emerged from these experiences. Specifically, a priority in preparedness planning should be on solutions addressing the social isolation precipitated by the pandemic that older adults experienced. Technology may help. Devoting more programming to activities enabling older adults to utilize accessible technological resources is key. Efforts implemented during the pandemic have demonstrated that with preparation and access to resources, virtual communication is a feasible option for the older population. With limited access to alternative neighborhood food sources, devising a contingency plan for adequate food delivery services to replace congregate meals also merits attention. Overall, the pandemic's widespread impact highlights the importance of creating an infrastructure that builds upon older persons' strengths, while addressing their vulnerabilities, enabling them to thrive.

#### FUNCTIONAL STATUS, MEANINGS OF LIFE ACTIVITIES, AND COVID-19 RELATED DISRUPTIONS AMONG DISABLED OLDER ADULTS

Meng-Hsuan Yu,¹ and Shiau-Fang Chao,² 1. National Taiwan University, Taipei City, Taipei, Taiwan (Republic of China), 2. National Taiwan University, Taipei City, Taiwan (Republic of China)

Participating in meaningful activities has been proven beneficial to the well-being of disabled older adults. However, social distancing policies and restrictions on public activities have been implemented since the outbreak of COVID-19 at the beginning of 2020 in Taiwan. These restrictions not only prevent older individuals from performing meaningful activities but also have actual impacts on their daily life. This study aims to elucidate the intervening role of meanings of life activities on the relationship between functional status and COVID-19 disruptions. Data were collected from a sample of 526 community-dwelling older adults with disabilities in Taiwan between April and July, 2020. Utilizing Multiple Regression Analysis, the research findings were as follows. First, participants with better functional status experienced more COVID-19 related disruptions to their daily routine. In the meantime, they also valued their life activities as more meaningful than those with worse functional status. Second, higher levels of meanings in performing life activities also positively related to COVID-19 disruptions. Third, meanings of life activities fully mediated the relationship between functional status and COVID-19 disruptions. That is, disabled older individuals with better functional status may experience more COVID-19 related disruptions because their accessibility to meaningful activities was limited. Since preventive approaches to control the spread are necessary during COVID-19 epidemic, efforts should be made to sustain meaningful life activities participation among disabled older adults. Based on the findings of this study, this would be especially critical to the well-being of more capable older individuals with disabilities during the pandemic.

# HOW AGE AFFECTS PERSONAL AND SOCIAL REACTIONS TO COVID-19: RESULTS FROM THE NATIONAL UNDERSTANDING AMERICA SURVEY

Jung Ki Kim,<sup>1</sup> and Eileen Crimmins,<sup>2</sup> 1. University of Southern California, Los Angeles, United States, 2. University of Southern California, Los Angeles, California, United States

The pandemic of COVID-19 has had tremendous impact on Americans' lives including their personal and social behaviors. While everyone is affected in some way by the pandemic, older persons have been far more likely to suffer the most severe health consequences. For this reason, how people have responded to the COVID-19 outbreak may differ by age. Using a nationally representative sample from the Understanding America Study (UAS), we examined differentials in behavioral responses to COVID-19 by age and how they change over time. At the beginning of the pandemic (March, 2020), older people were less likely than younger ones to engage in preventive behaviors. As the pandemic progressed, however, older people have adopted healthy behavioral changes more than younger people, such that about two months after the pandemic started, older people were more likely to comply with suggested and regulated behaviors including practicing better hygiene, quarantining, and social distancing. Even when considering other potential influences on behavioral responses, older age was significantly related to performing more preventive behaviors, and gender, racial/ethnic minority status, perceived risk for infection and dying and political orientation were also found to be related to people's behavioral responses.

## HOW ARE INFORMAL CAREGIVERS ADAPTING TO COVID19? PRELIMINARY RESULTS OF AN ONLINE SURVEY.

Ranak Trivedi,¹ Madhuvanthi Suresh,² Rashmi Risbud,³ Marika Humber,⁴ Josephine Jacobs,⁵ and Samuel Thomas,⁶ 1. VA Palo Alto/Stanford University, Menlo Park, California, United States, 2. Georgia Regional Hospital-Atlanta, Atlanta, Georgia, United States, 3. VA Palo Alto Health Care System, Palo Alto, California, United States, 4. VA Palo Alto Health Care System, Menlo Park, California, United States, 5. Palo Alto Veterans Health Administration, Menlo Park, California, United States,

6. Stanford University School of Medicine, Salt Lake City, Utah, United States

COVID19 may disrupt informal caregivers' (CG) ability to support their care recipients (CR) but little is known how caregivers adapt. A 10-minute, anonymous, online survey with no geographic restrictions was fielded April-August 2020. Two screening items ensured that the respondents were at least 18y and self-identified as a CG. This English-language survey assessed: sociodemographics; reactions to COVID19; changes in CG responsibilities and abilities; depression (Patient Health Questionnaire, PHQ-2); CG burden (Zarit Burden Inventory, ZBI-4); and anxiety (Generalized Anxiety Disorder, GAD-2). Univariate analyses determined the proportion of those who screened positive on PHQ-2 (cutoff=3), GAD-2 (cutoff=3), and ZBI-4 (cutoff=8). Of the 314 respondents, 74% lived in USA; 73.5% of caregivers and 48.2% CR were women. While 63.4% were married, only 28% cared for their spouse. CG mainly cared for adults (83%), and reported that 75.0% of their CR had 2+ conditions. 49.6% CG provided >20h of care/wk. Since COVID19, 53% reported an increase in CG responsibilities; 28.0% noted a decrease in income. Many CG screened positive on the ZBI-4 (48.4%), GAD-2 (30.9%), and PHO-2 (26.8%). 74% worried about contracting COVID19 at least some of the time. 35.0% noted limits to performing all caregiving tasks when they (N=34) or their CR (N=57)

were asked to self-isolate/quarantine. 163 (51.9%) CG noted spending less time with their CR, of which 46.4% used alternate means (e.g., telephone calls). Preliminary results show that a plurality of CG had changes in their responsibilities and abilities during COVID19. A sizable proportion also reported poor well-being.

## IMPACT OF ADULT DAY SERVICE CENTER CLOSURES IN THE TIME OF COVID-19

Paayal Vora,¹ Lydia Missaelides,² Chau Trinh-Shevrin,³ and Tina Sadarangani,⁴ 1. Northeast Ohio Medical University (NEOMED), Marion, Ohio, United States, 2. California Association for Adult Day Services, Sacramento, California, United States, 3. NYU School of Medicine, New York, New York, United States, 4. New York University, New York, New York, United States

Adult Day Service Centers (ADCs) are a form of community-based long-term care that address frail older adults' health and social needs. Due to their congregate nature and participants' compromised health, many ADCs have been forced to temporarily shutter during the COVID-19 pandemic. It is unknown how closures have impacted service delivery at ADCs. Guided by the Resiliency Framework, we (1) explore methods employed by ADCs during the pandemic to meet participant/caregiver needs and (2) determine how/ whether these methods have mitigated the negative effects of ADC closures on participants and their caregivers. Both virtual focus groups and one-on-one semi-structured qualitative interviews were conducted with ADC staff members (n=20) across the United States. Preliminary results showed precipitous declines in physical, cognitive, and mental health of participants, as well as increased caregiver strain, particularly among dementia caregivers. However, ADCs found creative solutions to care for participants despite restrictions, creating, in their words, "centers without walls." Staff developed virtual programs (e.g. support groups, music and exercise therapy) and conducted "door-step" visits to support productive engagement and combat loneliness. Telehealth supported care coordination and identification of emergent clinical problems. Results suggest that despite innumerable COVID-19-related challenges, ADCs demonstrated resilience and creativity in managing participants' needs, fostered a sense of purpose, and provided caregiver respite. Further research on the effectiveness of remote programming and advocacy for sustainable reimbursement by payers is needed to ensure that ADCs can continue to provide older adults and their families with meaningful support as the pandemic wears on.

### IMPACT OF COVID-19 PANDEMIC ON SENIOR-TO-SENIOR SOCIAL ENGAGEMENT ACTIVITIES AT A COMMUNITY SPACE IN JAPAN

Neo Kazembe,¹ Hongjik Kim,¹ Cong Wang,¹ Shuichiro Higuma,¹ Yerim Yang,¹ Taeeun Kim,¹ Ryogo Ogino,² and Mai Takase¹ 1. The University of Tokyo, Tokyo, Japan, 2. Saga University, Saga, Japan

A local community space in Japan, Chiki Kastudokan, has been hosting several senior-to-senior social activities for community-dwelling older adults with support from the University of Tokyo. The activities are aimed at fostering communication and social engagement through exercise, music, cafe, and craft. After the emergence of COVID-19 pandemic,

these activities have been disrupted. We conducted a questionnaire survey between June and July 2020 to assess how the pandemic has affected 26 activities and identify support needs that can enable their continuity amid the pandemic (response rate: 77%). First, all 26 activities were suspended by the onset of COVID-19. Hosts of 8 (40%) activities devised alternative ways to engage participants at home. For instance, hosts of craft activities arranged and sent to participants crafting kits. Limited capacity in using online platforms like Skype or Zoom prevented virtual interaction of hosts and participants. Notably, hosts were anxious towards resuming activities amid the pandemic. They worried about their health (50%), of being criticized by friends and family(25%), and of infections spreading among participants (85%). Hosts wanted strategies to prevent infections during activities, and easy to understand infection prevention guidelines for participants. These findings reveal that COVID-19 pandemic has negatively affected senior-to-senior activities at Chiki Kastudokan. The University of Tokyo could help hosts identify effective infection prevention strategies to use when hosting activities amid the pandemic. It could also provide ICT training to hosts and participants to enhance their capacity in using online platforms in case of future waves of COVID-19.

# IMPACT OF THE 2020 COVID-19 PANDEMIC ON OLDER ADULTS' PERCEIVED SEDENTARY BEHAVIOR AND PHYSICAL ACTIVITY

MIkael Anne Greenwood-Hickman,<sup>1</sup> Jacklyn Dahlquist,<sup>1</sup> Julie Cooper,<sup>1</sup> and Dori Rosenberg,<sup>2</sup> 1. Kaiser Permanente Washington Health Research Institute, Seattle, Washington, United States, 2. Kaiser Permanente Washington, Seattle, Washington, United States

Starting in March 2019, stay-at-home orders meant to control the spread of the COVID-19 pandemic have limited movement, activities, and services in Washington State. For older adults, who are the most sedentary age group, we hypothesized that these public health measures encouraged increased sedentary behavior (SB) and reduced physical activity (PA) levels. To explore this, we conducted 25 semi-structured interviews with a sub-sample of participants in an ongoing sedentary behavior reduction intervention. Interviews were recorded and transcribed, and an iterative coding process was used to extract key themes related SB changes, PA changes, and other impacts of COVID-19 social distancing measures. Most participants reported an increase in SB due to limitations on leaving their home, canceled activities, increased free time in which to pursue indoor hobbies traditionally done in a seated posture (reading, sewing, tv, etc.), and feelings of depression or lack of motivation. Some participants suggested that these restrictions also led to a decrease in their PA and exercise levels due to cancelled fitness classes, loss of social support around exercise routines, and fear of leaving the house. However, other participants reported that the social distancing measures have allowed them to increase their PA levels, giving them more time to walk outdoors or pursue active outdoor hobbies like tennis, gardening, or home improvement tasks. In conclusion, the COVID-19 pandemic and associated social distancing measures have had varying impacts on participant perceived SB and PA levels. It is unclear how these changes will be maintained when pandemic restrictions are lifted.