Avoidant coping more strongly mediated the relationship between stress and depression in younger adults compared to older adults. Results were consistent with the stress and coping framework and recent work highlighting the older adults' resilience during the COVID-19 pandemic. Findings highlight the associations between positive coping behaviors and psychosocial well-being and indicate that older adults may use unique adaptive mechanisms to preserve well-being during the COVID-19 pandemic.

## EXPLORATION OF COVID-19-BASED CHANGES TO CAREGIVER BURDEN AND CAREGIVING INTENSITY AMONG INFORMAL CAREGIVERS

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Individuals providing unpaid care of assistance to family members and friends (e.g. informal caregivers), may have been uniquely impacted by the COVID-19 pandemic. Research is needed to examine the pandemic's effect on informal caregivers' caregiving intensity and burden. Therefore, this cross-sectional study was conducted to explore self-reported changes in caregiver intensity (CI) and caregiver burden (CB) due to the pandemic to identify factors associated with changes in responsibilities and burdens. In June 2020, informal caregivers providing care to someone aged 50+ (n=835) reported their current and pre-pandemic caregiving intensity and burden. Data were collected via Amazon's Mechanical Turk. Chi-square tests were used to examine bivariate associations between pandemic time (pre vs. post) differences in CI and CB. Multinomial regression was used to assess multivariate predictors of changes to CI and CB due to COVID-19. Results showed a significant U-shaped association between initial CB and CB change due to COVID-19. Higher levels of initial CB were associated with both a significant decrease in CB during COVID-19 (OR 1.33, 95%CI 1.06-1.67), and a significant increase in CB during COVID-19 (OR 1.22, 95%CI 1.05-1.43). There were no significant associations between initial CB and changes in CI due to COVID-19, although older caregivers were more likely to experience a decrease in CB due to caregiving (OR 1.02, 95%CI 1.00-1.05). These mixed results suggest that caregivers with high initial CB experienced the most extreme changes to CB due to COVID-19. Future planned analyses will focus on understanding the potential drivers behind these unexpected results.

## EXPLORING THE IMPACT OF AGE-RELATED COVID-19 MESSAGING ON INTERNALIZED AGEISM IN OLDER ADULTHOOD

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Public health messages during the COVID-19 pandemic have indicated a higher risk for older people and/or those who have multiple health conditions. Subsequent societal discourse, however, has at times arguably protested the full protection and treatment of older people from COVID-19, potentially contributing to internalized ageism. To date, how older people interpret age-related pandemic messaging and discourse has not been explored. This study examined older adults' perspectives of age-related COVID-19 messaging and societal discourse, as well as their perceptions of vulnerability, using a social constructionism framework. Adults age 65 to

89 years participated in semi-structured interviews about their thoughts and experiences with ongoing pandemicrelated public messaging. Preliminary analysis suggests that participant perspectives of COVID-19 messaging are situated along a continuum of concern associated with contracting the virus. While some, for example, describe minimal concern, others express being fearful. Individual perceptions of safety appear to be informed, in part, by the presence or absence of an underlying health condition. Individual approaches to media criticism and consumption, personal risk-taking thresholds, financial stability, and social connectedness also appear to influence how the participants perceive pandemic-related messaging. Findings suggest the framing of COVID-19 and pandemic protocols, as well as the media's sensationalization of age-related issues, can impact older peoples' perceived vulnerability of contracting the virus. Future research is needed to understand the long-term implications of ongoing pandemic-related messaging on older adults' experiences of aging, as well as the consequences such messaging could pose to for their health and social behaviors.

## FACILITY CHARACTERISTICS AND QUALITY DEFICIENCIES OF FLORIDA NURSING HOMES WITH COVID-19 CASES AND DEATHS

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The Coronavirus disease 2019 (COVID-19) has been disproportionately affecting nursing homes throughout the United States, resulting elevated risk for COVID-19 morbidity and mortality to nursing home residents. Given the high percentage of aging population, large number of nursing homes, and staggering surge of COVID-19 cases in Florida, it's critical to understand factors that may affect Florida nursing homes' vulnerability to the COVID-19 pandemic. Using Nursing Home COVID-19 Dataset as of July 26, 2020 obtained through Centers for Medicare and Medicaid Services (CMS), and Provider Info Dataset and Health Deficiencies Dataset available through CMS Nursing Home Compare data, we constructed a database of Florida nursing facilities with confirmed COVID-19 cases and deaths, with corresponding facility characteristics and quality deficiencies. We examined the facility characteristics (e.g. facility size, ownership state, chain affiliation, staffing level) and quality deficiencies (e.g. infection control deficiencies) of Florida nursing homes with and without publicly reported COVID-19 cases and deaths. Results indicated that, as of July 26, 2020, 73.3% and 40.8% of Florida nursing homes had resident COVID-19 cases and death, respectively (N=701). Findings also suggested that Florida nursing homes of large facility size, chain affiliated, and for profit, were significantly more likely to have documented resident COVID-19 cases (p<.05). Larger facility size (120 beds or more), staff shortage, and having prior infection control deficiency citation, were significantly related to the odds of having resident COVID-19 deaths (p<.05). Policy and practice implications and future research directions will be addressed to better protect the at-risk nursing home residents.

## FACTORS ASSOCIATED WITH LONELINESS DURING THE COVID-19 PANDEMIC AMONG OLDER ADULTS WITH CHRONIC CONDITIONS

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