

adults might possess fewer emotion regulation resources and skills, accounting for their greater distress. In a national sample of 1528 adults, we examined how baseline resources (in mid-April, during initial peak infections) predicted distress (depression, anxiety, PTSD symptoms) five weeks later, when states began initial reopenings. Younger adults reported greater distress and less social support, mindfulness, and emotion regulation skills than did middle aged and older adults.. Controlling for stress exposure, younger adults' distress was predicted by impulsivity and lack of perceived strategies while middle-aged and older adults' distress was predicted by acceptance of negative emotions; perceived social support was related to lower distress for both groups but mindfulness was unrelated. Results suggest that emotion regulation skills are a promising prevention and intervention focus.

LONELINESS, SOCIAL CONTACT, AND HEALTH AMONG OLDER ADULTS DURING THE COVID-19 PANDEMIC

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The COVID-19 pandemic is a challenging situation for many older adults at elevated risk for mortality. Social distancing and lockdown to prevent contagion may result in social isolation and feelings of loneliness, which can have adverse effects on health. We examined how depressive symptoms were associated with between-person differences and within-person variations in loneliness, social contacts, and daily physical problems during 8 weeks. We sampled 247 older adults (Age = 71.1, SD = 7.3, range = 51 - 95), who participated at micro-longitudinal online surveys (baseline and 7 weekly follow-ups) from April 28 to June 23. Multilevel modeling analysis controlling age, gender, marital status, and education showed that depressive symptoms were significantly decreased during 8 weeks. Further, depressive symptoms were positively coupled with both loneliness and physical problems for both the within-and between-person levels. Increase in social contact was related to decreases in depressive symptoms only at the between-person level.

COPING WITH COVID: DOES PRIOR MILITARY SERVICE PLAY A ROLE FOR VIETNAM VETERANS?

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We investigated the impact of earlier military combat on ability to cope with the COVID-19 pandemic in 379 male Vietnam veterans who responded to surveys in 1984, 1998, and 2020. Combat exposure was scored with a validated scale, contrasting lowest tertile (8-15) vs. medium/high (16-40). About one-fourth of veterans (26%) reported that their

military experience made it easier to cope with the pandemic, while over half (59%) said it had no effect. Medium/high-combat veterans were more likely to report that their military experience made coping easier (OR = 1.8, p = 0.03), but were less likely to report no effect of service on their coping than low-combat veterans (OR = 0.40, p<0.001). All 19 respondents (5%) who said military experience made coping more difficult were medium/high combat veterans. Military experience, and combat particularly, affected many of these veterans' ability to cope with the pandemic decades after their service.

INTERGENERATIONAL RELATIONSHIPS AS A RESOURCE FOR RESILIENCE DURING THE COVID-19 PANDEMIC

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The intergenerational ties that offer support to older adults are likely useful for resilience during the COVID-19 pandemic. We analyzed whether positive and negative intergenerational contact was associated with positive pandemic-related personal change. We utilized data collected from 566 adults aged 50 and older between August 2020 and January 2021 via MTurk and a statewide research registry. Participants reported the quality of their contact with younger adults, and whether they experienced positive changes (i.e. new hobbies, healthier behavior, greater meaning in work) as a result of the pandemic. Higher positive, but not lower negative, non-familial intergenerational contact was associated with a higher number of positive pandemic-related changes (estimate = 0.07, SE = 0.03, p=0.02). The quality of familial intergenerational relationships were not associated with positive pandemic-related changes. Non-familial intergenerational relationships may be especially important for resilience, and should be supported during a time when they may be difficult to maintain.

A SOCIAL ECOLOGICAL MODEL OF VULNERABILITY AND RESILIENCE IN OLDER ADULTS DURING THE COVID-19 PANDEMIC

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Objectives: We used a social ecological model to examine vulnerability and resilience among older adults during the COVID-19 pandemic. Methods: We analyzed two open-ended questions included in a survey of 235 respondents, 51-95 years old (M = 71.35; SD = 7.39; 74% female), which asked about COVID-19-related difficulties and positive experiences during the past week. We identified three different levels for difficulties and positives at the personal, interpersonal, and/or societal levels. Results: Fewer than half of the respondents reported on difficulties (41%) and positives (40%) just at the personal level. In terms of crossing levels, people were most likely to report events spanning the

personal and interpersonal levels (14% and 18%, respectively). A few individuals reported difficulties and positives at the societal level. Discussion: Older individuals were acutely aware of challenges and positives existing at all three levels, and contributed to resources at the interpersonal and community levels.

Session 1505 (Symposium)

THE DIVERSE SPIRIT: SPIRITUAL CARE PERSPECTIVES AND THE IMPLICATIONS FOR OLDER ADULTS IN VARIOUS SETTINGS

Chair: Lydia Manning

Co-Chair: Chad Federwitz

Discussant: Julie Hicks Patrick

Religiosity and spirituality are commonly supported and viewed as essential elements of well-being in old and very old age, particularly at end of life. These essential elements often include the exploration of the meaning in life, inner peace, belonging, contentment, and near-end-of-life-completion. The positive outcomes of religious and spiritual beliefs and practices have been well established. However, these experiences and related positive outcomes may not always include a diverse array of older adults. The spiritual care of older adults is becoming more culturally diverse and includes differing perspectives on what constitutes spiritual care, both in approach and practice. This symposium will explore the current state of spiritual care for older adults through a lens of cultural diversity and inter-religious/spiritual perspectives. A focus on the current practices of spiritual care for older adults and future implications will also be considered. Recommendations pertaining to future gerontological inquiry in the importance of spiritual care, as well as diverse approaches within gerontological practice will be highlighted and discussed.

SELF-TRANSCENDENT WISDOM MEDIATES THE ASSOCIATION BETWEEN SPIRITUALITY AND WELL-BEING IN SIX NATIONS

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Distraught individuals sometimes turn to religion for solace, particularly in old age, so spirituality is not necessarily positively related to well-being. However, spirituality might lead to greater well-being if it promotes self-transcendent wisdom. Using a sample of 307 respondents from six nations (USA, Canada, Serbia, Ukraine, Iran, and China), ranging in age from 59 to 99 years ($M=73.00$, $SD=8.13$), this study tested the generalizability of the hypothesized mediated pathway. Results showed only weak correlations between spirituality and well-being measures in the whole sample. Yet, as predicted, spirituality, mediated by self-transcendent wisdom, was indirectly related to greater well-being in all six nations, despite significant differences by nation in variable means. Spirituality had additional direct positive effects on life satisfaction in Canada, Iran, and China and on general well-being in Iran and China. These findings suggest that spirituality likely results in greater well-being when it transcends egocentric concerns.

SPIRITUALITY TRAINING AS AN ESSENTIAL ELEMENT OF PERSON-CENTERED CARE

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Palliative Medicine, built on the biopsychosocial-spiritual model of care, has long recognized the critical role of spirituality in the care of patients with complex, serious, and chronic illnesses. We conducted focus groups to arrive at a consensus definition of “spiritual care.” Additionally, we collected and compared frameworks and models that recognize that providers cannot be made compassionate simply through the imposition of rules; methods were needed to achieve behavior change. The created curricula covered the definitions of spiritual care, self-awareness, cultural sensitivity, assessment, and skills. As part of ongoing curriculum development processes, training included evaluation tools to accompany competency standards. Results demonstrated improvements in self-reported abilities to (a) establish appropriate boundaries with patients; (b) apply the concept of compassionate presence to clinical care; (c) understand the role of spirituality in professional life; (d) identify ethical issues in inter-professional spiritual care. Clinicians need to address patients’ spiritual needs.

COPING WITH UNCERTAINTY: USE OF CONTEMPLATIVE PRACTICES AMID A PANDEMIC

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Contemplative practices have been used as coping resources to reduce the negative influences of adverse life situations on mental health. The COVID-19 pandemic has disproportionately impacted older adults, causing immense uncertainty, stress, and anxiety. By using data from our “Coping with Pandemic” nationwide web-based survey ($n=1861$), we examine the utilization of practices such as meditation, prayer, and yoga across social, economic, and health status during the pandemic. Consistent with studies conducted before the pandemic, we find significantly greater utilization of meditation and yoga among women and higher educated individuals. Findings showed significantly greater usage of prayer among women and Blacks. Unlike previous studies, we documented greater usage of meditative practices among Blacks than Whites. Older adults with higher anxiety were significantly more likely to practice meditation and yoga. Our study offers much needed guidance for future intervention studies aimed at improving mental health among diverse groups of older adults.

AN EVOLVING INQUIRY OF MONASTIC SPIRITUAL CARE FOR AGING INMATES

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This investigation involved focus-group inquiry of the Oblates in Prison Program, a faith-based ministry founded