

adults and their families. As the largest coalition focused on the health and well being of older people in the state, NH AHA currently engages over 300 participants representing more than 185 organizations and/or groups statewide. Participants will hear how this collective power has led to early successes in advancing AHA's five strategic priorities, including early statewide policy successes. A review of the collective impact model will be provided with discussion on how NH uses this model intentionally to align the work in the aging field of NH. NH AHA's theory of change starts with changing the conversation around aging across NH's communities and is the foundation for the efforts to advance Reframing Aging principles and recommendations through the work of NH AHA and statewide. NH AHA's strategic plans to become a resource and hub of Reframing Aging activity in the state will be reviewed. As a result of the presentation audience members will be able to 1) describe the 5 conditions of collective impact 2) give 2 examples of how NH is utilizing these conditions intentionally and 3) describe NH's efforts to create common measures for the aging field in NH.

SESSION 2868 (POSTER)

ENVIRONMENT AND AGING (SRPP)

A CONFIRMATORY FACTOR ANALYSIS OF THE BRIEF SENSE OF COMMUNITY SCALE FOR SPANISH-SPEAKING OLDER ADULTS IN PUERTO RICO

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Psychological sense of community is a concept used to describe how individuals feel about their community. The Brief Sense of Community Scale (BSCS) is an 8-item scale that includes these four domains: membership, needs fulfillment, emotional connection, and influence. It has been used in various contexts and was validated with young adults in Puerto Rico. The purpose of this study was to validate the BSCS for use with Spanish-speaking older adults in Puerto Rico. We conducted face-to-face interviews with a non-probability sample of 154 community-dwelling adults aged 60+ in Puerto Rico. BSCS is comprised of a 5-point likert-type scale with score values ranging from 0 (strongly agree) to 4 (strongly disagree) (total score range 0-32, mean=24.75, SD= 6.04), and it showed good reliability in our sample ($\alpha=.85$) and acceptable subscale reliability (membership, $\alpha=.85$; needs fulfillment, $\alpha=.85$; influence, $\alpha=.66$; and emotional connection, $\alpha=.69$). Five competing factor structures were tested based on prior research using confirmatory factor analysis (CFA). The CFA indicated that a four factor structure from the original scale was the best fit (χ^2 (16) =25.9; $p=.06$; RMSEA=.06; CFI=.98; TLI=.97; SRMR=.04). The BSCS showed significant correlations in the expected direction with quality of life ($r=.41$), social isolation ($r=.34$), loneliness ($r=.27$) and self-rated health ($r=.17$). We conclude that the BSCS is a valid and reliable scale for measuring psychological sense of community with community-dwelling Spanish-speaking older adults in Puerto Rico. Future research should confirm and extend our findings with other Spanish-speaking older adult populations.

ASSESSING HOUSING ACCESSIBILITY FOR OLDER ADULTS IN JAPAN: A CONTENT VALIDITY STUDY

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Scientifically validated tools to assess housing accessibility for older adults in Japan have been lacking. To address this, a rigorous procedure of adapting an existing housing assessment tool—the Housing Enabler, developed in Sweden—for valid use in Japan was conducted. The original tool was translated into the Japanese language, using established translation procedures. In the process, researchers checked the appropriateness of technical terms and adjusted specifications to be in accordance with Japanese standards. An expert panel approach was used to validate the content of the Japanese Housing Enabler. Thirteen certified occupational therapists, architects and care-managers (average experience=14.5 years) participated as experts in the content validity study. They rated each item with regard to relevance for assessing housing accessibility in Japan, on a scale from 1(=Not relevant) to 4(= Highly relevant). They suggested adjustments and additions that they found to be relevant to capture particularities of Japanese housing and building design. After individual ratings, the experts gathered for consensus discussions on suggested revisions of the item list. As a result, the number of items was substantially increased (from 161 to 283). A content validity index (CVI) was calculated for each item (i.e., the proportion of experts rating the relevance as at least 3). Using a recommended threshold of CVI ≥ 0.78 , more than 90% of the items were considered relevant, thus supporting the content validity. However, the large amount of items might jeopardize the feasibility of the instrument. Further studies are needed to evaluate feasibility, criterion-related validity and aspects of reliability.

COMMUNITY CANCER RATES IN MASSACHUSETTS, NEW HAMPSHIRE, AND RHODE ISLAND: FINDINGS FROM HEALTHY AGING DATA REPORTS

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Cancer is one major health condition that affect people's later life quality, which could be intervened from the community level. This study compares rates of lung cancer, colon cancer, breast cancer (in women), and prostate cancer (in men) among adults 65+ in 3 New England states (MA, NH, and RI). Data were from the Healthy Aging Data Report (see www.healthyagingdatareports.org), which reported on 150+ health indicators at the local community and state level. Data sources were the Current Medicare Beneficiary Summary File (years) and the American Community Survey (years). Small area estimation techniques were used to calculate age-sex adjusted community rates. Average state rates of cancers (range