

16% were experiencing new financial hardship, 19.4% were a lot more worried about their financial situation, 15% reported drinking more alcohol, and 64% had somewhat or greatly increased feelings of social isolation and loneliness. CGs reported that COVID-19 had made caregiving more physically (18.7%), emotionally (48.5%) and financially (14.5%) difficult and interfered with their own healthcare (19%). Differences found between younger and older caregivers will be presented and implications of these increased CG-related EM risk factors for healthcare and social service providers discussed.

A NATIONWIDE STUDY ON HOW COVID-19 CHANGED APS POLICIES AND PRACTICES

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The purpose of this inquiry by the Virginia Tech Center for Gerontology and WRMA, Inc., was to explore changes being implemented by APS programs across the country in response to the COVID-19 pandemic. With input from the Administration for Community Living, the research team used a three-step process (e.g., telephone interviews with state-level APS administrators, a national online survey, and in-depth interviews with local and APS) to capture information on changes caused by efforts to mitigate the spread of COVID-19. This presentation concerns changes in APS policy and practice that the pandemic caused, including modifications in-person visits and adjustments to timeline requirements. Discussion of alterations in policy and practices during the first five months of the pandemic can elucidate APS and other services and planning for older adults in future emergency situations.

ELDER ABUSE VICTIMS DURING THE COVID-19 PANDEMIC: ADMINISTRATIVE DATA FROM SAN FRANCISCO ADULT PROTECTIVE SERVICES

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This study examined elder mistreatment victims' experiences at the beginning of the COVID-19 pandemic. San Francisco Adult Protective Services (APS) caseworkers conducted phone interviews to inquire about clients' awareness of COVID-19 and unmet needs. Nine-hundred-and-thirty-four (71%) of 1,313 APS' past clients or their collaterals were interviewed, with 741 (79%) responding positively to COVID-19-awareness questions, and 697 (75%) having no unmet needs. Binary logistic regression with Firth adjusted maximum likelihood estimation method revealed that older persons ($p < .05$), self-neglectors ($p < .05$), and victims of neglect ($p < .05$) were less aware of COVID-19. Unmet needs varied by mistreatment type. Victims of isolation were more likely to have medical needs ($p < .05$), while victims of emotional abuse were more likely to report loneliness ($p < .001$). Collaboration between service providers is key in assisting victims experiencing unmet needs to live safely in a public health crisis.

Session 1290 (Paper)

RESEARCH METHODS

AGING IN THE AFTERMATH OF ADVERSITY: LATER-LIFE IMPACT OF INSTITUTIONAL CHILD ABUSE AND DISCLOSURE

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Until the 1990's in Ireland, many children in institutional care experienced abuse and neglect, with lasting negative effects, including trauma symptoms and psychopathology. While trauma disclosure can be important for recovery, findings are inconsistent and often lack consideration of wider social and interpersonal contexts. As survivors of this historical adversity enter later-life stages, research is needed on the long-term impact and to clarify the role of disclosure. Therefore, this study aimed to examine the later-life impact of institutional child abuse on health and well-being, and the role of trauma disclosure and socio-interpersonal contexts in an older adult sample. Qualitative semi-structured interviews (60-120 minutes) were conducted with 17 Irish older adults, aged 50-77 years (mean age=60.7 years), who experienced childhood institutional abuse. Audio-recorded interviews were transcribed and analysed using Framework Analysis. Themes for 'childhood and related later-life adversity' included detrimental perceptions and interactions, re-exposure and reminders, failure of system and society, and cycle of abuse. Disclosure themes included successful, unsuccessful, and non-disclosure, as well as evidence of socio-interpersonal interactions (e.g., non-disclosure influenced by shame or fear, compounded by socio-cultural values, (lack of) social acknowledgment, or the power of the church in society). Results suggest that childhood institutional abuse can have long-term negative impacts into later life, including social, psychological, physical health, and socio-economic aspects. Disclosure results emphasize the need to consider the complex social, cultural, and interpersonal contexts within which an individual is embedded. This may enhance understanding and facilitate targeted health and social care services for this older adult population.

CHILDHOOD EXPOSURE TO FAMILY VIOLENCE AND LATER-LIFE SIBLING RELATIONSHIPS

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There has been a growth in research examining the long-term effects of childhood adversity on later life outcomes; however, only a few studies have examined the impact that childhood adversity has on sibling relationships in late adulthood. To address this gap in the literature, the current study examines the latent class structure of childhood exposure to family violence and investigates whether a latent class membership is associated with aspects of later-life sibling relationships, including