

The negative impact of having a child with special needs on parental well-being is well documented. Previous research has suggested age attenuation of these impacts. However, this has not yet been examined longitudinally in late life. Therefore, it is unclear how the effect of having a child with a developmental disability or mental health problem changes as parents age and children become less likely to live at home. Using responses from the Study of Midlife in the United States (MIDUS), this study investigates: (1) longitudinal changes in the effect of having a child with a developmental or mental health problem on parental well-being, (2) age and gender moderations on these effects, and (3) the unique impact of factors directly related to the child's condition. Multiple linear regressions revealed that having a child with a developmental disability was predictive of higher negative affect, more somatic symptoms, and lower psychological well-being longitudinally. Additionally, there was a main effect of having a child with a mental health problem in predicting higher negative affect. However, age moderations were revealed such that the effect of having a child with a developmental disability or mental health problem was diminished for older parents. Additionally, within-group analyses revealed that longer duration of developmental disabilities and later parental age of onset of mental health problems were predictive of better outcomes. Overall, results suggest that although having a child with special needs is related to poorer well-being, these effects can attenuate as parents age and adapt.

#### EXPERIENTIAL AVOIDANCE IN A SAMPLE OF DEMENTIA CAREGIVERS

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Given the rapidly changing demographics, there will be an increasing number of individuals with dementia who will need significant support from informal caregivers. Providing care for an individual with dementia has been associated with negative outcomes in a number of domains including physical health, mental health, financial status and social functioning. There is a small but growing base of literature suggesting that fostering psychological flexibility, including acceptance, with dementia caregivers may be a helpful intervention. Experiential avoidance, which is the less adaptive alternative to acceptance, is the aversion from negative internal experiences including thoughts, feeling and physical sensations. Experiential avoidance has been found to be significantly related to depression and negative affect. The present study utilized online dementia caregiver support group samples ( $n = 158$ ) to evaluate the relationship between experiential avoidance and general demographics, other aspects of psychological flexibility, and caregiver distress. Experiential avoidance was positively correlated with cognitive fusion ( $r(134) = .231, p < .01$ ), caregiver burden ( $r(127) = .258, p < .01$ ), and distress associated with dementia related behaviors ( $r(140) = .225, p < .01$ ). Experiential avoidance was

negatively correlated with engaged living ( $r(133) = -.244, p < .01$ ), mindfulness ( $r(123) = -.187, p < .05$ ), and self-rated health ( $r(138) = -.193, p < .05$ ). Additionally, experiential avoidance was significantly higher for male caregivers ( $t(136)=2.462, p=.015$ ) and those age 65 and over ( $t(134)=-2.421, p=.017$ ). These findings support previous research that suggests experiential avoidance may be an important construct to target in future interventions with dementia caregivers.

#### SUPPORTING FAMILY CAREGIVERS: HOW DO CAREGIVERS OF OLDER ADULTS COPE WITH ROLE STRAIN? A QUALITATIVE STUDY

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Qualitative research on positive coping approaches actually used by caregivers can inform interventions that can be feasibly implemented. Absent from previous qualitative research is how caregivers respond to strain in the relationship, specifically. Eight focus groups were conducted with a purposeful sample of racially and ethnically diverse family caregivers in Los Angeles ( $n=75$ ). An additional 8 in-depth follow-up interviews were conducted. Content analysis was used to understand the mechanisms employed by caregivers to cope with strain and tension in the caregiving relationship. Preliminary results revealed twenty-two individual themes, which were subsequently grouped into four main superordinate themes: 1) Self-care; 2) Adaptation of behaviors and feelings; 3) Seeking and utilizing assistance and respite; and 4) Education and support groups. This work can help inform the design of programs to support caregivers and prevent potentially harmful behaviors, through understanding the experiences of caregivers in their own words.

#### NONTRADITIONAL VIEWS? HOW SIBLINGS MATTER FOR PERCEIVED PARENTAL CARE RESPONSIBILITY IN JAPAN

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Our aim in this study was to explore whether and how siblings' marital and work status influence Japanese adult children's perceived responsibility for parental care. Within traditional familial institutions in Japan, married sons were expected to assume parental care responsibility. At the same time, such care arrangements built on gendered division of labor; sons served as family breadwinners, and their wives cared for their parents-in-law while out of the paid labor force. Yet, because of sociodemographic shifts such as a greater percentage of unmarried persons and a growing number of women who seek to maintain their job, it has been increasingly unclear which adult children can and should assume the role of parental caregiver. Using online survey data from 989 Japanese adult children who were all employees