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 staffresident 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.

Shalini Sahoo,¹ Takashi Yamashita,² Roberto Millar,³ and Phyllis Cummins,⁴ 1. University of Maryland, Baltimore, Hanover, Maryland, United States, 2. University of Maryland, Baltimore County, Baltimore, Maryland, United States, 3. The Hilltop Institute, Baltimore County, Maryland, United States, 4. Miami University, Oxford, Ohio, United States

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

Jennifer Crittenden,¹ and Kayla Thompson,² 1. *University* of Maine, University of Maine, Maine, United States, 2. University of Maine, Bangor, Maine, United States

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

Heather Menne,¹ Natalie Mulmule,² Angela Gasdaska,² Emily Costilow,² and Kristen Robinson,³ 1. RTI International, Washington, District of Columbia, United States, 2. RTI International, RTI International, North Carolina, United States, 3. DLH/SSS, Silver Spring, Maryland, United States

For more than 20 years, family caregivers have been supported through the National Family Caregiver Support Program (NFCSP) of the Older Americans Act (Title IIIE). 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