balancing Older Adulthood’s focal tension between Integrity and Despair. This life stage is widely associated with the physical, cognitive, and social losses, and societal constraints that give rise to later-life despair. However, VI functions as a lifelong psychosocial model for the meaningful environmental engagement that supports later life’s wisdom and integrity. Notably few films present an integrated view of older adulthood’s losses along with opportunities. But those few can be a source of optimism to elders for whom VI may not be intuitive, but who can learn its practice.

THE COURAGE TO EMBRACE OLD AGE
Jim Vandenbosch1, 1. Terra Nova Films, Chicago, Illinois, United States

Most popular films and television programs reflect, and thereby reinforce, the common and entrenched cultural perception of aging as the “enemy” of vital living. Aging used to be kept at bay in popular films and TV programs through a stereotyping that allowed ridicule and avoidance. Today, such overt negative portrayals have begun to fall out of favor but are being replaced by a subtler form of ageism—that of “super-aging” where older adults who are seen as successfully holding onto their youthful ways are celebrated and held up as models of “successful” aging. This presentation will give an overview of how most popular films and television programs frame the experience of older adulthood, and will illustrate this with clips from such films. Then, in contrast, clips will be presented from films that present a more holistic and balanced view of elderhood.

THE S.O.C. MODEL OF AGING IN DOCUMENTARY FILMS: POSITIVE ADAPTATION TO AGE-RELATED LOSS IN THEORY AND EVERYDAY LIFE
Rick Scheidt1, 1. Kansas State University, Manhattan, Kansas, United States

There is overwhelming evidence that “pop culture” depictions of age-related losses are primarily negative, ignoring positive adaptive experiences associated with the second half of life. Unfortunately, film as an entertainment medium often creates and reinforces this negative status quo. This presentation describes the usefulness of the Baltes and Baltes S.O.C. Model for offsetting losses – via narrowing and revision of goal priorities (Selection), locating and enhancing resources to achieve positive outcomes (Optimization), and using these to increase one’s personal limits and reserve capacities (Compensation). In addition, positive “S.O.C. Solutions” (Spiehs, 2018) are illustrated for everyday loss scenarios within four new documentary films. These include positive adaptations to four loss domains – personal autonomy (driving), physical capacity (sexual responsiveness), psychological well-being (loneliness and belonging), and environmental destruction (place dependency). Annotated sources will be made available.

SESSION 2150 (SYMPOSIUM)

AGING-IN-COMMUNITY MODELS AND PROGRAMS: PROGRAM AND POLICY PLANNING STRATEGIES
Chair: Su-I Hou, The University of Central Florida, Orlando, Florida, United States

Co-Chair: Carrie Graham, University of California, Berkeley, California, United States
Discussant: Emily Greenfield, Rutgers University, New Brunswick, New Jersey, United States

This symposium introduces key aging-in-community models and programs, with a particular focus on program and policy planning strategies. Villages are a new, consumer-directed model that aim to promote aging-in-community through a combination of facilitated social engagement, member-to-member support, volunteer opportunities, and collective bargaining for services. Dr. Graham from the University of California will share results from both a national survey of Village directors and a survey of village members, summarizing Village organizational development trends and members’ perceived impacts. Dr. Gilcksman from Philadelphia Corporation for Aging will share how older adults who do not participate in a Village create their own informal social and service network to maintain themselves and to accomplish the same goals as a Village, building community at the neighborhood level. Additionally, Dr. Hou from the University of Central Florida will discuss lessons learned on program planning strategies among older adults participating in three programs promoting aging-in-community: a university-based lifelong learning program (LLP), a county neighborhood lunch program (NLP), and a Florida Village program as a comparative case study. Finally, Dr. Glass from the University of North Carolina Wilmington will share the current trend of the new senior cohousing model, promises and challenges for older adults providing mutual support to each other as they age together. This symposium will further discuss strengths and weakness, and planning strategies of the various AIC models and programs.

ELDER COHOUSING: THE EMBODIMENT OF AGING IN COMMUNITY
Anne P. Glass1, 1. University of North Carolina Wilmington, Wilmington, North Carolina, United States

A new alternative living arrangement has emerged in the U.S., in which older adults proactively choose how, where, and with whom they want to live, in a close-knit community where neighbors look out for each other. Adopting the cohousing model originally established in northern Europe, these elder intentional communities are distinctive, as they are run by the residents themselves, and there is a focus on neighbors helping each other. Drawing from over a decade of research incorporating data from six communities, the challenges and benefits of establishing such a community will be addressed and the requirements necessary for mutual support to thrive will be identified. Finally, the model of aging better together intentionally, developed from the senior cohousing experience, will be shared, as well as the implications for how the model can be used for planning and policy in other settings.

PROGRAM PLANNING STRATEGIES AMONG OLDER ADULTS PARTICIPATING IN THREE PROGRAMS PROMOTING AGING-IN-COMMUNITY
Su-I Hou1, 1. The University of Central Florida, Orlando, Florida, United States

This study examines program planning strategies among older adults participating in programs promoting
aging-in-community (AIC) programs. Older adults from three programs were recruited (n=290): a university-based lifelong learning program (LLP; n=110), a county neighborhood lunch program (NLP; n=84), and a village program (n=96). Mean age was 72.4 (SD=8.68) years and 78% female. Findings showed NLP participants were more likely to obtain health information from TV (p=.030), friends and neighbors (p=.016), family members (p<.001), or mailed advertisement (p<.001); while less likely to obtain health information online (p<.001). Village members preferred afternoon while NLP participants preferred morning programs (p=.025). Most desired frequency was weekly (45%) and delivered in small group modes (68%). NLP participants were more likely to report self as risk takers (29% vs. 17%) or old tradition (23% vs. 3-8%) towards new technology adoption (p<.001). Results have implications on tailored program planning for older adults in different AIC programs.

THE DO IT MYSELF VILLAGE: BUILDING A VILLAGE-LIKE SUPPORT SYSTEM WITHOUT A VILLAGE
Allen Glicksman,¹ Lauren Ring,² and Carrie Graham³, 1. Philadelphia Corporation for Aging, Philadelphia, Pennsylvania, United States, 2. University of California Berkeley, Berkeley, California, United States

Villages provide members with a wide range of support including socialization, vetted vendors and other services that assist the elder to age in place. While not every Village offers the same types of support many older adults join Villages to gain benefits they may have lost (such as an informal support network) or ones they cannot find (such as identifying reliable providers of home repair). However, Villages are not available everywhere and there are barriers to Village membership, especially cost. Do older adults without access to a Village simply “do without” or do some of them create the same type of support system on their own? This presentation, using data collected in focus groups and individual interviews for a study of aging in community will describe the ways in which older adults have fashioned their own set of services and socialization opportunities to achieve the same goals as Village membership.

THE VILLAGE MODEL, WHAT’S NEXT?
Carrie Graham,¹ and Andrew Scharlach¹, 1. University of California Berkeley, Berkeley, California, United States

Researchers at UC Berkeley will present some key findings of their research on Villages spanning the last decade. First, results of a longitudinal study of operational Village organizations in the US (conducted in 2009, 2012, and 2016) reveals that the Village model has expanded and developed over time, with some changes in organizational structure. A national survey of Village members (N=2000) shows that Village remain homogeneous, and impact different types of members in different ways, with older, more frail members perceiving more quality of life benefit, while younger, healthier members perceive more benefits in the areas of social engagement. Finally, two studies looking at Village retention/participation show that issues such as lack of diversity, focus on social engagement can be barriers to inclusion, retention and ultimately, scalability of the model.

SESSION 2155 (PAPER)

ALZHEIMER’S DISEASE AND RELATED DEMENTIAS

MY PARENT’S BODY IS SACRED: LATINO PERSPECTIVES ON BRAIN DONATION FOR ALZHEIMER’S DISEASE RESEARCH
Yadira Montoya,¹ Guillerme M. Balbim,² Crystal M. Glover,³ and David X. Marquez,² 1. NORC at the University of Chicago, Chicago, Illinois, United States, 2. University of Illinois at Chicago, Chicago, Illinois, United States, 3. Rush Alzheimer’s Disease Center, Chicago, Illinois, United States

Brain donation is a critical part of advancing research addressing Alzheimer’s disease and related dementias (ADRD). Latinos are at a higher risk of developing ADRD compared to non-Latino Whites. However, there is limited knowledge regarding causes and mechanisms related to ADRD health disparities among Latinos partially due to lower research participation and brain donation rates. Family members play a pivotal role in increasing brain donation rates, particularly, among underrepresented groups. In this study, we examine the perceptions of brain donation among adult children of older Latinos. We invited Latino men and women (N=15) with a parental-figure who was 65 years and over to participate in one of three focus groups. During the focus groups, participants discussed the meaning of brain donation for research, reasons to donate or not, and their reactions to the possibility of their parental-figure being a brain donor. All focus groups were audio-recorded and transcribed with transcripts used for data analysis. We used a Grounded Theory Approach to analyze focus group data. Results yielded three themes: (1) social and cultural factors influencing a family’s willingness to support organ donation; (2) lack of knowledge about the brain donation process; and (3) recommendations for engaging more Latinos in ADRD research and brain donation. Findings provide insight into how family participation may facilitate increased brain donation rates in ADRD studies among older Latinos. A main recommendation for researchers is to adopt a family-centered approach throughout the research process with a focus on addressing information gaps - from recruitment to dissemination.

PERCEPTIONS OF BRAIN HEALTH AND INTEREST IN PARTICIPATING IN BRAIN HEALTH RESEARCH AMONG ADULTS AGE 50 TO 64
Erica Solway,¹ Donovan Maust,² Matthias Kirch,³ Dianne Singer,² Jeffrey Kullgren,² and Preeti Malani,³ 1. Institute for Healthcare Policy and Innovation, University of Michigan, Ann Arbor, Michigan, United States, 2. University of Michigan, Ann Arbor, Michigan, United States, 3. University of Michigan Medical School, Ann Arbor, Michigan, United States

Evidence suggests it may be possible to reduce the risk of developing dementia during midlife. The University of Michigan National Poll on Healthy Aging (NPHA), a nationally representative online survey, sought to determine to what extent adults age 50 to 64 anticipate and worry about developing dementia, are taking steps to prevent dementia, and are likely to participate in dementia-related research.