

observed time horizon. The results provide evidence that individuals' attitude towards informal care is deeply shaped by the system they grew up in such that migration flows can influence the supply of informal care in the future.

A HOME-VISIT PILOT INTERVENTION TO PROMOTE COMMUNICATION SKILLS AND WELL-BEING FOR DEMENTIA FAMILY CAREGIVERS

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Dementia takes a significant toll on caregivers resulting in their suffering from chronic stress and depression due to responsibility for care for persons with dementia (PWD). Behaviors of PWD could be aggravated by inappropriate responses by family caregivers such as correcting PWD's memories. The study purpose is to examine the feasibility of a home-visit-based intervention designed to promote communication skills with PWD and well-being in family caregivers. This pilot study used a single-arm experimental pre-post design to test the feasibility of 4 weekly home visits for 13 female family caregivers in Southern California (spouse, n=7; adult children, n=6; mean age=64.3, ranging 46-82). Trained home visitors used video scenarios for behavioral education for caregivers. All caregivers completed the entire home visit program. Significantly caregiver burden was decreased from baseline (M(SD)=51.38(4.58)) to follow-up at 5 weeks (M=43.31(5.67), Wilcoxon signed rank test: p=.04). Additionally, caregiver-reported PWD's negative behaviors were reduced from baseline to follow-up (Mbase=22.31(3.52), Mfollowup=19.31(4.4), p=.13). There were other improvements (non-significant) in greater caregiver self-efficacy and less depressive symptoms from baseline to follow-up. Caregiver satisfaction with the intervention was high (M=4.6(0.65) of 5). Qualitatively, participants appreciated the home visits for educational sessions and welcomed the empathy provided. Caregivers expressed better communications and responsiveness to the PWDs. The results showed the home-visit-based caregiver intervention was feasible and had a potential effectiveness on reduction of caregiver burden and possibly on self-efficacy and well-being. A larger-scale study will be needed to demonstrate long term positive effects on caregiver interactive skills and their well-being.

REASONS FOR GRANDFAMILY FORMATION: CHANGING PATTERNS OVER 15 YEARS

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As the number of grandparent-headed households continues to rise, it is vital to examine the changing impetus for the formation of grandfamilies. We compared the reasons for caregiving of custodial grandmothers from a current study (2017-2019: N=236) to a previous study (2002-2003: N=183) to determine whether reasons for caregiving have shifted over the 15 year period. Participants were asked to describe the reason for caregiving in an open ended question. The responses were coded into 17 categories. The percentage of participants who described each category as being a reason of caregiving were compared to determine any changes in reasons for caregiving. In both samples drug use and abandonment were the

top reasons for caregiving. While abandonment shows no change (30% vs 28%), the current study shows a significant increase in drug use (40% vs 21%). The frequency at which child services was involved increased from 10% in the original sample to 28% in the current sample. Instances of violence in the home significantly increased from the original study (0.5%) to the current study (12%). Other reasons, child abuse, death of a parent, financial strain, parental health, and relationship strife, remained similar between the two samples. These data may represent an increase in family life events, but also greater willingness to disclose disruptive family life events. The substantial increase in drug use and violence as reasons for grandparents to become caregivers is concerning and suggests critical direction for clinical practice, research, and policy change to support grandparent caregivers.

ALWAYS TRY TO DO MY BEST: A THEMATIC ANALYSIS OF CHINESE AMERICAN DEMENTIA CAREGIVERS

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Objectives: Given the increasing prevalence of Alzheimer's disease and related dementia (ADRD) in the United States and the rapid growth of the older Chinese American population, many older Chinese Americans are expected to need intensive care because of cognitive impairment. Prior studies on Chinese ADRD caregivers lack comprehensive examinations from a life course perspective that emphasizes the importance of time, context, process and meaning on human development. Using the life course perspective, this study aims to identify challenges and strength of caregiving experience for this population. Methods: We conducted semi-structured face-to-face interviews with 28 Chinese family caregivers of persons with ADRD in New York City. Thematic analysis method was used to assess the interview data. Results: Seven life-course themes emerged from the data. In the domain of challenges, four themes were identified: (1) physical and emotional exhaustion, (2) limited understanding on cognitive health, (3) difficulty in accessing effective and culturally-sensitive health care services for care recipients, and (4) caregivers' inability to do self-care. Other three themes were found in the domain of strengths: (1) commitment to care due to cultural and religious values, (2) emotional closeness as resource to sustain caregiving, and (3) family support and cohesion. Conclusion: This study indicates that the life course perspective is an important lens to understand challenges and strengths of Chinese American caregivers. This study also suggests that health professionals could incorporate the life course perspective into assessment and intervention development when working with minority and immigrant ADRD family caregivers.

PERCEIVED AVAILABILITY OF CARE AND SUPPORT AMONG OLDER ADULTS IN BANGLADESH

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Care for older adults is most precarious in developing countries where poverty and weak state support systems have put the