identify as lesbian or gay (LG). That number is projected to be 3 million by 2030. Studies show that due to disparities in health, LG older adults need long-term care (LTC) at higher rates. However, due to societal imposed discrimination and stigmatization, LG older adults fear and prolong accessing LTC services leaving them unserved and vulnerable. In response, the Institute of Medicine (2011) and National Institutes of Health (2015) recommended the development of strategies to increase awareness of older LG adults among LTC staff as a first step.

**Methods:** Guided by intergroup contact theory, this interdisciplinary, mixed methods study employed a pretest-posttest design to assess the influence of intergroup contact on LTC staff's attitudes towards older LG adults. Quantitative data was used to measure changes in pretest-posttest scores. Qualitative data (e.g., audio-recorded group interviews) was used to further explain quantitative findings and identify emerging themes related to attitudes toward serving LG people in LTC.

**Results:** Statistical analysis revealed significant increases in positive attitudes toward lesbians ( $t=2.56$ ,  $p=0.014$ ), positive attitudes towards gay men ( $t=3.32$ ,  $p=.014$ ) and positive attitudes towards both LG ( $t=3.60$ ,  $p=.001$ ). The intergroup contact intervention had moderate effects on participants' attitudes toward lesbians ( $d=.37$ ), gay men ( $d=.38$ ) and LG combined ( $d=.54$ ). Qualitative data analysis revealed how participants responded to the intergroup contact by; interpreting information, applying interpretations, and honoring all older adults. Implications related to replicating this model with other LTC staff, with other providers, and with other groups related to education, practice and research are reviewed.

#### CLOSURE AND ENROLLMENT RATE CHANGE OF LONG-TERM CARE FACILITIES IN SOUTH KOREA

J. Yoo, *Human Development and Family Studies, Iowa State University, Ames*,

Long-term care facilities (LTCFs) in South Korea were oversupplied in 2014 and competition among LTCFs was becoming fierce. There is need to regulate the supply and demand balance of LTCFs and as the closure impacts older adults and LTCF employees. However, reasons for closure of LTCFs and their enrollment rate has not been studied. This study examines which characteristics of LTCFs have influenced their closure in 2015 (question #1) and their enrollment rate difference between 2014 and 2015 (question #2). Data for this study is drawn from the Korean National Health Insurance Service (KNHIS) database and includes information about 4,846 LTCFs. 6.3% of LTCFs closed in 2015, and mean enrollment rate of closed LTCFs was 76.0% in 2014. The logistic regression result for the