family and friends are prioritized in late life as a function of limited future time horizons. Research documents that older individuals include a smaller proportion of peripheral social partners than younger individuals in their social networks, and that this selectivity is associated with better daily emotional experience (English & Carstensen, 2014). Such limitation of social partners, however, might adversely affect cognitive function in the long run, since exposure to novel and cognitively stimulating environments has been tied to better cognitive functioning (Park et al., 2014). The current study examined the long-term association between proportions of peripheral social partners in older adults’ social networks and cognitive performance. Sixty-one older participants (Mage = 71.53) reported the size of their inner, middle, and outer social circles using the Social Convoy Questionnaire (Kahn & Antonucci, 1980) and completed Digit Span Backward, Digit Span Forward, and Digit Symbol tasks at baseline and five years later. Results of multiple regression analysis show that participants who had a smaller proportion of social partners in their outer social circle at baseline performed poorer on the Backward Span task assessed five years later than those with a larger outer circle proportion. Results hold controlling baseline cognition, physical health, age, SES, education, and trait openness. We discuss the findings in terms of potential tradeoffs between the age-related social selection and working memory in the long run.

KIN NETWORK DYNAMICS OVER THE LIFE COURSE AND HISTORICAL TIME IN 19TH-CENTURY ORKNEY, SCOTLAND

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Kin are important sources of social, instrumental, and financial assistance for older adults. Support from kin is associated with improved wellbeing and longer lives among this age group, yet few longitudinal studies examine information on the composition and structure of kin networks beyond dyadic relationships, such as those between spouses or parents and their children. This study examines the dynamics of non-dyadic measures of kin networks among adults over age 60 using multiple longitudinal linked data sources from North Orkney, Scotland, 1851-1911. Reconstructed individual life courses (N=4,946) and genealogies, in combination in spatial information concerning the proximity non-coresident kin, are used to examine change in kin availability and propinquity over the life course and across historical time. Orkney provides an interesting case study; as information is available on individual-level change in kin availability with a long period of follow up during a time of population change. The study period covers the early stages of population aging and depopulation of the islands, which began in the 1870s in this community. A descriptive analysis of kin network change is presented. Kin availability is associated with longer lives in this sample. The presence of co-resident kin is associated with economic status, after controlling for other factors. Older adults who receive poor relief are significantly more likely to live alone and less likely to live with kin, and the association is stronger for men than for women.

EXPANDING SOCIAL TIES AS A GOAL IN LATER LIFE: THE ROLE OF SOCIAL NETWORK CHARACTERISTICS

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Older adults often winnow their social ties to focus on emotionally rewarding ties (Charles & Carstensen, 2010). Some older adults, however, have small social networks that preclude much winnowing or aversive social ties from which disengagement is difficult. These individuals might be motivated to expand, rather than contract, their social ties. The current study sought to extend knowledge regarding potential links between social network characteristics and older adults’ interest, effort, and success in creating new social ties. We expected that small social networks and negative social ties might motivate interest and effort directed toward forming new social ties but that positive social ties might foster success in efforts to form new ties. In-person interviews were conducted with participants (N = 351, Mean age = 74.16) in a larger study of older adults’ social networks and well-being. The interviews assessed participants’ social networks, as well as their interest, effort, and success in making new social ties. Participants’ social network composition, rather than size, was associated with greater motivation to establish new social ties. Negative social ties were associated with greater interest and effort directed toward forming new social ties. Positive social ties were related to greater success (due, in part, to their support provision) and, unexpectedly, were also related to greater interest and effort directed toward forming new ties. Older adults sometimes seek to expand, rather than contract, their social ties, and characteristics of their social networks appear to play a role in fueling and influencing the success of such efforts.

FREE TRANSPORTATION SERVICE RECIPIENTS MAY HAVE BETTER QUALITY OF LIFE BUT STILL LACK IN IMPROVING HEALTH

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This study aimed to determine if service recipients (SRs) of free transportation services experience better quality of life, health, and function compared to pre-service recipients (PSRs). We conducted a cross-sectional study using personal interviews with 43 PSRs and 30 SRs belonged to a volunteer organization. Outcome measures were Older People’s Quality of Life (QoL), Center for Epidemiology Study-Depression, and Instrumental Activities of Daily Living (IADL). Total sample (N = 73) had a mean age of 78.5 years and mostly female (86.3%). The majority of PSRs wanted to go to Drs’ offices (74.4%) and Grocery stores (60.5%), followed by Drug stores (44.2%), when the service becomes available. The figures were substantially smaller among SR (40.0%, 30%, and 13.3%, respectively). In PSRs, 67.4% expected to improve health once they start receiving the service, and 70.0% of SRs said it did with the service. Using independent t-tests, SRs were significantly better in depression (p<.001), IADL (p=0.29) and most QoL items (life overall, social relationship, home and neighborhood, psychological and emotional well-being and leisure and activities; p=.047–p=.001), except for perceived health and finance. SRs (100%) were very satisfied with the service and drivers, but 80% of SRs said they...
wished to use more driving services than the allowable four times per month maximum. This limitation was due to the insufficient number of volunteers compared to a large number of people in need. Availability of more volunteer drivers will likely improve SRs health. Effective approaches to increase the number of driving volunteers are necessary.

THE EFFECT OF OLDER ADULTS’ VOLUNTEERING ON THE SOCIAL SUPPORT
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With increasing longevity, older adults need activities after retirement. Volunteering can be alternate for substituting role after retirement. Social capital is an important resource to start volunteering. Vice-versa, volunteering can increase their social network and social support. This study examined how the factors of volunteering affect emotional, instrumental and esteem support of older adults. This study used the 6th additional wave of the Korean Retirement and Income Study (2016). The sample size was 202 and target population were adults age 65+. Multiple regressions were used for data analysis. Demographic variables (e.g. gender, age, etc) were controlled. Independent variables included volunteer time, how many places they volunteered at, whether volunteers were professionals providing pro-bono services or not, whether they were self-motivated or asked by others. For dependent variables, social support such as emotional, instrumental and esteem support were used. If volunteers were asked by others, emotional and esteem support were increased. If volunteers were self-motivated, it affected esteem support. If they were volunteering in multiple places, instrumental and esteem support were higher than volunteering in only one place. Length of volunteering time spent affected the instrumental support negatively. There were differences between those who were professionals versus nonprofessionals volunteering affecting instrumental support. Nonprofessional volunteering affected instrumental support more than professional volunteering. These findings implied social support motivation, time, and whether the volunteer was a professional or not affected different kinds of social support differently. Findings show the importance of older adults doing volunteering to enhance social support.

#GERIATRICS: A 7-YEAR TWITTER ANALYSIS
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The use of social media platforms as an educational tool to promote awareness has become increasingly popular as technology advances. Twitter is a microblogging, social media platform in which users share short, text-based posts (“tweets”) that can contain hyperlinked articles, web-pages, pictures, and more. 79% of the 336 million current monthly twitter users are international, suggesting Twitter serves as a tool allowing international connection via the rapid spread of information worldwide. Simplur Signals (Simplur LLC) was used to perform a retrospective analysis of the use of #Geriatrics on Twitter. Data was collected from Oct. 13th, 2010 through Jun. 5th, 2018. Spam and unknown accounts were excluded from the data set before analysis. Manual analysis was performed to qualitatively assess tweet content of the top 200 Retweets by Impressions. A total of 65,002 tweets were shared during the selected time frame. Tweet activity rose to a high in Year 5 (17,206) but has declined since. The majority of the top 100 influencers were doctors (57.4%). Regarding tweet content, most discussions focus on increasing awareness and promoting advocacy (30%) as well as sharing research related to the practice of geriatrics (23.5%). With its widespread use and lack of international boundaries, Twitter serves as an effective platform in informing and increasing awareness about geriatrics and other medical specialties.

DO OLDER ADULTS WITH HIV HAVE A SOCIAL NETWORK DEFICIT? EVIDENCE FROM AGINCOURT, SOUTH AFRICA
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HIV/AIDS has had a substantial social and economic impact on Sub-Saharan Africa, and research is only beginning to examine the prevalence and consequences of HIV infection among older adults in this region. Though informal social networks provide crucial resources for older people managing health problems, little is known about how the form and function of such networks differs by HIV status. Drawing from theories of health stigma and network mobilization, we use egocentric network data from HAALSI, the Health and Aging in Africa: A Longitudinal Study of an INDEPTH Community in South Africa (N=5,059). HAALSI is a community-based study centered in Agincourt, South Africa, and focuses on adults 240 years of age. Approximately 12% of this sample is HIV positive. Results of multivariable logistic and Poisson regression reveal three main findings. First, relative to those without HIV, infected older adults have larger personal networks—including more kin and more non-kin network members. Second, HIV status has no discernible impact on whether people receive regular emotional support from those in their networks. Third, older adults who have disclosed their HIV status have a relatively high proportion of kin members in the close networks relative to those not infected with HIV and to those with HIV who have not disclosed their disease. Our findings point to the need for further research on the implications of social networks for outcomes such as well-being and health care delivery among older AIDS patients in the Global South.

A COMPARATIVE ANALYSIS OF THE SOCIAL SUPPORT IN SOLITARY SENIORS WHO ATTEND CLUB ACTIVITY OR GO OUT TO SEE FRIENDS
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The Toyoshiki-dai housing complex, constructed in 1960s, is located in one of the commuter towns in a metropolitan area of Japan. Those who moved to this area as youngsters are now aged over 75 and many live a solitary