

relationships, freedom and life in general. Consistent with our guiding theory, cultural, contextual, religious, and socio-political factors shaped their appraisals of stress and their coping strategies. Future research should examine how these practices relate to health outcomes and quality of life and how they can inform effective, appropriate interventions.

COVID-19 SILVER LININGS - EXPERIENCE OF SPOUSAL CAREGIVERS OF PERSONS WITH DEMENTIA ENGAGED IN SUPPORT PROGRAM

Andrew Nguyen,¹ Elizabeth Stevenson,² Mary Mittelman,³ Roscoe Nicholson,⁴ Tiffany Donley,⁵ Rebecca Salant,⁶ Steven Shirk,⁷ and Maureen O'Connor,¹ 1. *Boston University School of Medicine, Boston, Massachusetts, United States*, 2. *NYU Langone Health, New York, New York, United States*, 3. *NYU Langone Health NYU Grossman School of Medicine, NYU Grossman School of Medicine, New York, United States*, 4. *University of Chicago, Evanston, Illinois, United States*, 5. *NYU School of Medicine, New York, New York, United States*, 6. *NYU School of Medicine, NYU School of Medicine New York City, New York, United States*, 7. *Bedford Veterans Administration Medical Center, Bedford, Massachusetts, United States*

Caring for a person with dementia (PWD) has been consistently associated with negative effects on health, including increases in caregiver depression, anxiety, and burden. Emerging studies have shown that the COVID-19 pandemic has increased these factors due to reported increases in caregiver workload and cognitive and behavioral symptoms of the PWD. We interviewed 10 spousal caregivers of PWD from the NYU Langone Alzheimer's Disease and Related Dementias Family Support Program in Summer 2020 during the COVID-19 pandemic in order to gain feedback about their experiences during the pandemic and the transition from in-person to videoconferencing that could be used to improve services and support. Caregivers discussed the challenges faced during the pandemic but also the unique opportunities the situation presented. We report here on those positive aspects of COVID-19 from the perspective of the caregivers we interviewed. Methods: Interviews of caregivers residing with their spouses in the New York City area were conducted via videoconferencing, transcribed, deidentified, and analyzed using framework analysis methods. Results: We found that caregivers reported some positive reaction to videoconferencing that included increased support group cohesion, increased convenience, feeling less obligated to participate in events, and new opportunities for social contact. Participants also discussed positive inter-couple relationship changes such as increased quality time spent together. Our findings resonate with a body of literature focused on understanding the positive aspects of caregiving. Understanding the full presentation of the caregiver experience, including both positive and negative aspects, is important for developing interventions and resources for this unique group.

COVID-19 VACCINES IN SKILLED NURSING FACILITIES: RECURRING INTERVIEWS WITH ADMINISTRATORS

Amy Meehan,¹ Joan Brazier,¹ Renee Shield,¹ Caroline Madrigal,² and Emily Gadbois,¹ 1. *Brown*

University, Providence, Rhode Island, United States, 2. *Providence VA Medical Center, Providence VA Medical Center, Rhode Island, United States*

Skilled nursing facilities (SNFs) are on the front lines of changing policies regarding the COVID-19 pandemic. The most recent development is a potential vaccine mandate for staff working in SNFs. We use ongoing findings from 130 of 160 in-depth, semi-structured interviews in progress with administrators at 40 SNFs in eight diverse healthcare markets across the United States to understand the current landscape of COVID-19 in SNFs. Four repeated interviews at 3-month intervals provide a unique longitudinal perspective on the impact of COVID-19 and SNFs' response to vaccinations, including the vaccine mandate. Rigorous thematic analysis reveals insights into administrator responses and creative approaches to address vaccine hesitancy, and future expectations for SNF operations in light of the vaccine and the mandate. Administrators express cautious hope that the vaccine will allow SNFs to return to a new normal of daily life for residents in terms of family visitations, communal dining, and resident activities. Overriding questions include how to overcome persistent vaccine hesitancy from SNF staff who cite fear of side effects despite education initiatives and how to stem staff retirement or transition to other healthcare settings. SNFs represent a microcosm of the country's concerns as a whole. Insight into the evolving and complex dynamics shed important light on national trends and help provide solutions for moving forward. Findings from this study have implications for policymakers and SNF leadership as they consider ways to promote vaccination and retain staff amid vaccine mandates.

CROSS-VALIDATION OF THE FINANCIAL EXPLOITATION VULNERABILITY SCALE

Juno Moray, and Peter Lichtenberg, *Wayne State University, Detroit, Michigan, United States*

Most of the available clinical tools that detect the experience of financial exploitation (FE) are not practical for use by the many professionals who work with older adults. The available measures are often time-consuming, require specialized training to administer, or focus exclusively on the cognitive aspects of financial decision-making. The need for a brief, standardized measure of contextual risk prompted the development of the Financial Exploitation Vulnerability Scale (FEVS; Lichtenberg et al., 2020). The purpose of this study was to cross-validate the FEVS as a psychometrically sound measure of contextual risk for FE. Participants were recruited from the community (n=95), and through a financial coaching service for older adults who had experienced a financial scam (n=21). A total of 114 older adults were recruited for the study, 33 who had experienced FE and 81 who had not. An independent samples t-test demonstrated that the FEVS total score successfully differentiated older adults based on the experience of financial exploitation. The FEVS total score was correlated with age, but no other demographic factors or collected neurocognitive measures. A ROC curve detecting FE analysis revealed an area under the curve of 0.68. Internal consistency of the FEVS was $\alpha=0.80$. In a logistic regression model, only the FEVS and word-reading ability were related to FE. The results of this cross-validation study are very similar to the initial study, demonstrating that