

face-to-face with children, increasing to 74% after restrictions. Three quarters (77%) of YAs reported seeing OAs less often, but 42% reported increasing their connections with OAs via technology. About a third of MAs (35%) and OAs (36%) were lonely, compared to 48% of YAs ($p = .003$), and a higher percentage of YAs (57%) reported being “more lonely” now, compared to MAs (36%) and OAs (41%). OAs reported the least stress; 42% reported low/very low levels of stress compared to YAs (9%) and MAs (20%). All generations most often identified “being able to go places” as the thing they missed most, but it increased significantly with age ($p < .001$), from YAs (32%), MAs (37%), to OAs (44%). More YAs (20%) than OAs (7%) reported missing “structure to their day.” Results of these intergenerational comparisons suggest the resilience of older adults is helping them during the current pandemic.

THE IMPACT OF COVID-19 ON INFORMAL CAREGIVERS' HEALTH BEHAVIORS

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The population of older adults aged 65+ in the US is projected to increase from 15% to 21% in the next 30 years. Aging in place provides cost-savings and familiarity to the older adult, but often requires informal caregivers. Informal caregivers, individuals who provide unpaid care of assistance to family members and friends may have been uniquely impacted by the COVID-19 pandemic and shelter-at-home orders. Research is needed to examine how the pandemic impacted caregivers' caregiving responsibilities and health behaviors (e.g., physical activity, sedentary time, fruit and vegetable intake, snacking, etc.) as this information will be invaluable to determine if health promotion interventions are needed for informal caregivers. Self-reported data were gathered from informal caregivers providing care to someone aged 50+ ($n=835$) through Amazon's Mechanical Turk. Respondents reported their current and pre-pandemic health behaviors and demographics. Chi-square tests were used to examine bivariate associations between pandemic time (pre vs. post) and each examined behavior. The analysis identified some positive health behavior changes due to the pandemic: caregivers felt since the pandemic they ate more fruits and vegetables ($p < .001$), walked more, exercised more ($p < .001$), increased amounts of sleep ($p < .001$), and higher sleep quality ($p < .001$). However, respondents also had more screen time ($p < .001$) and sedentary time ($p < .001$). Future planned analyses will focus on examining whether these changes were consistent across all sociodemographic subgroups of caregivers and whether they persist after the pandemic recedes.

THE IMPACT OF COVID-19 SAFETY RECOMMENDATIONS ON ADULTS AGE 60 AND OLDER: A QUALITATIVE STUDY

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In March 2020, the United States Centers for Disease Control (CDC) began recommending social distancing and sheltering in place, in particular for older adults. This resulted in many older adults staying at home for long periods of time in relative isolation. Because there is little prior evidence of the emotional impact that this has on older adults, we conducted an exploratory qualitative study on how older adults felt during the first three to five weeks of the CDC recommendations. We fielded a web-based cross-sectional survey. Our analytic sample consisted of 673 respondents aged 60 and older who responded to the prompt: “How are you feeling during this time of social distancing?”. We used a thematic bottom-up qualitative analysis, via MAXQDA, to analyze segments into general affect codes and detailed emotion subcodes, as well as coping mechanisms. Results showed that while many older adults reported neutral (9%) or positive (9%) affect, a larger proportion reported negative affect (42%) or reported mixed affect (35%). The most common negative emotions mentioned were anxiety and loneliness/boredom, while the most common positive emotions mentioned were optimism and feeling grateful. The most common coping mechanisms reported by participants included making life adjustments, keeping busy, prayer/spirituality, and meditation/mindfulness. This study provides an initial understanding into how older adults experienced and coped with the first stages of restricting social interactions. If social distancing continues to be a recommended disease-containment strategy, information about how older adults are coping can be critical for public health interventions. Implications will be discussed.

THE IMPACT OF THE COVID-19 PANDEMIC ON VILLAGES: RESULTS OF A NATIONAL SURVEY

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This study, launched in June 2020, documents the impact of the COVID-19 pandemic on Villages nationally. Villages are non-profit, membership-based organizations that provide support from volunteers and social connections to enable aging in place. We distributed on-line surveys to the leaders of the 287 Villages in the national network to capture the effects of the pandemic on organizational operations, membership recruitment, service provision, and member well-being. A 40% response rate ($n=116$) was obtained. A majority of Villages reported that the pandemic greatly affected the organization, with the top concerns being: 1) membership recruitment, 2) the health and well-being of members and volunteers and 3) connecting with their members outside of normal in-person events. Over half of the respondents reported that the mental health of members had declined; and there were high levels of disruption to usual health care. New member recruitment efforts were thwarted and most Villages lost revenue. About 70% offered virtual programming but, in general, participation in these on-line events dropped. From the survey respondents' perspective, the value of the Village to members and their family increased (48%) or remained the same (22%). New opportunities emerged that may be continued post-pandemic: new meal and medicine