

and demographic characteristics and structural and environmental factors associated with those experiencing loneliness and/or social isolation in rural and urban areas both before and during the pandemic. The paper will conclude with key messages from a public health perspective.

LONELINESS AND SOCIAL CONNECTEDNESS AMONG RURAL OLDER ADULTS SINCE THE COVID-19 PANDEMIC ONSET

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Rural areas have a higher proportion of older adults aging in place. Rural areas also face structural barriers to supporting social connectedness among older adults, including transportation barriers, greater geographic distances, and access to technological connectivity. This research aims to discuss rural-specific risks of loneliness and social isolation among older adults, as well as rural/urban differences in loneliness and social isolation among older adults using the national COVID-19 Coping Study. Cross-sectional bivariate analyses highlight rural/urban differences in social activities during the pandemic. For example, rural older adults were more likely to use social media daily, compared with urban older adults (67% vs. 61%, $p < 0.05$), but were less likely to have phone or video calls with others daily (21% vs. 26%, $p < 0.001$). We will also share results of differences within rural older adults in loneliness, isolation, and social activities by socio-demographic characteristics in order to design targeted interventions to improve connectedness.

SOCIAL ISOLATION IN LONG-TERM CARE FACILITIES RELATED TO COVID-19: EFFECT ON RESIDENT ANXIETY AND CARE

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Loneliness is a common problem in long-term care. It has been associated with a higher risk of depression, aggressive behaviors, and anxiety and may be a risk factor for cognitive decline. Loneliness can exacerbate social isolation. The COVID-19 emergency brought on measures in Florida, beginning in March 2020, to separate nursing home (NH) and assisted living community (ALC) residents from each other and family members to limit virus spread. This study examines results of a survey with Florida NH (N=59) and ALC (N=117) administrators concerning effects of these measures. Scaled (1-5, lowest to highest) data indicate that resident anxiety was higher in NHs (M=3.40) than ALCs (M=3.17). Care disruptions related to limited resident-to-resident contact also were worse in NHs (M=3.74) than in ALCs (M=3.21), while care disruptions related to loss of family support were higher among ALCs (M=3.19) than in NHs (M=2.86). Implications of these findings will be discussed.

IMPACT OF SOCIAL ISOLATION DUE TO COVID-19 ON VA HOME-BASED PRIMARY CARE VETERANS AND CAREGIVERS

Chelsea Manheim,¹ Nelly Solorzano,¹ Juli Barnard,² Tamar Wyte-Lake,³ and Leah Haverhals,¹ 1. *Denver Center of Innovation for Veteran Centered and Value Driven Care (COIN), Denver, Colorado, United States*, 2. *Department of Veterans Affairs, Aurora, Colorado, United States*, 3. *US Department of Veterans Affairs, U.S. Department of Veterans Affairs (VA), California, United States*

In December 2020 we began conducting phone interviews with Veterans, and their caregivers, receiving care through the United States (US) Department of Veterans Affairs (VA) Home Based Primary Care (HBPC) program. Our goal was to describe experiences of Veterans and caregivers managing changes in care delivery related to the COVID-19 pandemic and navigating increased social isolation due to social distancing. We interviewed 38 Veterans (average age 78) and caregivers (average age 62) across seven VA HBPC programs. Findings showed those living in their own homes found increased isolation more manageable than those living in assisted living facilities, which restricted visitors. Caregivers had a harder time managing isolation than Veterans, as Veterans were used to being primarily homebound. Veterans and caregivers relied on increased phone communication with their HBPC teams, with some began participating in virtual visits. Implications include insights into better supporting older, homebound adults and their caregivers during disasters.

COMPARING LONELINESS AMONG INDIVIDUALS IN LONG-TERM CARE SETTINGS AND THE COMMUNITY

Cassandra Hua, *Brown University, Providence, Rhode Island, United States*

We used the NHATS COVID-19 module to examine whether individuals in long-term care communities were lonelier than individuals in the community during the pandemic. Additionally, we examined whether individuals in long-term care communities with more restrictive policies concerning visitors and communal activities were more likely to experience loneliness than individuals in communities with less restrictive policies. Approximately 45% of individuals in long-term care communities (n=134) felt at least a moderate amount of loneliness during COVID-19 when compared to 34% of individuals in the community (n= 2,666) ($p < .05$). However, the association was no longer statistically significant after adjusting for age, race, and sex. Among individuals in long-term care communities with the most restrictive policies, 48% experienced loneliness compared to 44% individuals in less restrictive communities. However, this finding was not statistically significant. Discussion will focus on similarities and differences within these populations that could have led to these results.

Session 4575 (Symposium)

INNOVATIVE GERONTOLOGY IN HIGHER EDUCATION: TRANSFORMATIVE EFFECTS OF THE PANDEMIC

Chair: Pamela Saunders Co-Chair: Yoon Chung Kim
Discussant: Debra Dobbs

Gerontology in higher education is experiencing an exciting inflection point rising from the COVID pandemic pushing us to adapt our teaching modalities. Many educators have developed innovative learning experiences making use of creativity, virtual reality, online discussion boards, virtual tours, Jam Boards, videos, and breakout rooms. This symposium will bring together gerontologists and educators to discuss their educational innovations. Dr. Saunders will discuss the use of virtual reality in a Geriatrics clerkship experience to enhance knowledge, empathy, and attitudes towards older adults. Dr. Hanna and Ms. Kim will present the use of a virtual avatar to explore aging identity. Professor Barsness will discuss the participation of older adults from the community as subject matter experts. Ms. Redlich will share her virtual internship experience of exploring the intellectual and social benefits of adult study abroad. Although the pandemic was challenging to gerontological education, substantial transformations have been accomplished. The innovations described in this session broadened engagement of students with older adults to identify their strengths and challenges to flourish in the "New Normal."

TRANSFORMING EDUCATION USING VIRTUAL REALITY: GERIATRICS CLERKSHIP BEFORE AND DURING PANDEMIC

Pamela Saunders, *Georgetown University, WASHINGTON, District of Columbia, United States*

Since 2006, the Georgetown University School of Medicine has offered a two-week elective in Geriatrics for third-year medical students. Students rotate through diverse clinical experiences, including general geriatrics, geriatric neurology, physical medicine & rehabilitation, memory disorders, Parkinson's and dementia, and palliative care. In addition, students learn about arts, humanities & ethics, communication skills, and taking the patient's perspective. In Fall 2019, pre-pandemic, we added virtual reality (VR) experiences focused on hearing & vision loss, Alzheimer's disease, and end-of-life conversations created by Embodied Labs. Curricular goals included increasing students' empathy and sensitivity, decreasing ageism & stereotyping, and increasing clinical knowledge. Findings suggest regardless of pandemic (pre vs. during) or modality (in-person vs. Zoom) that after participating in the VR labs, students are slightly more comfortable taking care of older adult patients with dementia as well as hearing & vision loss, and participating in end-of-life conversations.

LEARNING HUMANITIES AND ETHICS OF AGING THROUGH THE LENS OF AN AVATAR CREATION

Yoon Chung Kim, and Gay Hanna, *Georgetown University, Washington DC, District of Columbia, United States*

The main goal of teaching the humanities and ethics of aging is to understand the perspectives of older individuals as they address the challenges and opportunities presented across the aging spectrum. To encourage understanding of this humanistic and ethical process, students were given an assignment to select a profile of an older person with pre-selected characteristics that they then develop into their avatar, a virtual companion, to accompany them through the course. This assignment included three iterations of the avatar narrative related to what is studied in class around major life transition points related to work, housing, and end of life. These assignments included the creation of Mind

Maps which illustrate their avatar's ongoing concerns related to their environment including their social determinants of health. The avatar's formative development throughout the course brought forward discussions around identity, safety, autonomy, and person-centeredness in terms of gerontological practice and policy.

OLDER ADULTS AS VIRTUAL SUBJECT MATTER EXPERTS IN COVID GRADUATE EDUCATION

Sonya Barsness, *Georgetown University, Washington DC, District of Columbia, United States*

COVID-19 has further illuminated the need for educational approaches in gerontology that are person-centered and experiential. Ideally, this includes in-person experiences with students and older adults. Through their classroom participation as subject matter experts in aging, older adults share their personal experiences, and react to gerontological theories and ideas. Shared learning offers a platform for exploration of shared humanity, so that older adults are not seen as the "other", but "us". This prepares a generation of gerontologists to identify and reject ongoing ageism, again highlighted by the pandemic. COVID-19 has also challenged educators to offer these experiential opportunities. In this presentation we will outline how older adults from a Continuing Care Retirement Community participated virtually in a graduate course. We will discuss how their virtual involvement was structured, how their real-time COVID experiences were integrated, and share feedback from older adult participants and students on their shared learning experiences.

STUDENT PERSPECTIVE: INTERNSHIP EXPLORING INTELLECTUAL AND SOCIAL BENEFITS OF ADULT STUDY ABROAD

Kim Redlich, *Georgetown University, Washington DC, District of Columbia, United States*

Older adult participation in lifelong learning programs – such as university continuing education opportunities and the Age-Friendly University global network – has grown steadily over the last few years. Many of these programs are characterized by mixed-age classrooms in which undergraduate students share space and learning, remotely during Covid, with older adult participants who pay a nominal fee. Survey findings will be presented from older students involved in two university programs in this category: Temple University's "senior scholars" program and Georgetown University's "senior auditors" program, specifically related to the concept of adult study abroad. Adult study abroad is a new offering that combines the intellectual and social benefits of stimulating coursework with the transformative power of travel, and how the merging of these pursuits can produce purpose, meaning and community, especially for older adults. It is typically residential, academic, intergenerational, and of longer duration than a typical tourist experience.

Session 4580 (Symposium)

LINKING OLDER ADULTS' DAILY ACTIVITIES WITH WELL-BEING AND COGNITION: EXAMINING MODERATORS AND MEDIATORS

Chair: Christina Roecke Co-Chair: Minxia Luo

Discussant: Thomas M. Hess