

across the literature (11.5) indicating that overall participants experienced lower levels of existential suffering compared to those in previous studies. A significant relationship was found between COVID-19 anxiety and burden levels ($x^2 = 9.07, p < 0.05$), with higher levels of COVID-19 anxiety associated with greater burden. A non-significant relationship was found between COVID-19 anxiety and existential suffering ($x^2 = 5.99, p = 0.11$). Results highlight the impact of COVID-19 anxiety as an external stressor on dementia caregiving, and the importance of considering context of external stressors when implementing intervention protocols for caregivers of individuals with dementia.

THRIVING-IN-PLACE: EXAMINING THE IMPACT OF INTERGENERATIONAL LIVING IN THE TORONTO HOMESHARE PROGRAM

Raza Mirza,¹ Melissa Macri,¹ Deirdre Kelly-Adams,¹ Carley Moore,¹ Andrea Austen,² Jacalyn Tanner,³ Jessica Hsieh,¹ and Christopher Klinger,¹ 1. *University of Toronto, Toronto, Ontario, Canada*, 2. *City of Toronto, City of Toronto, Ontario, Canada*, 3. *National Initiative for the Care of the Elderly (NICE), Toronto, Ontario, Canada*

Most global cities, like Toronto, have rapidly aging populations who want to remain in homes and communities of their choice. Concurrently, seniors face vulnerabilities associated with low income, ageism, social isolation and loneliness. These vulnerabilities inhibit many seniors' desires to age-in-place. The Toronto HomeShare Program, an intergenerational homesharing program facilitates aging-in-place by matching seniors with post-secondary students. The program, with an implementation focus and a research study, was developed to address and understand the needs of seniors seeking assistance, light supports and companionship at home, in exchange for reduced-rent housing for students. A mixed methods research design was employed. Seniors and students ($n = 22$) completed a 167 question survey ($n = 22$) and in-depth interviews ($n = 18$). Quantitative data yielded descriptive statistics and qualitative data was subject to thematic content analysis. Participants agreed that homesharing programs could address risk for social isolation (95%), the need to move from their community (96%), and reduce risks of economic and social exclusion for young and old (97%). From the qualitative data, six benefits were apparent for all participants: (1) reduced social isolation and loneliness, (2) increased intergenerational exchange, (3) increase financial security, (4) household assistance, (5) increased general wellbeing; (6) enhanced companionship/safety. In 2020, Toronto HomeShare (now Canada HomeShare) was recognized by the World Health Organization as an age-friendly best practice, and has been scaled nationally in 16 cities. Intergenerational homesharing programs could be a catalyst for policy and cultural reform and to support older adults to not only remain in their communities, but to thrive-in-place.

TOO CLOSE FOR COMFORT? COVID-19-RELATED STRESS AMONG OLDER COUPLES AND THE MODERATING ROLE OF CLOSENESS

Kira Birditt, Angela Turkelson, and Angela Oya, *University of Michigan, Ann Arbor, Michigan, United States*

Married and cohabiting couples have important influences on one another's stress and well-being. Pandemic-related

stress may influence the extent to which couples' stress levels are coregulated. This study examined the experience of nonspecific stress and pandemic-related stress and the moderating role of closeness among couples aged 50 and over in which at least one member had hypertension. A total of 30 couples reported their feelings of closeness to one another in a baseline interview and their feelings of nonspecific stress and pandemic-related stress every three hours for 5 days. There was no difference in closeness and nonspecific stress between husbands and wives. Wives reported greater pandemic-related stress than husbands. Actor-partner interdependence models revealed that wives' nonspecific stress predicted husbands' nonspecific stress ($b = 0.17, SE = 0.04, p < .001$) and that husbands' nonspecific stress predicted wives' nonspecific stress in each three hour period ($b = 0.19, SE = 0.04, p < .001$) and these associations were not moderated by closeness. Coregulation in pandemic-related stress among husbands and wives was moderated by wives' feelings of closeness such that when wives' feelings of closeness were lower, greater husband pandemic-related stress predicted lower pandemic-related stress for wives ($b = -0.16, SE = 0.07, p < .05$) whereas when wives' feelings of closeness were higher, greater husband pandemic-related stress predicted greater pandemic-related stress for wives ($b = 0.22, SE = 0.09, p < .05$). These findings indicate that closeness may have detrimental effects especially when considering emotional coregulation in couples regarding the pandemic.

TREATING CAREGIVER GRIEF WITH NARRATIVE THERAPY

Tara Matta, *University of South Florida, Tampa, Florida, United States*

Dementia, a devastating neurodegenerative disease with over 10 million new diagnoses each year, is characterized by many symptoms including memory loss. Individuals with memory loss experience changes in mood, personality, behavior, cognition and activities of daily living which affect their daily lives. These monumental life shifts often occur rapidly, leaving caregivers unprepared to deal with the changes. Caregivers face a unique situations navigating anticipatory grief and changes in their relationships with their loved ones. Current psychological intervention for caregivers includes utilization of cognitive-behavioral therapy and psychoeducation. More recently, intriguing research has emerged regarding the efficacy of narrative therapy for couples where one partner experiences memory loss. However, treating the anticipatory grief component specifically for caregivers has been largely overlooked in these studies. Narrative therapy revolves around identifying the current story that caregivers utilize as their cognitive framework, helping to find alternative plotlines and to process their newly-built cognitive framework. It involves externalizing the problem (in this case, dementia) and locating strengths that the caregiver and their care receiver share to "fight" the problem. Insights from both the current literature and the field have demonstrated a promising outlook on the use of narrative therapy. Such insights imply a need for more research regarding this modality specifically for caregivers, as its core ideas can be easily disseminated to gerontologists, mental health professionals and caregivers.