gender, age, and lower socioeconomic status, older African American women are at increased risk for poor health outcomes as they attempt to “age in place.” We conducted a scoping review of “aging in place” studies in the US (N=479), to determine whether current “aging in place” frameworks included issues relevant to racial/ethnic minorities generally, and African American women, specifically. Our inclusion criteria for articles were as follows: 1) a definition of “aging in place”; 2) a conceptual framework related to “aging in place” and/or 3) the incorporation of racial/ethnic minorities generally and African-American women specifically in the research sample. We adapted the PRISMA (Preferred Reporting Items for Systematic reviews and Meta-Analyses) framework for our review to search the PubMed database for “aging in place” studies. After applying our inclusion/exclusion criteria (N=244), the findings from our review showed that approximately 40% of studies included an explicit definition of “aging in place” (N=100), but few studies focused on African American women (N=20). Future studies on “aging in place” should consider the unique challenges that African American women face as they navigate the challenges of “aging in place.”

CREATING AN AGE-FRIENDLY COMMUNITY IN AFFORDABLE HOUSING USING A RESIDENT HEALTH RISK ASSESSMENT FOCUSED ON THE 4MS
Jennifer DeGennaro,1 Sherry Pomerantz,1 Margaret Avallone,2 Melonie Handberry,3 and Elyse Perweiler,4 1. RowanSOM, Stratford, New Jersey, United States, 2. Rutgers University-Camden, Camden, New Jersey, United States, 3. Fair Share Housing, Camden, New Jersey, United States, 4. Rowan University School of Osteopathic Medicine, Stratford, New Jersey, United States

The NJGWEP team in partnership with Fair Share Housing/Northgate II (NGII), an affordable housing complex in Camden, NJ, employed an iterative quality improvement process to collaboratively develop a Resident Health Risk Assessment (RHRA) to meet the needs of the housing facility and incorporate the essential elements of the 4Ms framework (Mentation, Medication, Mobility, and What Matters). Using the RHRA, NG II social services staff and Rutgers School of Nursing (RSoN) students were trained to collect health information and administer several evidence-based screening tools (i.e., MiniCog, TUG, PHQ-2). A final element of the RHRA still in development is the documentation process of referral and follow-up based on personalized care plans. Since July 2019, 43 RHRA have been completed (60% female, mean age 66, age range=43 to 88). Almost all residents (94%) have at least 1 chronic condition (HTN, DM, COPD, CHF), although only 26% have an advance care plan. Most (81%) were screened for future fall risk; function (ADLs/IADLs) was assessed for all (100%). Every resident who was able or did not refuse (88%) was screened for cognitive impairment. Just 7% were taking a high-risk medication (i.e., an opioid or benzodiazepine). The NJGWEP team has initiated an age-friendly community at NGII by providing education on geriatric-focused topics and implementing the 4Ms-focused RHRA to detect issues impacting the resident’s well-being. Establishing a follow-up process to track referrals to available resources will enable NGII to allow residents to age in place with appropriate supports.

ENHANCING ACCESS TO HOME MODIFICATION FOR OLDER ADULTS: RESEARCH RESULTS OF A NATIONAL SURVEY OF STATE UNITS ON AGING
Julie Overton,1 Jon Pynoos,1 Emily Nabors,1 Damon Terzaghi,2 and Bernard Steinman,3 1. University of Southern California, Los Angeles, California, United States, 2. ADvancing States, Arlington, Virginia, United States, 3. University of Wyoming, Laramie, Wyoming, United States

With aging populations and cost constraints, state home and community-based care (HCBC) systems are increasingly being challenged to support older adults at home. Home modifications (HMs), changing the home environment to support health, safety and independence, has been found to be cost effective, improve quality of life, and help prevent falls. While the passage of the Older Americans Act in 1965 made State Units on Aging (SUAs) the designated state-level agencies responsible for developing and administering assistance to older adults, little is understood about the extent to which they prioritize, implement, and fund HM services. In the last decade, new developments have elevated HM on the public agenda, yet the creation of policies and programs depends on a solid knowledge base. Funded by the Administration for Community Living, the University of Southern California and ADvancing States conducted a survey of the 56 SUAs to ascertain HM efforts, targeting, Older Americans Act fund allocation for HMs, collaboration with other state entities, needs and challenges, legislation, and accomplishments. With a response rate of 91% SUAs (N = 51), the survey revealed: 88% of SUAs engage in HM efforts with most (61%) integrating HMs within HCBC and long term care programs; 74% work with their State Medicaid Office on including and delivering HMs via waivers; and the most pressing needs as funding and more HM providers. Analysis showed great variation of SUA involvement in HMs based on the state size, SUA location within the state government, and connections with other state agencies.

FACTORS THAT INFLUENCE LENGTH OF MEMBERSHIP IN A CUSTOMER-DRIVEN ORGANIZATION: A VILLAGE
Joonyoung Cho, Ruth Dunkle, and Karen Harlow-Rosentraub, University of Michigan, Ann Arbor, Michigan, United States

Membership is a critical feature of the survival of customer-driven organizations. As a membership-driven organization based on neighbors helping neighbors, many Villages express difficulty in having enough members and lack confidence in sustainability. This is the first study examining the association between length of membership and motivation for becoming a Village member. ShareCare, the first Village, was founded in 1994. We used an open-ended questionnaire to gather information from a representative sample of current Sharecare members (N=100). Three researchers were involved in coding responses with discrepancies resolved via collaborative discussion. Length of membership was categorized as: less than 10-years, and more than a 10-year membership. Motivations to join membership in ShareCare were categorized as: instrumental, social, and altruistic. We conducted three separate logistic regressions with covariates controlled to examine associations between length of membership and
various motivations to become a ShareCare member. While the most frequent reason for joining was instrumental where the member would receive service (e.g., care coordination, and home visit), the least motivation for joining was altruism, where the member could help other members (e.g., running errand, and lawn care). More than a 10-year membership was not associated with social or instrumental motivation to join ([OR] 0.50, p = 0.27, [OR] 0.94, p = 0.95) whereas more than a 10-year membership was associated with altruistic motivation to join ([OR] 5.31, p = 0.02). Our findings provide guidance regarding motivating members to join and maintain membership in a consumer-driven organization.

FINANCIAL RESOURCES AND LATER-YEAR RELOCATION FROM THE ANNUITIZED ASSESSMENT OF INCOME AND ASSETS
Jun-Hong Chen,¹ and Sojung Park,² 1. Washington University in St Louis, Saint Louis, Missouri, United States, 2. Washington University in St. Louis, St. Louis, Missouri, United States

Solid evidence has shown financial resources play important roles in housing decisions among older adults. Despite the growing research on the joint assessment of income and assets as valid economic well-being, little attention is paid to its role in relocation in old age. Drawing from the Behavioral Model of Elderly Migration, this study examined to what extent financial resources are associated with the likelihood of moving in later years. The data came from the 2017 Panel Study of Income Dynamic (PSID). A sample of 1354 people, 65 years and older, was used in the analyses. We used the annuitized approach, which is different from conventional approaches that assume people draw down all available assets to satisfy daily needs and leave no assets for use in later years. We (1) assessed annuitized assets based on the 2019 IRS Mortality Table, (2) assessed yearly income using supplementary income (i.e. income plus non-discretionary expense). A final indicator of the summed score was used in a logistic regression to predict the likelihood of moving. A set of covariates known to affect later-year relocation at an individual level (e.g. health condition, living arrangement change), environmental level (e.g. rural, non-metro area) are controlled for. In clear conflict with previous findings, we found annual financial resources did not significantly influence relocation among older adults. The notable absence of the well-known role of the economic factor provides critical initial evidence about the importance of simultaneous assessment of financial resources for the literature on later year relocation.

IDENTIFICATION OF RESEARCH TRENDS IN AGING IN PLACE USING TEXT MINING ANALYSIS
Ha Neul Kim, and Seok In Nam, 1. Yonsei University, Seoul, Republic of Korea

Since 1980s professionals and social service providers have focused on aging at the place where people lived. This is the initial concept of the Aging in Place (AIP). Over 40 years, the topics have developed and extended to other disciplines welcoming different perspectives in the study of AIP. Therefore, this study aims to understand the overall research trends in Aging in Place (AIP) studies using text mining analysis to track the evolvement of AIP subtopics not only in Gerontology but also in various fields. To identify the topic trends, we collected the titles, abstracts, and keywords from 1,372 international articles that were published from 1981 to 2019. Then, keywords were extracted and cleaned based on precedent literature and discussions. We analyzed the keywords based on the degree of centrality and visualized the keyword-networks using VOSviewer and Pajek. Top-most popular keywords are “independent living”, “housing”, “older adults”, “home care”, “daily life activity” and “quality of life.” The change in topic trends shows that in the 1980s to early-2000s, research focused on organization and management level of intervention, home(housing) for the older adults, long term care. In the mid-2010s, health-related topics such as daily life activity, health service, health care delivery and quality of life have emerged. Recently, the topics have extended further to technology, caregiver, well-being, and environment design, environmental planning that support independent living of oneself. The research result shows that the interdisciplinary approach regarding AIP is not only inevitable but also encouraged for an in-depth discussion of the field.

INFORMAL VOLUNTEERING HELPS OLDER ADULTS STAY PUT TOO! BUT, DOES GENDER MATTER?
Huei-wern Shen,¹ and Tam Perry,² 1. National Taiwan Normal University, Sintien, New Taipei, Taiwan (Republic of China), 2. Wayne State University, Detroit, Michigan, United States

Many older adults desire to remain in one's home for as long as possible, and many factors have been identified to be helpful, such as formal volunteering (doing unpaid work for religious, educational, health-related or other charitable organizations). While many older adults volunteer formally, many others volunteer informally (providing unpaid help to friends, neighbors, or relatives who did not co-reside). However, less is known about the relationship between informal volunteering and relocation. Guided by the social and material convoy framework, the present study explores the intersection of gender, informal volunteering, and relocation (no move, move within area, and move out of area). Utilizing data from 2008 and 2010 Health and Retirement Study, 8,361 older adults who were 65 and above in 2008 were included. When older people’s financial resources, health, environment, and demographics were controlled, findings from multinomial logistic regression showed that older adults who volunteered informally were less likely to move within area two years later. When stratified by gender, it was found that female (n=4,832) volunteered informally in 2008 were less likely to move within area within two years, too; whereas for male (n=3,529), those who informal volunteered in 2008 were less likely to move out of area in 2010. According to the findings, informal volunteering helps older adults stay put. Future research is needed to understand why informal volunteering helps reduce short distance moves for women but helps reduce long distance moves for men.

ISLAND AGING IN THE NINTH DECADE AND BEYOND
Elaine Eliopoulos, PhD student, Weston, Massachusetts, United States