HOME CARE RESILIENCY DURING THE COVID-19 PANDEMIC: OLDER ADULT-HOME CARE AIDE DYADS' PERSPECTIVES

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Homecare has increased its value as an alternative to nursing homes and adapted to evolving COVID-19 challenges. However, little is known about how COVID-19 has impacted community-dwelling older adults who need assistance with daily activities, including dressing, cooking, and shopping. Guided by the stress process framework, this mixed-method study examined how older homecare recipients experienced the acute and chronic stress during the first eight months of the pandemic, focusing on the role of home care aides (HCAs) in the context of Medicaid-funded in-home services. Thirty-five dyads of care recipients and HCAs participated in a COVID telephone survey as part of a larger study. Care recipients were typically older minority (40% African American, 31% Latinx) women (77%). Their COVID-related anxiety level, assessed by a 6-item Spielberger State Anxiety Inventory (1 "not at all" to 4 "very much"), was 2.2 (SD=0.9). While COVID-19 drastically reduced contacts with family members and healthcare providers, HCAs continued to provide care in person. One care recipient said, "Fortunately, I still have my HCA come and that keeps me sane." HCAs showed resilience while facing their own family- and work-related stress: "I have followed the rules and just adapted. (COVID) did not affect the activities for my client." Some dyads, however, experienced care disruptions because of COVID infection or fear in one or both parties. COVID-19 has demonstrated homecare resilience at the person-, dyad-, and organization-levels, calling for equitable, sustainable home-based care for a growing number of older adults who desire to stay in the home.

PROVIDER COMMUNICATION AND LONELINESS IN SENIOR LIVING COMMUNITIES DURING THE COVID-19 PANDEMIC

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Prior research has demonstrated the impact of the COVID-19 pandemic on feelings of loneliness, but relatively little is known about loneliness in the context of senior living communities (SLCs). Indeed, the pandemic has led SLCs to enact new safety precautions, including visitor restrictions, intended to reduce the spread of COVID-19, which may have serious consequences for the psychosocial well-being of residents. Drawing on a sample of 733 adults ages 54 to 100 living in one of nine SLCs in December 2020 (response rate = 60%), linear regression models were used to examine whether perceived communication between SLCs and residents during the COVID-19 pandemic influenced feelings of loneliness. Analyses also considered whether this association varied as a function of education. Our findings reveal that 53% of respondents were very lonely during the pandemic. However, older adults who perceived that their SLC had been

helpful to their understanding of the pandemic were significantly less lonely (p < 0.01), adjusting for sociodemographic and health characteristics. Moreover, we found that less educated older adults derived the greatest benefit from effective communication about the pandemic (p < 0.05). Those with less education reported feeling lonelier if they did not perceive that their SLC communicated in a way that helped them better understand the pandemic; there was no such association for those with higher education. The findings from this study provide support for the resource substitution hypothesis and demonstrate the importance of communication in alleviating feelings of loneliness during the COVID-19 pandemic.

SHIFTING INFORMATION-SEEKING BEHAVIORS OF RURAL OLDER AMERICANS DURING THE ERA OF THE COVID-19 PANDEMIC

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This session reports findings on how older rural adults in the Midwest United States adapted their information seeking behaviors in the face of the COVID-19 pandemic. A series of nearly three-dozen interviews conducted during late-summer 2020 capture the experiences of members of this population in their own words. Findings indicate that the experiences of the rural older American during this period were often unique to each individual and cannot be easily explained by a single social or demographic factor. Those participants with greater educational attainment were more likely to use a variety of digital technologies (smartphones, tablets, at-home personal computers) prior to the pandemic and thus experienced fewer challenges finding reliable information when the pandemic began. Those who were married felt less sociallyisolated, but were often more reliant on others to find information for them. Women were more likely than people with other gender identities to use social media to connect and find information, which helped abate feelings of isolation but also made them feel more susceptible to misinformation and information overload. All participants expressed some level of fear or concern that motivated them to seek health information, while many expressed the same motivation in seeking political and economic information. These findings suggest that the information seeking behaviors of rural older adults were dramatically altered by the COVID-19 pandemic, with most becoming more reliant on digital technology to find information, and all being motivated by fear, concern, and/or curiosity to find information about the pandemic.

THE INTERPLAY OF COVID 19, REMOTE CONTACT, AND RACE AS RISK FACTORS FOR DEPRESSION

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There have been concerns about how social distance policies and lockdowns due to COVID-19 have affected lone-liness and depression among older adults in ways that may magnify racial disparities in health. We conducted panel logistic regression analyses with random effects using national data spanning 2004 to 2016 and the COVID-19 module (Wave 2020, administered in June and September) from the

Health & Retirement Study (n=15,504). Individuals living in a nursing home, diagnosed with dementia or Alzheimer's disease, and 64 years of age or younger were excluded from analyses. Age, gender, Hispanic status, education, marital status, working status, wealth, BMI, physical activity, smoking, drinking, and difficulty in meal preparation, eating without help, and grocery shopping were included as control variables. Findings suggest that older adults did not appear to experience increased loneliness during the pandemic relative to prior waves. However, Wave 2020 was an independent risk factor for depression. Greater in-person contact (OR: 0.97, CI: 0.95-0.99, p-val: 0.001) and remote contact (OR: 0.99, CI: 0.97-0.996, p-val: 0.008) were each independently associated with slightly decreased depression. Older Black Americans tended to be more depressed than their White counterparts (OR: 1.50, CI: 1.20-1.86, p-val: <0.001). However, a null interaction between race and wave suggested that Black Americans did not experience more increased depression in 2020 relative to prior waves. Analyses suggest that the COVID-19 pandemic might change at-risk groups for depression and communication by remote technology often considered an inferior but necessary stopgap measure. Implications for practice and policy will be discussed.

Session 9155 (Poster)

COVID-19 AND MENTAL HEALTH AMONG OLDER ADULTS

A COMPARISON OF MENTAL HEALTH IN A SAMPLE OF OLDER WOMEN BEFORE AND DURING THE COVID-19 PANDEMIC

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The COVID-19 pandemic has substantially impacted lives globally. Due to age-related risks, the older adult population has uniquely experienced negative changes caused by the pandemic. Research has also shown that the pandemic has disproportionately affected women. Therefore, it is important to understand how the mental health of older women has been impacted during this global crisis. This study aims to examine the differences in mental health indices in a sample of older women before versus during the COVID-19 pandemic. To date, participants include 201 women (aged 60-94) who completed an online survey of self-report measures assessing depression, anxiety, alcohol use, binge eating, positive affect, and emotional quality of life (QOL). We conducted one-way ANOVAs to compare each mental health construct in two samples of older women collected pre- and peripandemic. Results indicated that the peri-pandemic group reported significantly higher anxiety (F = 5.25, p = .02), with a trend for more role limitations due to emotional problems (F = 2.79, p = .09), than the pre-pandemic group. No

significant differences emerged for levels of depression, alcohol consumption, binge eating, positive affect, or emotional wellbeing between groups. These findings point to the psychological resilience of older adults in the face of extreme adverse events, including this global crisis. Older women, while impacted differently during the COVID-19 pandemic, reported minimal exacerbations of mental health problems compared to older women pre-pandemic. Efforts to identify moderators that may either attenuate or promote further psychological resilience among older adults is warranted.

BENEFIT-FINDING BUFFERS THE EFFECTS OF QUARANTINE ON OLDER ADULTS' MENTAL HEALTH DURING THE COVID-19 PANDEMIC

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Objective: Older adults' health and well-being may suffer due to prolonged social isolation leading to loneliness and increased stress during the COVID-19 pandemic. The current study aimed to address the role of benefit-finding, defined as the capacity to derive meaning and positive aspects from stressful situations, in older adults' adaptation to the effects of quarantine.

Methods: 421 participants aged 50 or above in China participated in an online survey to study the effects of quarantine on loneliness, stress, anxiety, depression and life satisfaction, and the moderating role of benefit-finding.

Results: The results showed that quarantine was basically unrelated to any outcome. Further analysis showed, however, that the effect of quarantine varied by levels of benefit-finding. Only people with lower benefit-finding reported a higher level of loneliness, perceived stress, anxiety and depression, but no relationships were found at higher benefit-finding.

Conclusions: The findings extended our understanding of the role of benefit-finding in buffering the negative impact of adversity on older people. By mitigating the effects of prolonged social isolation, benefit-finding served as a protective factor in older people's adaptation to the sequelae of this pandemic.

CHANGE IN STRESS AND POSITIVE EXPERIENCES AMONG OLDER OREGONIANS DURING THE COVID-19 PANDEMIC

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Several cross-sectional studies have examined stressors and positive events among older adults during COVID-19. We extend these studies by examining changes across time in perceptions of stress and positive experiences. Older adults in Oregon (Mage = 71.1, SD = 7.3, range = 51-95) completed weekly surveys from April 28 to June 23, responding to an adaptation of the Daily Stress Inventory (DISE; Almeida et al., 2002). DISE examines stressors and positive experiences across six domains (health, spouse/partner, other relationships, work/volunteer, finances, and retirement) on a 7-point scale (1 = not at all to 7 = extremely). At baseline, those who felt more stressed were younger, female, and reported more