

the well-being of older adults who are aging in place with multimorbidity.

NEIGHBORHOOD ENVIRONMENTS AND COGNITIVE DECLINE IN MIDDLE AND OLD AGE IN CHINA: GENDER AND AGE VARIATIONS

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Older adults are more vulnerable to neighborhood physical and social conditions due to longer exposure, increased vulnerability, changing spatial use, and a greater reliance on access to community sources of integration. Previous research has demonstrated an association between neighborhood environments and cognitive function in older adults. However, most studies were cross-sectional, focused on western countries, and did not examine potential moderating factors. This study examined gender and age variations in the relationship between neighborhood environments and cognitive decline in middle and old age in a developing country that is experiencing rapid population aging and rising prevalence of Alzheimer's disease and related dementias. Using data from a nationally representative sample of adults aged 45 years and older from the three waves of China Health and Retirement Longitudinal Study (CHARLS 2011-2015), this study estimated multilevel growth curve models for the effects of neighborhood environments on cognitive decline separately for men and women and for those aged 45 to 64 and those aged 65 and above. It showed that the cross-sectional effect of outdoor facility and longitudinal effect of handicapped access were more significant for men, but the cross-sectional effect of community social participation and longitudinal effects of raining days, number of disasters, employment service, and community SES were more significant for women. The cross-sectional effect of infrastructure advantages and longitudinal effects of employment service and old age income support were more significant for adults aged 65 and over. These findings suggest that community-level interventions may be more beneficial for older women.

SOCIAL ISOLATION AND SUICIDAL IDEATION OF OLDER PEOPLE: THE BUFFERING EFFECTS OF NEIGHBORHOOD SOCIAL COHESION

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This study aimed to examine the buffering effect of neighborhood social cohesion on the association of social isolation and suicidal ideation among Korean older people. The sample was older adults who were 65 years old or older and participated in the Korea Health Survey 2017 collected by the Center for Disease and Prevention (N=67,835). Social isolation was measured with three indicators: living-alone, contact isolation (less than weekly contact with family, friends, or neighbors), and participation isolation (less than monthly social organization attendance). Neighborhood social cohesion was measured with two indicators: trust in neighbors

and the welfare budget ratio to represent social capital and social inclusion capabilities, respectively. Multilevel logistic regression analyses were performed to estimate the dynamic relationships between social isolation, neighborhood social cohesion, and suicidal ideation. Results of the main effect indicated that social isolation is a significant risk factor for suicidal ideation and neighborhood social cohesion works as a protective factor against suicidal ideation. Results of cross-level interactions showed that the welfare budget ratio moderated the association between participation isolation and suicidal ideation (OR=0.960, $p<.001$). The negative effect of participation isolation was reduced as the welfare budget ratio of the neighborhood increased. Neighborhood social cohesion indicators did not moderate the association between the remaining types of social isolation and suicidal ideation. The evidence from this study highlights the importance of social welfare expenditures when building suicide prevention interventions and age-friendly communities.

TWIN SIMILARITY FOR NEIGHBORHOOD, GEOGRAPHIC MOBILITY, AND HEALTH OUTCOMES IN LATE ADULTHOOD

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Socioeconomic status (SES) is one of the most robust predictors of health. The source of SES-health associations is heavily debated; one approach is investigating neighborhood-level environmental characteristics. Challenges include selection effects and the possibility of reverse causation: people choose their neighborhoods. Longitudinal twin research can overcome these issues by assessing location choice over time as well as twin similarity; however, few existing twin studies have incorporated neighborhood-level data, and none of those focus on aging. Using longitudinal data from the Swedish Adoption/Twin Study of Aging, the current study examined the impact of location at various points in life. Location at birth and in 1993 were available for 972 participants. Birth years ranged from 1926 to 1948; mean age in 1993 was 54.55 (range = 35-67). Thirty-nine percent of the sample had moved to a different county between birth and midlife: individuals who moved had significantly higher parental SES and had achieved significantly higher education. Moreover, identical twin concordance for geographic mobility (77%) was significantly higher than fraternal twin concordance (65%), indicating a modest but significant genetic contribution. Geographic mobility did not impact identical twin similarity on a functional aging factor (corrected for age and education), but fraternal twins concordant for mobility were more similar than discordant twins, suggesting genetic contributions to mobility may also impact health. Ongoing retrieval of location information for twins born 1900-1925 and geocoding of location information available at 9 waves of data collection will allow for expanded investigation of the SES-health relationship at the neighborhood level.