## PREDICTORS OF MENTAL HEALTH DURING THE COVID PANDEMIC

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Health professionals have been concerned about mental health of older adults during the COVID pandemic. To explore their experiences, we conducted an online survey of community-dwelling older people to examine their mental health related to stress, based on Pearlin's Stress Process Model. A snowball approach was used; we sent recruitment e-mails through senior organizations and contacts with e-mail lists of potential participants; there were 504 respondents. We used regression analysis to explore predictors of mental health based on Pearlin's model. Background characteristics included age (m = 75.7, SD 4.95), gender (77.4%female) and race (White = 93.4%). The CESD-10 provided a measure of mental health. Scores indicated 62.3% of the sample scored in the low range for depressive symptoms and 37.7% in the moderate to high range. Stressors were measured using the Perceived Stress Scale that includes subscales of perceived helplessness and perceived self-efficacy. We also measured perceived social Isolation, and current life space as predictor variables. Results of regressing the CESD-10 onto the set of theoretical predictors revealed that the inclusion both subscales of the Perceived Stress Scale, social isolation, and current life space jointly accounted for approximately 63.0% of the variability in the outcome beyond the baseline model (FChange[4, 449] = 211.15, p < .01), which included age, race, and gender. The model overall, accounted for approximately 66.5% (R2adjusted = 66.0%) of the variability in CESD-10 scores, (F[7, 449] = 127.473, p < .01). Addressing stress among older adults is important to help them maintain positive mental health.

# SOCIAL CONNECTIVITY IN THE CONTEXT OF COVID-19 AND LONG-TERM CARE

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The COVID-19 pandemic has disproportionately impacted older adults, particularly those residing in long-term care homes (LTCHs), causing immense loss of life and resulting in overall health declines in LTCH residents. These vulnerable older adults have also experienced extreme loneliness, anxiety and depression. Social connectedness is an important contributor to well-being and quality of life of older adults in LTCHs and family members are an essential component to this. However, restrictions driven by policies to protect resident safety, have constrained family members' access to long-term care homes and limited in-person contact between residents and their families. In their absence, health providers have been integral to supporting connections between residents and their families within LTCHs.

This study aimed to understand the experiences of social connectedness between residents and family members who have been physically separated due to the current pandemic and, to examine LTCH health providers' experiences and responses to support social connectedness. Using a qualitative descriptive design, in-depth semi-structured interviews were conducted with 21 family members and 11 healthcare providers. Emergent themes from qualitative content analysis are: (a) all-encompassing impacts of separation; (b) advocacy became my life; (c) the emotional toll of the unknown; 4) the burden of information translation; 5) precarious balance between safety and mistrust for the healthcare system; and (d) a formulaic approach impedes connectivity. A more comprehensive understanding of the experiences and support needs of LTCH residents and their family members within the context of a pandemic can inform practice approaches to support social connections going forwards.

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### Mental Health of Older Adults

#### ASSOCIATION BETWEEN POST-TRAUMATIC STRESS AND DEPRESSION AMONG OLDER PUERTO RICANS: HOW DOES LONELINESS MATTER?

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Puerto Ricans have a significantly higher prevalence of post-traumatic stress disorder (PTSD) than other racial and ethnic groups. PTSD can lead to co-morbid depression, which exacerbates the risk for compromised mental and physical health among older adults. Loneliness, a robust indicator of poor social support, is likely to worsen the dysphoric symptoms of PTSD and increase the risks of depression. However, few studies have focused on the moderating role of loneliness on the association between post-traumatic stress and depression. This study examines the association between post-traumatic stress and depression and whether such an association differs by loneliness among older Puerto Ricans. Data were collected from 304 Puerto Ricans aged 60-81 living in the Greater Boston area who responded to questionnaires in a survey. We used ordinary least squares regression to examine the association between post-traumatic stress, loneliness, and depression. We found that post-traumatic stress was significantly associated with higher levels of depression; however, the association was contingent on experiences of loneliness. The association between post-traumatic stress and depression was stronger for those experiencing a higher degree of loneliness. Findings underscored the role that loneliness plays in exacerbating the risk of developing co-morbid PTSD and depression among older Puerto Ricans. In working with older Puerto Ricans experiencing post-traumatic stress, it is important for mental health professionals to incorporate the assessment of loneliness and