caregiver burden and depression among Chinese caregivers of older adults with cognitive impairment. Data came from structured interviews with 300 primary family caregiver-care recipient dyads in Wuhan, China. We used OLS to examine the association between coping strategies and caregiver burden and depression. More positive reframing and acceptance were associated with lower caregiver burden, whereas more self-distraction was associated with higher caregiver burden. More positive reframing was associated with lower caregiver depression, whereas higher self-distraction and religion were associated with higher caregiver depression. Findings of this study suggest that a psychosocial intervention package that emphasizes on enhancing positive reframing skills and affirming acceptance may be effective in reducing caregiver burden and depression among Chinese caregivers of older adults with cognitive impairment.

## IMPACT OF COVID-19 ON MEANING MAKING OF DEMENTIA CAREGIVERS IN HONG KONG: FROM THE GENERATIONAL PERSPECTIVES

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This study examined the impact of COVID-19 on meaning making among adult children dementia caregivers and the association with caregiver mental well-being. Adult caregivers (n=601) from two generations, 1946-1964 (Baby Boomers) and 1965-1980 (Generation X), were recruited in Hong Kong between October 2019 and June 2020. Participants were assessed on depressive symptoms (PHQ-9) and meaning making (Finding Meaning Through Caregiving Scale-FMTC). Generation X scored higher on sense of loss (p = 0.04) and lower on provisional meaning of FMTC (p=0.017). Moreover, an interaction effect (p=0.003) between generation and COVID-19 were found. During the pandemic, Generation X caregivers were more likely to suffer from higher losses, higher depressive symptoms (>23.2% moderate to severe) and lower provisional meaning (p=0.03) compared to their boomer counterparts. The level of meaning making is more important to Generation X caregivers, especially in COVID-19 situation. Government should consider generation-responsive services and education support in guiding service implementation.

#### Session 2435 (Paper)

### Neighborhood Environments and Aging

# NEIGHBORHOOD CHARACTERISTICS AND ACCELERATED AGING: EVIDENCE FROM THE HEALTH AND RETIREMENT STUDY

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An individual's rate of aging directly impacts one's functioning, morbidity and mortality. Identifying factors related to accelerated or delayed aging may provide important information for potential areas of intervention. While race/ethnicity, socioeconomic status and behavior characteristics have been linked to biological aging, it is unclear whether

neighborhood characteristics are associated with one's rate of aging. We use a novel aging measure, Expanded Biological Age, from the 2016 Health and Retirement Study Venous Blood Study (HRS-VBS) to investigate whether individuals living with unfavorable neighborhood conditions are experiencing accelerated aging compared to those living in more favorable conditions. We constructed a summary measure of expanded biological age using 22 novel biomarkers in the HRS-VBS; we then regressed the summary measure on age and used the residuals as indicators of accelerated or delayed aging. We measured neighborhood physical disorder, presence of green space, and perceived social cohesion using the 2016 HRS Interviewer Observation data and Self-Administered Questionnaire. We find that individuals living with higher levels of neighborhood physical disorder appeared 1.05 years older biologically than the average for those of the same chronological age. Individuals living near green space including parks were 1.5 years younger biologically than expected based on their chronological age though this association was marginally significant. We did not find an association between neighborhood social cohesion and accelerated aging. This implies that living with severe neighborhood disorder, characterized by presence of disrepair, trash/litter, and abandoned structures, and living near green space, play an important role in who lives longer.

### NEIGHBORHOOD COHESION AND THE MENTAL HEALTH OF MULTIMORBID OLDER ADULTS: CLSA PATH ANALYSIS THROUGH LONELINESS

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More older adults with multimorbidity are aging in place than ever before. Their mental health may be affected by housing and neighborhood factors. In this paper, we use structural equation modelling (SEM) to examine how the physical environment influences life satisfaction and depressive symptoms in two separate models. We included social environment (i.e., social support, social participation, walking) and loneliness as intermediate variables. Data were drawn from baseline and the first follow-up (after 3-4 years) of the Canadian Longitudinal Study on Aging (CLSA). Participants were N=14,301 adults aged □65 with □2 chronic illnesses. Good model fit were found after controlling for age, sex, education and baseline values (TFI=1.00; CFI=1.00; RMSEA<0.001; SRMR<0.001). The total effects of housing quality (Btotal=0.08,-0.07) and neighborhood cohesion (Btotal=0.03,-0.06) were weak but statistically significant in the expected direction. Together, the intermediate variables explained 21-31% of the total effects of housing quality and 67-100% of the total effects of neighborhood cohesion. Loneliness explains 27-29% of the total effects of physical environment on mental health, whereas walking explained a mere 0.4-0.9% of their total effects. Walking did not mediate between housing quality and mental health outcomes. Overall, the results support our path analysis framework: physical environment -> social environment -> loneliness -> mental health. Our model provided excellent explanations of the effects of neighborhood cohesion, especially on life satisfaction. If these associations reflect causal effects, community-based age-friendly interventions should focus on neighborhood cohesion and loneliness to promote