

cardiac function, renal function and more). Interestingly, these biological system specific scores when combined gave an aging clock with superior mortality prediction than any published aging clock. We further validate the system aging scores and aging clock in different clinical studies to show the added advantage of such a measure, such as the fact that people with similar epigenetic age may have very different system scores. Overall, this method introduces the potential for quantitative and multi-dimensional, personalized aging scores that are indicative of an individual's disease and disorder risk.

THE BUFFERING EFFECT OF RESILIENCE ON THE SOCIAL CONSEQUENCES OF COVID IN OLDER WOMEN

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Prior to the pandemic, public health experts argued that loneliness was among the most significant threats facing women's health and wellbeing. As the COVID-19 pandemic brought our social lives to an abrupt pause in March, 2020, older adults were encouraged to remain isolated from friends and family. Social distancing guidelines led many older people to decrease social interactions with others. Using a community-based longitudinal study of women age 60+, we examined how changes in feelings of social connections with others influenced loneliness in October 2020 relative to prior to the pandemic (in September 2018). Our previous research has shown that psychological resilience decreases the negative consequences of major life stressors in later life. We hypothesized that women with high social consequences of the pandemic would experience increased loneliness, but resilience would buffer these effects. In line with our hypotheses, results showed that those who reported significant declines in social connectedness with others during the pandemic (i.e., high social consequences) experienced significant increases in loneliness (beta=0.125; $p<0.001$). Resilience, alternatively, was significantly associated with decreased loneliness (beta=-0.05; $p<0.05$), and buffered the social consequences of the pandemic. That is, as resilience increased, the social consequences of COVID-19 significantly declined ($p<0.01$), and resilience attenuated the negative consequences of high levels of social consequences of COVID-19 on loneliness, while those with high social consequences and low resilience experienced significant increases in loneliness in association with the pandemic. Based on our findings, we discuss potential clinical implications for resilience-based interventions for older adults.

THE IMPACT OF RETIREMENT RESOURCES ON U.S. OLDER FEMALE WORKERS' RETIREMENT TIMING: THEORY OF PLANNED BEHAVIOR MODEL

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For older workers, having a retirement plan is important for a successful transition. Social awareness of the problems encountered by older women during retirement remains low. Women have limited retirement resources due to their unequal work experience, and older women with access to fewer retirement resources often postpone their retirement. This research examined how the timing of older women's retirement was influenced by their retirement resources as well as their marital status. The study used 2014 HRS and RAND data, and collected sample of women aged 50-62 years old who worked either full or part time ($n=3,593$). Respondents were female (56%), white (63%), married (70%), and working full time (82%). Guided by the theory of planned behavior (TPB), multiple regression analysis examined gender differences in predicting older adults' retirement timing. TPB included three sub factors: attitudes toward retirement, subjective norm, and perceived behavioral control. Logistic regression analyzed the effects of respondents' expectations of retirement (i.e., with vs without expected timing). The findings indicated that the TPB model works similarly for men and women but there is a difference according to marital status. Unmarried women are less likely to have accumulated financial resources and more likely to anticipate a later retirement (1.4 years) than married women and are also less likely to set an expected timing for retirement ($p<0.05$). Such a robust research agenda would provide key information for government agencies and policymakers and contribute to the development of retirement planning models or retirement education programs for older women.

THE IMPACTS OF SOCIO-ECONOMIC CHALLENGE ON LONG-TERM PHYSICAL AND MENTAL HEALTH IN RETIREMENT AGE

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Despite consistent evidence on the negative effect of social and economic challenges on health, little is known about the pattern of economic difficulties people experience and the impact of those challenging patterns on long-term health in later life. This study used the national data, Mid Life in the United States (MIDUS 3 in 2013-2014), to identify the different patterns of socio-economic challenges that older Americans (50-64 ages old) experienced during the Recession in 2008 and to examine the impact of past challenging experiences on physical and mental health in their later life. Socio-economic challenges included twenty-six items such as losing or moving a job, missing rent, selling or losing a home, bankruptcy, having debts, and cutting spending. We conducted the latent class analysis and regression while controlling other social determinant factors (e.g., education, employment status, poverty, etc.). The latent class analysis result found five patterns during the Recession: people who experienced various difficulties during the Recession, who moved their jobs, who experienced financial difficulties, who bought a home with decreased debts, and who experienced no