normal until their later 90s except for minor complaints. Centenarians faced walking difficulty (5), joint tightness (4), back pain (4), fatigue, dental issues, stuttering, hypertension (3), insomnia, diabetes, anorexia, severe headache, constipation and anxiety. Two centenarians identified themselves as escapers. Centenarians faced hearing defect (4), sight problems, and a decrease in taste and smell. Two reported proper functioning of their sensory organs. Despite various health problems, the Ethiopian centenarians aspired to live longer resiliently. Findings call for further study and the need for social workers, caregivers, and health care practitioners to consider the health conditions, sensory and cognitive functionality of centenarians.

LIFE ON THE STREETS IS HORRIBLE: OLDER RURAL-URBAN MIGRANTS COPE WITH HOMELESSNESS IN ETHIOPIA

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The prevalence of homelessness among older adults in Ethiopia is growing. While prior studies examined the push factors and challenges of homeless elders, little is known about how older people in Sub Saharan Africa cope with homelessness. This study explored the coping strategies of homeless older people in Kobo Town, Ethiopia. Purposive sampling was used to identify 10 homeless older people and four key informants. Study participants were homeless for a year or longer. Thematic analysis was used to analyze the data collected through in-depth interviews. To cope with the challenges faced on the street, homeless older people used various strategies including begging, holy water, drying leftover food, using river water for hygiene and sanitation, sleeping in church compounds, and creating their own social networks. Despite their efforts, the coping strategies used by elders were not sufficient. In the absence of family and government support, study participants relied heavily on begging to meet their survival needs. The findings call attention to the need for a national income support program and other supportive services for older adults. Homelessness is the product of a failing support system. Despite Ethiopia having a Plan of Action for Older Persons and Social Protection Policy for Vulnerable Groups, these policies have not been effectively implemented leaving older adults with no safety net. This study calls for the development of new policies to empower older people in Ethiopia and prevent them from turning to begging as their only recourse.

SESSION 6340 (POSTER)

GRIEF AND THE LIFE SPACE

MEASURING A GOOD DEATH: AN ASSESSMENT ACROSS FOUR COUNTRIES

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A good death is often viewed as a common goal in end-of-life care, yet our understanding of what qualifies as a good death is still under development. Previous studies have attempted to conceptualize our understanding of a good death and have highlighted the need to improve our measurement of this construct. The present study examines a measure of a good death across four countries. Data for this study were derived from the Four-Country Survey on Aging and End-of-Life Medical Care (2017), in which participants were sampled using a random digit dial method. The study relies on a sample of 4,239 participants from the US, Italy, Japan, and Brazil. Confirmatory Factor Analysis (CFA) was employed to fit a measurement model to the full sample for a measure of the importance of a good death. Once model fit was deemed sufficient, a multi-group CFA was used to assess invariance across the four countries. Model fit was adequate at the configural and metric levels, highlighting that across the four countries importance of a good death was measured and understood the same. However, the model failed at the scalar level of invariance, implying that indicators for the importance of a good death are valued differently across the four countries. Further developing our understanding of a good death and how it is measured is essential for improving quality end-of-life care. This study identifies a quality measure of good death while simultaneously highlighting the limitations in using such a measure in a transnational context.

THINGS LEFT UNDONE: RELATION OF GRIEF TO SENSE OF PURPOSE IN BEREAVED OLDER ADULTS

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Sense of purpose is grounded in life experiences (Ko et al., 2019) and can be threatened by the loss of a loved one. The death of a spouse in late life can be particularly disruptive when the bereaved struggle with perceptions of unfinished business with the deceased. This mentality may also derail their sense of life purpose. This study examined the association between persistent grief symptomatology (Prigerson et al.,1995) and sense of purpose (Ryff, 1989) in conjugally-bereaved older adults (N = 53; Mage = 81.59). Unfinished business constructs (i.e., unfulfilled wishes, unresolved conflict; Holland et al., 2018) were tested as mediating grief-purpose relations. Older adults who reported greater grief symptomology also experienced lower sense of purpose ($r = -.27$, $p < 0.05$). Extent of unfulfilled wishes fully mediated the relation between grief symptomology and sense of purpose ($t = -2.26$, $p < 0.05$); unresolved conflict did not act as a mediator. Findings indicate that the association between experiencing pervasive grief symptomology and a disrupted sense of purpose may be due, in part, to ongoing rumination about unfulfilled wishes: missed opportunities to meaningfully engage with one's spouse before death. Results are poignant given recent COVID-19 physical distancing requirements that separated older couples during spouses' dying days, potentially prompting unfulfilled wishes across bereavement. Findings highlight the need for palliative care practices that facilitate optimization of relationships at end of life and grief support practices that re-ignite purpose after difficult spousal loss.