(Inter-coder reliability .65 to .92). The index is intended to serve organizations as a self-assessment tool and allow for benchmarks among peers. We operationalized each dimension to be assessed with short scales on the organizational level. Reliability and criterion validity was ensured upon existing scales for the various domains in pilot studies with 30–50 organizations. We aim to validate the effects of the index on organizational outcomes (performance, retirement age, illness absence) within a study among Germany companies by the end of 2018.

PERCEIVED AND UNMET NEEDS FOR HEALTH AND SOCIAL SERVICES IN PUBLICLY SUBSIDIZED SENIOR HOUSING

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This qualitative research study investigated resident service coordinator (RSC) perspectives on publicly subsidized senior housing residents' unmet needs for formal health and social services. Lower-income older people can struggle with a variety of physical and mental health problems, making it challenging to successfully age in place. However, there is limited knowledge on health and social service needs for this population. Research was conducted at ten subsidized senior housings in New Hampshire and Southern Maine, serving rural and suburban communities. Researchers conducted one-on-one semi-structured interviews with RSCs to understand availability, accessibility, affordability, and quality of health and social services in these senior housings. These interviews focused on how RSCs support their residents in gaining the knowledge and resources to engage in the community socially and for health services utilization. We found that RSCs consistently identified help with homemaking (e.g., housekeeping, applying for assistance, connecting with home-help agencies) as the primary service requested by residents. More frequent within-residence activities and increased access to transportation were also cited as common service requests. The RSCs often reported finances and transportation as major barriers to service utilization and engagement with the broader community. The RSCs identified best practices to support their residents' access to community-based social and health services, including providing no-cost access to educational programs, preventative healthcare (e.g., flu clinic, blood pressure clinic) and health interventions (e.g., glasses, hearing aids). Such practices help RSCs to achieve the ultimate goal of improving their residents' quality of life.

PERCEIVED NORMATIVE PRESSURES ABOUT REPORTING TO ADULT PROTECTIVE SERVICES

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The Theory of Planned Behavior (TPB; Fishbein & Ajzen, 2010) provides a useful framework to explore professional reporting of suspected elder abuse to Adult Protective Services (APS). The theory posits people's intention to perform a behavior is influenced by attitudes, subjective norms, and perceived levels of control toward that behavior. Using TPB as a conceptual guide, I collected surveys and held semi-structured interviews with 21 Master's level social workers practicing in community-based and hospital settings (not long-term care). This poster answers the questions: What

are social workers' beliefs about the professional norms regarding reporting to APS? What themes surfaced about the professional normative pressures for or against reporting? Theoretically, professional norms influence professional behaviors, like reporting, and are established by professional codes of ethics, formal training, and informal workplace contacts. I present survey results showing respondents' beliefs about people's level of approval for reporting to APS. Results reveal respondents most frequently rated supervisors as "strongly approving", administrators as "approving," clients as "somewhat approving," and family members as "disapproving" of reporting. Interviews provided a more nuanced picture of these normative beliefs about colleagues and clients. Using the themes that emerged, I provide a graphic representation of how social work ethics, colleagues' opinions, and clients' views seem to contribute to pressures for or against reporting. Results indicate respondents felt distressed because they experienced mixed pressures, both for and against reporting. A consistent belief about consulting with colleagues before reporting clients to APS surfaced. I highlight implications for clinical practice and workplace policy.

SESSION 2635 (LATE BREAKER - POSTER)

LATE BREAKER POSTER SESSION 4

RELATIONSHIP WITH FRIENDS AND EXPECTANCY OF NURSING HOME USE IN THE HEALTH AND RETIREMENT STUDY.

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Little is known whether relationship with friends acts as a push or pull factor for future nursing home use based on Wiseman's Behavioral Model of Elderly Migration (Wiseman, 1980). Using the 2014 Health and Retirement Study (HRS) dataset, this study looked at the association between relationship with friends and expectation of nursing home use in the future among U.S. older adults aged 65 and older. There were 3,772 respondents who completed the 2014 HRS Leave-Behind Questionnaire. Their average age was 75.26 years old, with the majority being female (58.7%), non-Hispanic White (78.3%), married (61.1%) and have a child (94.6%). Results indicated that negative relationship with friends was significantly associated with the expectation of nursing home use in the next five years among older adults (RRR = 1.258, $p = 0.035$). However, no significant relationship between positive relationship with friends and expectation of nursing home use in the future was found. Models were controlled for respondents age, gender, race/ethnicity, education, household income, marital status, child status, self-rated health, Activity of Daily Living (ADL), and Medicaid status. Therefore, our findings indicated that older adults who did not enjoy good relationship with their friends were more likely to expect the use of nursing homes in the future.

RESILIENCE AND MENTAL HEALTH AMONG OLDER KOREANS: FOCUSING ON DEPRESSION AND MENTAL WELL-BEING

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With the development of positive psychology perspective in recent years, a number of research on mental health are targeting on examining both pathology and positive constructs such as mental well-being. However, this has not been well investigated among Korean older adults. Therefore, this study was aimed to examine the association between resilience and mental health (both negative and positive aspects) among individuals aged 65 and older in South Korea. The study sample was drawn from a community-based survey including 2,004 older adults. The dependent variables were measured with depression and mental well-being. Depression was measured by the Center for Epidemiological Studies-Depression (CES-D) 10 items (Cronbach's $\alpha = 0.874$). Mental well-being was measured by the Korean version of the Mental Health Continuum-Short Form (K-MHC-SF; Cronbach's $\alpha = 0.937$). The independent variable, resilience, was measured with the Connor-Davidson Resilience Scale (C-DRS; Cronbach's $\alpha = 0.948$). Adjusted for age, gender, region, education, living arrangement, religion, employment, income, and self-rated health, resilience was negatively associated with depression among older adults ($p < .001$), while it was positively associated with mental well-being among Korean older adults ($p < .001$). The study findings suggest that resilience can promote mental health in later life. Implications for older adults suffering from mental health problems are also discussed.

RESPIRE CARE NEEDS OF INFORMAL CAREGIVERS IN CHINA: THE ROLE OF CARE NEEDS CHANGE

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This research examined factors associated with the intention to use respite services from the perspective of informal caregivers of elderly people, with the aim of stimulating the use of community services and bridging the gap between formal and informal care. 523 pairs of elderly people and their caregivers who successfully completed the 2013 and 2016 follow-up surveys from the Longitudinal Study on Family Caregivers for Frail Older Adults in Shanghai were included in data analysis. Two logistic regression models were adopted, with one model including factors based on the Anderson Model and the other one adding longitudinal changing factors. Results of this study indicated that the model with changing factors had greater explanatory power ($R^2 = 0.29$) than the original Anderson Model on factors influencing the intention to use respite service of caregivers of the elderly people. Caregivers experiencing caregiver change (caregiver changes from son to daughter: $OR = 4.84$, $p < 0.05$) and taking care of elderly people with decreasing function of feeding ($OR = 21.83$, $p < 0.001$) but improving function of grooming ($OR = 4.42$, $p < 0.05$) for ADL were more likely to report their respite service needs, while caregivers caring for elderly people with more changes in number of illness ($OR = 0.84$, $p < 0.05$) and decreasing function of dressing ($OR = 0.25$, $p < 0.05$), bathing ($OR = 0.41$, $p < 0.05$) and bladder care ($OR = 0.36$, $p < 0.05$) for ADL were less likely to report their respite service needs. The identified factors associating with caregivers' respite service needs in this study provided

evidence for the importance to monitor the change of care needs in community service planning and intervention.

RETIREMENT ATTITUDE DRIVES LONG-TERM EFFECT OF RETIREMENT PREPARATION ON PSYCHOLOGICAL HEALTH OF CHINESE RETIREES

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Recent findings on preparation for retirement found its positive impact on psychological health of retirees (Yeung, 2013; Yeung & Zhou, 2017). Yet, individual attributes, such as retirement attitude, received less attention when investigating the mechanism of long-term effect of retirement preparation on psychological health. Attitude on aging and retirement significantly influences well-being and longevity of older adults (Lakra et al., 2012; Low et al., 2013; Ng et al., 2016). Retirement attitude, on the other hand, is affected by how prepared individuals are for retirement (Reitzes & Mutran, 2004). Reasoning from previous findings, we posit retirement attitude may explain the relationship between retirement preparation and long-term psychological health after retirement. A three-wave longitudinal study was conducted in a sample of 130 Hong Kong Chinese retirees (mean age = 58.48, $SD = 3.44$; 58.5% males). Data were collected 6 months prior to retirement (T1), and 6 and 12 months (T2 and T3) after retirement. We measured their pre-retirement preparation, retirement attitude, and psychological health. Consistent with our prediction, there is a significant indirect effect of T1 retirement planning on T3 psychological well-being ($B = .007$, $SE = .004$, $[.001, .015]$), life satisfaction ($B = .023$, $SE = .011$, $[.005, .049]$), and psychological distress ($B = -.009$, $SE = .004$, $[-.017, -.002]$) through T2 retirement attitude. These results remain significant even after controlling for age, gender, and the respective well-being variable and retirement attitude at T1. These findings reveal the role of retirement attitude in post-retirement adjustment. Implications for public health and policy making are further discussed.

RETIREMENT TRANSITIONS AMONG EMERITI AND THEIR PARTNERS: IMPLICATIONS FOR PROGRAM DEVELOPMENT

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The transition to retirement marks a monumental occasion in the lives of couples. Past research has focused on easing the stresses associated with this life event. Some suggestions include: Making concrete plans about activities that can be done together, and setting aside time to continue in individual pursuits; Synchronizing the timing of retirement; Communicating concerns and fears to foster greater support. However, few studies to date have focused on identifying and assigning valence to the cause of these stressors and determining the extent to which partner discussion can facilitate a resolution. Thus, three important questions remain: What exactly are individuals thinking about as they transition to retirement and to what degree are each of these issues considered? Which issues were discussed and resolved by couples during this transition? Which of these issues remain