and values); meso-level factors (e.g., coursework in aging and academic major/discipline); and, macro-level factors (e.g., societal and cultural values, media, activism, and advocacy). As an adaptable teaching exercise for all levels of students, this poster presents a novel framework to support students' exploration and cultivation of their unique gerontological voice. Through this three-level scaffolded discovery, students across disciplines strengthen their awareness and understanding of their distinct voice and build confidence to activate around aging-related issues pertinent to their specific interests and passions. From personal to global, this guided introspective exercise provides an opportunity for students to focus and embed their voice into the larger tapestry of gerontology, an inclusive community rich with perspective and diversity. Encouraging the development of students is an essential part of building social capital which is instrumental to the creation of strong networks to serve older adults through a multitude of disciplines.

FINANCIAL HARDSHIP IN OLDER CHINESE CANCER SURVIVORS

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Purpose: To estimate the proportion of Chinese cancer survivors experienced financial hardship and then examine whether older age was associated with financial hardship. Methods: We surveyed 965 cancer survivors 30 to 64 years of age and 643 cancer survivors age >=65 years in China. Cancer survivors were asked whether (1) they have borrowed money because of cancer, its treatment, and lasting effects of treatment and (2) they have forgone some cancerrelated medical care because of cost. Multi-variable logistic regression models were used to examine factors associated with financial hardship. Results: About 44% of cancer survivors older than 65 borrowed money because of cancer, and 18% had borrowed more than 20,000 CNY (about 2,900USD, the disposable personal income in China in 2015 was about 22,000 CNY). In contrast, 54% of younger patients (P<0.01) had cancer-related debts, and 32% had to borrow more than 20,000 CNY. About 11% of cancer survivors have forgone cancer care in both age groups. The logistic regression analyses show that being 65 or older was 43% less likely to report cancer-related debts than younger patients (OR=0.57, 95% CI: 0.44-0.73). Among older cancer survivors, those who were older than 75, female, and had Urban Employee Medical Insurance and higher family income were less likely to report financial hardship. Conclusion: Older cancer survivors in China experience significant financial hardship, but not as striking as younger patients. Additional research is needed to analyze whether the finding is associated with the Chinese family structure and traditional filial piety culture.

EVALUATING ITEM NONRESPONSE IN A LIFE HISTORY CALENDAR: AN ANALYSIS OF MEMORY EFFECTS

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Memory decline contributes to response inaccuracy and can produce item missing data, especially in retrospective surveys with older adults. Event history calendars, or the life grid approaches, are commonly used to obtain retrospective life history data. As indicated in previous literature, this approach can assist respondents' memory retrieval. Despite its wide use, the important issue of item nonresponse due to memory effects in life grid questions has received little attention. Autobiographical memory (AM) research has shown that there are two interconnected long-term memory systems: episodic memories of event details from specific remote times in an individual's life; and semantic memories of the important facts and themes that define an individual's life history. Episodic and semantic AM may introduce different levels of difficulty in retrieving memory and thus contribute to different levels of missing data. This study examines the effects of both item-level predictors (e.g., types of memories) and respondent-level predictors (e.g., cognitive status, age, and health status) on the likelihood of item missing data in life grid questions. We analyzed missing data in the 2017 Health and Retirement Study (HRS) Life History Mail Survey (n = 3,844), using multilevel logistic regression. The results revealed higher rates of item missing for episodic memories, and that overall respondents' cognitive status was significantly associated with their likelihood of providing item missing data. Recent residential information was better recalled than childhood information. These results have implications for life course analysis of exposures linked to residential histories.

SEX IN NURSING HOMES? A PRELIMINARY ANALYSIS OF INTERVIEWS WITH COMMUNITY-DWELLING ADULTS

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Most older adults living in long-term care settings (LTCs) indicate that expressing their sexuality is important to them (Doll, 2013). However, negative views of late-life sexuality persist in the United States (Robinson & Molzahn, 2007), particularly among nursing staff in LTCs. Staff often express discomfort regarding residents' sexual lives (Bouman, Arcelus, & Benbow, 2007), despite the fact that LTCs are residents' homes where private behaviors such as sexual activity might be expected to occur. Little is known about the general public's attitudes towards sexual behaviors in LTCs. Attitudes of LTC residents' family members is particularly important, as they are most likely to visit residents and to care about their quality of life, in turn informing facility policies and management. In this study, we took preliminary steps toward gathering this information by focusing on attitudes of community-dwelling adults. Using an iterative approach, we conducted semi-structured interviews with community-dwelling adults (n = 9; age range = 18 - 65 years) regarding their beliefs about romantic relationships and sexual behaviors among LTC residents. Major themes were identified through thematic content analysis. Participants indicated favorable attitudes towards residents' sexual expression as a means of combatting loneliness and fostering emotional intimacy. Other themes included residents' rights to privacy, potential risks of sexual behavior, and the need to