

social relations at different points in the life course. Cleary and colleagues focus on racial disparities in psychological health by testing cross-sectional effects of intergenerational stress over time. In particular, they investigate effects of network composition on the relationship between mothers' stressors and their children's depressive symptoms at three time points over 23 years. Camacho and colleagues use longitudinal data from the National Social Life, Health and Aging Project to examine cognitive decline among U.S. African-American, Latino, and White adults aged 60 and above. Results indicate loneliness predicted greater global cognitive decline over time in all groups. However, race differences in this association were found across cognitive function domains. Turner and colleagues consider dementia caregiving challenges among non-Hispanic Blacks. Data from five focus groups were analyzed to reveal distinctive challenges to caregiver health during the COVID-19 pandemic including increased burden and barriers to service access. Finally, Sol and colleagues examined the bidirectional association between loneliness and self-rated health over time among a racially diverse sample. Findings illustrate racial patterns in how loneliness at midlife influences health in later life. Antonucci will discuss the role of stress from social relations as a means to fully understand racial disparities in health across the life course.

MATERNAL STRESS, FAMILIAL TIES, AND CHILDREN'S WELL-BEING ACROSS 23 YEARS

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According to the family stress model, parental stress impacts child well-being through several mechanisms, which may be amplified in ethnic/racial minority families given increased experiences of stress. We extend this model to examine associations between maternal stress and child well-being at three points spanning 23 years, beginning when children were aged 8-12 years and mothers were aged 24-59 (n=193 dyads). Preliminary results indicate that maternal stressors are associated with increased depressive symptoms in childhood (B=3.56, p<0.001), and this association was stronger among Black children compared to White (B=4.12, p<0.001). Effects of maternal stress on children's depressive symptoms strengthened among White children with proportionally larger kin networks (B=0.05, p<0.001). However, this association weakens as children enter adulthood. Future work will focus on identifying social resources that account for changes in the intergenerational effects of stress.

CHALLENGES IN RESOURCE UTILIZATION FOR CAREGIVERS OF PERSONS WITH DEMENTIA: A QUALITATIVE STUDY

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This study highlights primary caregivers' experiences with health department policies designed to support people with cognitive impairment/Alzheimer's Disease and Related Dementias (ADRD). Caregivers were defined as individuals aged 45-85 that provide at least 10 hours of unpaid care. Five, 90-minute focus groups were conducted virtually with 24 caregivers of individuals with cognitive impairment/ADRD. Transcripts were analyzed thematically. Caregivers were primarily Black females (75%) with at least a high school education (42%). Care recipients were likely to be community-dwelling parents (71%), with moderate or advanced (79%) dementia. Caregivers described challenges with accessing resources intended for care recipients, especially as cognitive impairment worsened. Caregivers reported providing care 24/7 as traumatizing. Home-based personal aides and companionship services did not reduce this burden. COVID-19 impacted caregivers and care recipient's access to resources increasing burden. Policies need to be flexible for ever-changing needs of individuals with ADRD and support the overall well-being of the caregivers.

LONGITUDINAL ASSOCIATIONS BETWEEN LONELINESS AND SELF-RATED HEALTH

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Cross-lagged structural equation models examined the bidirectional association between loneliness and self-rated health over three time points. We adjusted for age, gender, network size, and depressive symptoms at baseline. At baseline, the sample was 28% Black and 40% male. Average age at time 1 was 46 years, 56 years at time 2, and 63 years at time 3. Results indicated that loneliness at time 1 was associated with loneliness at time 2; loneliness at time 2 was associated with loneliness at time 3. We had similar findings for associations among self-rated health. However, only one of the cross-lagged paths was significant. Specifically, more loneliness at time 2 was associated with worse self-rated health at time 3. These associations did not vary across black and white race. Findings indicate that loneliness at later midlife may be detrimental to later life health, regardless of race.

LONELINESS AND CHANGES IN COGNITIVE FUNCTIONING AMONG RACIALLY DIVERSE OLDER ADULTS IN THE UNITED STATES

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Longitudinal studies examining the association of loneliness with cognitive decline rarely include older members of racial minorities. Guided by a Minority Stress Framework, we used Waves 2 and 3 from the National Social Life, Health, and Aging Project to assess whether loneliness (UCLA-3-items) at W2 predicts cognitive decline (Chicago Cognitive Functioning Measure) among US African-American, Latino, and white older adults (ages≥60). We included interactions of W2 loneliness with race in examining changes in cognitive