

Participants were called weekly for questions/guidance with procedures. Intervention sessions built-in additional time to embed Latino cultural values: familismo, personalismo, confianza and respeto. Study Team Infrastructure, included bilingual/bicultural members/students; and trusted community partners to assist with participant referrals. For Preferences and Beliefs Toward Research, we conducted a series of focus groups to understand beliefs about “memory health” and perceptions of ADRD risks. Strategies yielded effective results. We reached our recruitment goal; started a wait-list of interested participants; had zero (n=0) attrition.

RECRUITMENT OF OLDER ADULTS DURING THE COVID-19 PANDEMIC: UTILIZING TWO RECRUITMENT TECHNIQUES

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The COVID-19 pandemic has limited in-person interactions and reduced access to research participants. To recruit older adults for a study on the impact of COVID-19 on physical, mental, and social wellbeing we utilized two recruitment techniques: 1) ResearchMatch, a free recruitment database, and 2) a convenience sample of residents in a retirement community. Messages were sent via ResearchMatch to 1,491 adults age 65 and over. In total, 228 individuals responded over 2 weeks; 194 responded in the first 24 hours. Eighty-four completed the online survey. For the retirement community, recruitment information was shared during a Zoom townhall meeting; 44 expressed interest and 30 completed the study (half over the phone with a research assistant). We will discuss differences between the older adults recruited by each strategy (e.g., the ResearchMatch group was highly educated; more staff needed to interview retirement community participants). Overall, these were effective recruitment techniques during challenging times.

IMPLEMENTING PHYSICAL ACTIVITY STUDIES DURING COVID-19 AND WINTER STORMS: LESSONS LEARNED

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Patient recruitment and retention are challenging for longitudinal studies. Stay-at-home restrictions for the Galveston and Houston regions in 2020 for COVID-19 and in 2021 for the Winter Storms shut down elective healthcare activities and created additional recruitment barriers during the implementation of a 12-month study examining the physical function of older adults receiving a total knee arthroplasty. This presentation describes recruitment and retention strategies

during natural disasters. Ten participants started the study during the pandemic and 6 remained through the winter storms (3 withdrew, 1 no showed). Physical activity monitors were distributed and collected through mail, patient reported outcomes were completed online or over the phone, clinician-initiated measures were only collected when clinics were open, and efforts were made to minimize staff burden and follow evolving hospital guidelines. Most importantly, regular communication and follow-up with participants, research team, and department personnel created a sense of community.

Session 2300 (Paper)

Social Determinants of Health I

ADULT CHILDREN'S EDUCATION AND OLDER MOTHERS' HEALTH: ARE OFFSPRING'S PROBLEMS MEDIATORS OR MODERATORS?

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Despite the growing body of literature documenting positive effects of adult children's education on older mothers' health outcomes there is limited research exploring the mechanisms that underlie and influence this relationship. This lack of knowledge limits our understanding of how or under what conditions older mothers benefit from their offspring's resources. In this paper, we draw from theories of the life course, cumulative inequality, and the social foreground to explore how adult children's problems (physical and emotional, personal and financial, and deviant behaviors) mediate and moderate the effect of adult children's education on older mothers' self-rated health and depressive symptoms. To address this question we use data collected from 420 mothers aged 75-85 reporting on their 1,514 adult children, as part of the Within Family Differences Study. Theoretically, this project adds to existing scholarship on intergenerational support in later-life families by identifying the conditions under which adult children's resources improve parents' well-being. Preliminary findings reveal that less educated adult children experience more problems, which in turn, negatively impact mothers' health. Additionally, when adult children experience problems in their own lives, mothers receive less care and financial support from their offspring, even from those who are well-educated and would otherwise have been expected to have shared resources. The findings will have implications for practice by increasing health care providers' awareness that older parents may be at risk for unmet needs for care even when adult children have resources that would have been expected to serve as a safety net.

HEALTH AND SOCIAL DETERMINANTS ASSOCIATED WITH DELAY OF HEALTH CARE AMONG RURAL OLDER ADULTS

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Delaying healthcare has the capacity to increase morbidity and mortality, especially among individuals with chronic and