Health & Retirement Study (n=15,504). Individuals living in a nursing home, diagnosed with dementia or Alzheimer's disease, and 64 years of age or younger were excluded from analyses. Age, gender, Hispanic status, education, marital status, working status, wealth, BMI, physical activity, smoking, drinking, and difficulty in meal preparation, eating without help, and grocery shopping were included as control variables. Findings suggest that older adults did not appear to experience increased loneliness during the pandemic relative to prior waves. However, Wave 2020 was an independent risk factor for depression. Greater in-person contact (OR: 0.97, CI: 0.95-0.99, p-val: 0.001) and remote contact (OR: 0.99, CI: 0.97-0.996, p-val: 0.008) were each independently associated with slightly decreased depression. Older Black Americans tended to be more depressed than their White counterparts (OR: 1.50, CI: 1.20-1.86, p-val: <0.001). However, a null interaction between race and wave suggested that Black Americans did not experience more increased depression in 2020 relative to prior waves. Analyses suggest that the COVID-19 pandemic might change at-risk groups for depression and communication by remote technology – often considered an inferior but necessary stopgap measure. Implications for practice and policy will be discussed.

Session 9155 (Poster)

COVID-19 and Mental Health Among Older Adults

A COMPARISON OF MENTAL HEALTH IN A SAMPLE OF OLDER WOMEN BEFORE AND DURING THE COVID-19 PANDEMIC

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The COVID-19 pandemic has substantially impacted lives globally. Due to age-related risks, the older adult population has uniquely experienced negative changes caused by the pandemic. Research has also shown that the pandemic has disproportionately affected women. Therefore, it is important to understand how the mental health of older women has been impacted during this global crisis. This study aims to examine the differences in mental health indices in a sample of older women before versus during the COVID-19 pandemic. To date, participants include 201 women (aged 60-94) who completed an online survey of self-report measures assessing depression, anxiety, alcohol use, binge eating, positive affect, and emotional quality of life (QOL). We conducted one-way ANOVAs to compare each mental health construct in two samples of older women collected pre- and peri-pandemic. Results indicated that the peri-pandemic group reported significantly higher anxiety (F = 5.25, p = .02), with a trend for more role limitations due to emotional problems (F = 2.79,

p = .09), than the pre-pandemic group. No significant differences emerged for levels of depression, alcohol consumption, binge eating, positive affect, or emotional wellbeing between groups. These findings point to the psychological resilience of older adults in the face of extreme adverse events, including this global crisis. Older women, while impacted differently during the COVID-19 pandemic, reported minimal exacerbations of mental health problems compared to older women pre-pandemic. Efforts to identify moderators that may either attenuate or promote further psychological resilience among older adults is warranted.

BENEFIT-FINDING BUFFERS THE EFFECTS OF QUARANTINE ON OLDER ADULTS' MENTAL HEALTH DURING THE COVID-19 PANDEMIC

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Objective: Older adults' health and well-being may suffer due to prolonged social isolation leading to loneliness and increased stress during the COVID-19 pandemic. The current study aimed to address the role of benefit-finding, defined as the capacity to derive meaning and positive aspects from stressful situations, in older adults' adaptation to the effects of quarantine. Methods: 421 participants aged 50 or above in China participated in an online survey to study the effects of quarantine on loneliness, stress, anxiety, depression and life satisfaction, and the moderating role of benefit-finding. Results: The results showed that quarantine was basically unrelated to any outcome. Further analysis showed, however, that the effect of quarantine varied by levels of benefit-finding. Only people with lower benefit-finding reported a higher level of loneliness, perceived stress, anxiety and depression, but no relationships were found at higher benefit-finding. Conclusions: The findings extended our understanding of the role of benefit-finding in buffering the negative impact of adversity on older people. By mitigating the effects of prolonged social isolation, benefit-finding served as a protective factor in older people's adaptation to the sequelae of this pandemic.

CHANGE IN STRESS AND POSITIVE EXPERIENCES AMONG OLDER OREGONIANS DURING THE COVID-19 PANDEMIC

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Several cross-sectional studies have examined stressors and positive events among older adults during COVID-19. We extend these studies by examining changes across time in perceptions of stress and positive experiences. Older adults in Oregon (Mage = 71.1, SD = 7.3, range = 51-95) completed weekly surveys from April 28 to June 23, responding to an adaptation of the Daily Stress Inventory (DISE; Almeida et al., 2002). DISE examines stressors and positive experiences across six domains (health, spouse/partner, other relationships, work/volunteer, finances, and retirement) on a 7-point scale (1 = not at all to 7 = extremely). At baseline, those who felt more stressed were younger, female, and reported more