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Generation Z, those who are born in 1997 or thereafter, account for six percent of the estimated 53 million family caregivers in the US – and this percentage is growing, especially given the health impacts of the pandemic. This review focuses on caregiving youth (ages 0-18) and young adult caregivers (ages 18-25) who assist household members who need regular assistance with ADLs and IADLs. This presentation will analyze key trends in the literature of this demographic and identify gaps in research. Our review broadens the knowledge base of how caregiving done by this population impacts brain development, and hence their long term physical, emotional, and mental health. In spite of the significant number of caregiving youth and young adults, current publications on these demographics remain sparse, with most studies being conducted on spousal and adult caregivers. Our group found that the existing literature reviewed the adverse implications on the health and education outcomes for young adult caregivers. This included increased anxiety/depression compared to non-caregivers and for those in post-secondary education, the contribution of caregiving to college incompleteness. There are no known studies on this population who have entered the workforce and who also continue their caregiving role. Adequate understanding and characterization of caregiving youth and young adult caregivers will inform better interventions and future policy for them. Support for this demographic, in turn, may improve health outcomes for older adults, who are the majority of those in their care.

#### **“WE’VE ALL LOST SO MUCH”: THE EXPERIENCES OF ESSENTIAL FAMILY CAREGIVERS’ LONG TERM CARE VISITATIONS DURING COVID-19**

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Family caregivers are integral to the care of long-term care (LTC) residents. COVID-19 public health policies initially restricted all essential caregivers from visiting LTC homes. In lieu of in-person visitations, caregivers were allowed technology-based visits then restrictive outdoor visits, followed by indoor visitations. This study aims to illuminate the experiences of essential caregivers’ as they visited their loved ones in LTC during COVID-19’s restrictive policies. We conducted seven caregiver focus groups (N=30) from Ontario and British Columbia, Canada. Thematic analysis and line-by-line coding were completed using NVivo. We found six themes that were common to all the visitation types: 1) “LTC Home disorganization” to facilitate visits and poor communication; 2) “Lack of staffing and resources”; 3) “Mistreatment from staff and management” as caregivers were seen as inconveniences; 4) “Shock and disbelief” when family members first saw their loved ones; 5) “Significant lack of person-centered or family-centered ethos” for example the residents’ needs were ignored such that their cognitive and

physical impairments sometimes made visitations impossible, as well as the burden of multiple weekly COVID-19 tests; and, 6) “Collateral damage” in the form of trauma and irreparable harm to the relationships between residents and families. These results emphasized caregivers who ultimately felt betrayed and ignored by the broader healthcare system. Our findings provide an in-depth understanding of how COVID-19 public health policies have impacted the essential caregivers and the long-lasting impacts on residents and caregivers alike. Understanding caregiver’s experiences can inform future pandemic response policies and encourage more person-centered protocols.

#### **DIFFERENCES IN SUBJECTIVE AGE BY FILIAL CAREGIVING STATUS AMONG US ADULTS IN MID AND LATER LIFE**

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Subjective age is an important indicator of age identity and is associated with both psychological and physical well-being. Previous studies have revealed that older adults who feel younger than their chronological age show better health status, better life satisfaction, and less risk of mortality. Considerable evidence shows that stress contributes to feeling older than one’s chronological age. Given the fact that taking a caregiving role involves stress, it is expected that caregiving might accelerate subjective aging. This study examined the association between the stressor of caregiving and subjective age in mid and later life. Data were drawn from the Health and Retirement Study in 2014 and 2016. Participants aged 50 years and over (n=1,087) were identified according to adult-child caregiver status at across the two waves: those who provided care consecutively (long-term caregivers), those who became caregivers in 2016 (new caregivers), those who were no longer providing care in 2016 (recent caregivers), or those who did not report providing care in both 2014 and 2016 (non-caregivers). Linear regression analysis showed that new caregivers reported feeling older than their chronological age compared to non-caregivers. However, long-term or recent caregivers did not show significant differences in subjective age compared to non-caregivers. The finding is consistent with the stress process theory and adaptation hypothesis. Although the onset of caregiving stress may accelerate subjective aging, this deleterious effect may decrease over time due to family caregivers’ adaptability. Future research will examine the role of support, resilience and mastery in this pathway.

#### **DIRECT-TO-CAREGIVERS RESEARCH DISSEMINATION: A NOVEL APPROACH TO TARGETING END-USERS**

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Dissemination of geriatrics research usually occurs through conference presentations or publications viewed by colleagues in the same field. Older adults and their family caregivers have limited direct access to research findings. We sought to pilot a direct-to-caregiver workshop with the intent to disseminate geriatrics research directly to family caregivers of older adults. As part of an academic national conference, an 'Updates in Geriatrics Research' workshop is presented as a compilation of innovative research published in the prior year. We distilled workshop content into a lay format which was presented to family caregivers at two community-based caregiver symposiums. Mixed method surveys were completed by family caregiver attendees with open-ended responses analyzed using content and constant-comparative techniques. Of the 29 survey respondents, all were female, mean age 58.9 yrs. (range 52-72), providing care to older adults, mean age 87.2 years (range 66-97). Respondents unanimously identified learning information pertinent to their care recipient. When asked: Do you feel that direct-to-caregiver research dissemination is useful, all respondents selected yes. Open-ended responses for reasons why revealed two main themes: 1.) Creating informed caregivers: "Caregivers need this information in their toolbox." and 2.) Empowering caregiver-advocates: "The more we know, the better we can advocate for our loved ones and challenge their health care." Respondents all planned on sharing information with others, specifically family, friends, and physicians. In conclusion, disseminating geriatrics research direct-to-caregivers is feasible. Researchers, who present their work for scientific conferences, should consider translating their findings into presentations for community-based family caregivers.

#### DYNAMICS OF UNMET NEED FOR SOCIAL CARE IN ENGLAND

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Meeting individuals' social care needs is a core element of UK social policy. However, the conceptualisation and operationalisation of 'unmet need' remain a challenge. This paper advances our understanding by incorporating a temporal dimension in the conceptual framework on unmet need to investigate the dynamics of met and unmet need for social care over time. Using data from Waves 6,7 and 8 of the English Longitudinal Study of Ageing, this paper examines five possible trajectories among individuals with a social care need at baseline: 1) no longer having such a need; 2) having continued needs met; 3) delayed needs met; 4) newly arisen unmet needs; and 5) persistent unmet needs. The results indicate that amongst those with need at baseline unmet need has decreased over time, indicating that some needs may be fulfilled with a delay. However, a significant proportion of older people experienced persistent unmet needs, particularly those who were younger, living alone, with educational qualifications, and with fewer difficulties with Activities of Daily Living at baseline. Understanding the dynamics of unmet need can support policymakers in ensuring that those facing an elevated risk of persistent unmet need over time do not fall through the social care safety net.

#### EXAMINING PHYSICAL AND SOCIAL ENVIRONMENTS OF KOREAN AMERICAN FAMILY CAREGIVERS OF PERSONS LIVING WITH DEMENTIA

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**Introduction:** East Asian Americans are considered a hard-to-reach population in the field. Existing resources are not inclusive of Korean family caregivers, and therefore, a community support system may be required for this ethnic group.

**Methods:** We conducted a telephone-based survey and in-depth interview with Korean family caregivers of persons with dementia (N=36; Mean age: 63.3) to examine their physical and social environments.

**Results:** Most caregivers (58%) co-resided with their care recipients. Those providing care with limited assistance from others showed greater financial hardship (p=0.03) and interference with employment (p=0.03). Job interference was further related to higher levels of caregiving burdens (p=0.01). The services used most were senior center services (25%) and in-home care services (17%), while desired services included health promotion and disease prevention services (50%) and culturally appropriate or medically tailored home-delivered meals services (31%). Caregivers socialized with others using a multi-messaging app (i.e., KakaoTalk) with others. About 74% of them addressed they used KakaoTalk always (52%) or often (22%), and nearly half of them (47%) said they searched for caregiving information online. Findings from our qualitative interviews confirmed positive attitude toward the use of technology. Korean family caregivers showed a lack of knowledge of not only existing community-based resources but also the disease-related information, particularly regarding early-stage support and home safety.

**Conclusion:** It is critical to develop a community education program that reflects their unique physical and social environment conditions, potentially through technologically delivered interventions, for outreach and engagement for Korean family caregivers of persons with dementia.

#### FAMILY CAREGIVING AND DEPRESSION AMONG OLDER ADULTS IN JAPAN: A CROSS-SECTIONAL STUDY DURING THE COVID-19 PANDEMIC

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COVID-19 infections are particularly lethal in older adults; thus, social activities of older adults and their families in the community have been restricted. The threat of infection, restrictions on social activities, and limitations on the provision of care services for older adults could increase family caregivers' burden and impact their mental