

was conducted to identify patterns in the data. The results indicated four primary challenges, which pertained to recruiting and retaining nursing staff, funding, lacking support from the government, and conflicts with family members. The coping strategies included obtaining and using external resources such as volunteer visitors, operationalizing personal spiritual beliefs, and providing training to improve skills and empathy among employees. This study contributes to nursing home practice by expanding our knowledge of culturally relevant dementia management strategies in China. Suggestions to address management challenges from a policy and practical perspective include clear and sustainable financial support from the government, staff training, and staff-resident ratio regulations, seeking external resources, and integrating spiritual strategies into problem management and service quality improvement.

MOTIVATION TO LEARN AND MULTILINGUALISM ACROSS THE ADULT LIFE STAGES IN THE U.S.

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Lifelong learning or continuing education over the life course has become necessary to navigate a rapidly changing technological landscape. Motivation to learn (MtL) is essential for facilitating lifelong learning. In the U.S., most of the educational opportunities are available in English. Moreover, little is known about associations between being multilingual and MtL across the life stages. This study analyzed nationally representative data from the 2012/2014/2017 Program for International Assessment of Adult Competencies (PIAAC) restricted use file (RUF). Using a previously established latent MtL construct, structural equation models were estimated by four age groups --- 25-34 (n = 2,310); 35-44 (n = 1,610); 45-54 (n = 1,670); and 55 and older (n = 2,620). Results showed that being multilingual was associated with greater MtL among younger age groups, including age 25-34 (b = 0.20, p = 0.01) and 35-44 (b = 0.28, p < 0.001), after adjusting for the demographic, socioeconomic and health characteristics of individuals. Multilingualism was not associated with MtL among older age groups, including 45-54 (b = 0.06, p = 0.50) and 55 and older (b = 0.13, p = 0.19). Findings suggest that education policies that target younger multilingual adults are likely to be effective while enhancing MtL of monolingual (i.e., English-speaking only) adults seems to be a necessary first step. Yet, a similar approach may not be effective for older adults, arguably due to more diverse life circumstances, educational needs, and learning style preferences. More detailed interpretations of empirical results and theoretical explanations are needed.

MOTIVATIONS AND EXPERIENCES OF OLDER ADULT VOLUNTEERS IN A TELEHEALTH NURSING SIMULATION ACTIVITY

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The COVID-19 pandemic has posed challenges to safely engaging older adults in volunteer activities. This research explored a unique partnership between a Retired Senior and Volunteer Program (RSVP) and a school of nursing to administer a telehealth virtual simulation training for nurse practitioner students. Semi-structured interviews were carried out with nursing simulation coordinators and volunteers after the telehealth simulation exercise. The purpose of this research was to identify principles of successful virtual volunteer engagement for telehealth simulations. This initial pilot study encompassed debriefing interviews with volunteers (N = 3) and interviews with simulation coordinators (N = 2). Three major themes emerged within the response coding: 1) the benefits of virtual simulation volunteering, 2) technology as a facilitating factor and challenge, and 3) unique volunteer management considerations. Both volunteers and coordinators noted that volunteers derived positive emotional benefits and new insights from their participation. Coordinators discussed the “authenticity” factor that older adults brought to the simulation experience as a benefit to engaging older adult volunteers. Technology sub-themes included accessibility considerations, experience with the online format, and other logistical considerations in conducting telehealth simulation. Volunteer management sub-themes encompassed volunteer skills and motivations, the perceived successful aspects of training, and improvements for future simulations. Volunteers discussed an interest and connection to healthcare and education as a motivating factor for their participation in the telehealth simulation. This small scale pilot research will be expanded through future simulation activities to continue to identify principles of practice for engaging older adults in virtual volunteerism.

NATIONAL FAMILY CAREGIVER SUPPORT PROGRAM PARTICIPANTS' RECOMMENDATIONS TO BOOST CAREGIVER SUPPORTS

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For more than 20 years, family caregivers have been supported through the National Family Caregiver Support Program (NFCSP) of the Older Americans Act (Title III). The NFCSP provides information to caregivers about available services; assistance in gaining access to services; counseling, support groups and caregiver training; respite care; and supplemental services. In the 2019 National Survey of Older Americans Act Participants, 1,909 NFCSP caregivers were asked “What recommendations do you have for improving the service?” The resulting 748 open-ended responses were thematically coded. The thematic analysis yielded six major themes: Additional Resources, Staffing, Communication, Care Coordination, Quality of Services, and Eligibility. Sub-themes were identified for Additional Resources and Staffing. The most common sub-themes for Additional Resources were requests for more help or services (e.g., grocery shopping), increased funding or financial assistance, and more service hours (e.g., overnight or holiday care). The most common sub-theme for Staffing was the need for

consistent staffing due to high turnover of staff. Chi-Squared tests and Fisher's Exact tests indicated that there were no significant associations between any of the recommendation themes and the gender of the caregiver, employment status of the caregiver, or whether the care recipient has Alzheimer's or dementia. Many of the themes align with results from a recent RAISE Family Caregiving Advisory Council Report. Recommendations from both sets of findings indicate ways that programs, services, and policies can be enhanced to support the needs of care recipients and caregivers.

NEPALI OLDER ADULTS WITH PRE-EXISTING CONDITIONS AND THEIR HEALTHCARE ACCESS AMID COVID-19 PANDEMIC

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COVID-19 has greatly impacted older adults with pre-existing non-communicable conditions (hereafter called pre-existing conditions) in terms of their access to essential healthcare services. Based on the theory of vertical health equity, this study investigated access to healthcare by Nepali older adults with pre-existing conditions during the COVID-19 pandemic. A cross-sectional study surveyed 847 randomly selected older adults (≥ 60 years) in three districts of eastern Nepal. Survey questionnaire, administered by trained community health workers, collected information on participants reported difficulty obtaining routine care and medications during the pandemic, in addition to questions on demographics, socioeconomic factors, and pre-existing conditions. Cumulative scores for pre-existing conditions were recoded as no pre-existing condition, single condition, and multimorbidity for the analyses. Chi-square tests and binary logistic regressions determined inferences. Nearly two-thirds of the participants had a pre-existing condition (43.8% single condition and 22.8% multimorbid) and reported experiencing difficulty obtaining routine care (52.8%) and medications (13.5%). Participants with single (OR: 3.06, 95%CI: 2.17-4.32) and multimorbid (OR: 5.62, 95%CI: 3.63-8.71) conditions had three and five-fold increased odds of experiencing difficulty accessing routine care. Findings were similar for difficulty obtaining medication (OR single: 3.12, 95%CI: 1.71-5.69; OR multimorbid: 3.98, 95%CI: 2.01-7.87) where odds were greater than three-folds. Older adults with pre-existing conditions in Nepal, who require routine medical care and medication, faced significant difficulties obtaining them during the pandemic, which may lead to deterioration in their pre-existing conditions. Public health emergency preparedness should incorporate plans for both managing the emergency and providing continuing care.

NUTRITIONAL RISK AND HEALTH-RELATED QUALITY OF LIFE IN OLDER ADULTS AGING WITH HIV

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Due to antiretroviral treatment success, individuals with HIV are living longer. People aging with HIV (PAWH, 50+) may be more likely to experience nutritional risk compared to their HIV-negative counterparts due to biopsychosocial factors. The DETERMINE checklist measure accounts for social and economic factors as well as aspects of the aging process that are not typically considered when examining nutritional risk and are important for PAWH. The current study examined nutritional risk and health-related quality of life (HRQoL) in PAWH using the DETERMINE checklist and PROMIS t-scores (mental and physical HRQoL) through secondary analyses of 158 participants in the Strengthening Therapeutic Resources in Older patients aging with HIV (STRONG) study. DETERMINE nutritional risk scores (0-21) were separated into 4 groups (low-risk [0-2, n=13], moderate-risk [3-5, n=28], high-risk [6-12, n=78], very high-risk [13-21, n=39]). The sample was 55% male, 94% Black/African American and had a mean age=59 (SD=5.5). Most of the sample (74%) were at high or very high nutritional risk and low HRQoL t-score: physical M=43.7 (SD=9.5), and mental M=45.7 (SD=10.1). Mental and physical HRQoL were significantly ($p < .001$) associated with nutritional risk group as tested through linear regressions. Means were as follows: physical HRQoL low-risk M=53.4 (SD=10.6), moderate-risk M=47.4 (SD=8.9), high-risk M=43.5 (SD=8.1), very high-risk M=38.4 (SD=8.9); mental HRQoL low-risk M=54.0 (SD=8.9), moderate-risk M=49.1 (SD=7.9), high-risk M=46.1 (SD=9.5), and very high-risk M=39.5 (SD=9.7). These associations remained significant after controlling for age and sex. Higher nutritional risk as measured by the DETERMINE checklist in PAWH was associated with poorer physical and mental HRQoL.

OLDER ADULTS PLACE GREATER IMPORTANCE ON A PURPOSEFUL RETIREMENT

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Sense of purpose is associated with desirable health and well-being measures in older adults. Unfortunately, existing research points to complexity in the connection between purpose and retirement: some but not all people decline in sense of purpose following retirement, and some view it as nonessential to maintain a purpose specifically during retirement. These findings suggest there may be individual differences both in the importance placed on being purposeful specifically during retirement, and that there may be a discrepancy in purpose importance before retirement and during retirement. In this study, we examined whether perceived purpose importance correlates with age and personality, as well as working status. Data were collected from a U.S sample (N = 2,009), aged 18-93 (M = 48.51). Participants completed a survey assessing the Big Five personality traits and were asked to rate the importance of purpose before