

**Background:** Many older adults struggle with late-life depression, stress, and anxiety, especially when facing age-related transitions including retirement, relocation, and the death of a spouse. Given the consequences of depression among older adults, which include higher rates of suicide, timely interventions that help to manage depressive symptoms are essential. **Objective:** The primary purpose of this study was to explore the perceived efficacy of an online program in improving subjective depressive feelings. **Methods:** Older adult participants were recruited for semi-structured interviews ( $n = 24$ ) in a web-based intervention that included interactive games and activities undergirded by a cognitive behavioral therapy (CBT) approach. Participants were asked to provide feedback about program features, including weekly module content, games, interactive activities and community interactions, and any perceived effects on their health behaviors and/or emotional well-being. Participants' responses were analyzed using qualitative content analysis. **Results:** Participants reported several gains, including developing the habit of forming ongoing, incremental goals, achieving wellness-related goals, and experiencing an overall positive shift in perspective. In addition, participants reported feeling greater gratitude, increased positivity, and improvement in mood. Featured games and activities helped to promote stress relief and entertainment, and mindfulness exercises were cited as the most helpful and/or enjoyable among participants. Participants expressed a preference for program content related to aging and aging-related transitions. **Conclusions:** This study demonstrated feasibility of an interactive web-based intervention for older adults with subjective depressive feelings, while also providing important findings about users' preferences for personalized, aging-related feedback.

#### PARENTING STRESS AND MENTAL HEALTH IN MIDLIFE ADULTS: EVALUATING THE ROLE OF GENDER

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Parenthood is a major source of stress in midlife that can have adverse consequences for long-term mental health trajectories. Yet, little research asks how parenting stress impacts mental health for both mothers and fathers in midlife. The current study examined (a) whether parenting stress was associated with parental depressive and anxiety symptoms and (b) whether these associations vary by gender. We utilized data from the ongoing Colorado Adoption/Twin Study of Lifespan behavioral development and cognitive aging (CATSLife); participants were aged 28 to 49 who reported having child(ren) ( $N = 520$ ). Participants completed surveys that encompassed measures of demographics, relationships, health, and well-being. Overall, multilevel models accounting for non-independence among siblings and with relevant covariates (e.g., number of children, marital status) showed that higher levels of parenting stress were associated

with greater depressive ( $b = .47 (.12)$ ,  $p < .001$ ) and anxiety ( $b = .27 (.09)$ ,  $p < .05$ ) symptoms. An evaluation of the individual parenting stress items indicated that feeling less happy and more overwhelmed in the parental role were significantly associated with higher levels of anxiety and depressive symptoms. Parents who reported feeling less close to their children were also significantly more likely to report greater levels of depressive symptoms. These effects were consistent across mothers and fathers. Our study provides further insight into the negative associations between parenting stress and mental health among both mothers and fathers, and warrants further investigation into resources that may buffer these negative effects prior to late life.

#### PROTECTIVE EFFECTS OF PERCEIVED CONTROL ON PRESCRIPTION DRUG MISUSE 10-YEARS LATER IN THE MIDUS STUDY

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The current study examined if control beliefs predict prescription drug misuse (PDM) 10-years later and how problem drinking status moderates this relationship. PDM refers to taking medications without a prescription or in a manner not intended by the prescriber. Older adults are especially vulnerable to PDM due to drug sensitivity, comorbid health conditions, and high rates of polypharmacy. Participants were adults ( $n=2162$ , 56% female, mean age=54, range=30-84) who completed Waves 2 and 3 of the Midlife Development in the United States (MIDUS) study. At Wave 2, participants reported on two subscales of perceived control (personal mastery and constraints) and past 12-month problem drinking behaviors. At Wave 3, participants reported past 12-month PDM of five substances (painkillers, sedatives, stimulants, tranquilizers, and depression medications). Results indicated that at Wave 3, 10% of the sample reported misusing at least one prescription drug in the past year. Logistic Regression analysis revealed that problem drinking was associated with higher odds of PDM ( $p < 0.001$ ), and perceived control was associated with lower odds of PDM ( $p < 0.05$ ) after controlling for previous PDM and sociodemographic, health behavior, and health status covariates. However, there was an interaction effect such that perceived control was not protective for those individuals who engaged in problem drinking at Wave 2 ( $p < 0.05$ ). Future analyses will explore the meaning of this interaction. Identifying psychosocial protective factors, such as perceived control, predicting PDM will be critical for designing interventions that prevent the adverse consequences of PDM among this population.

#### THE EFFECT OF COMPUTERIZED COGNITIVE TRAINING FOR ADULTS OVER 40 WITH DEMENTIA-RELATED ANXIETY

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Dementia-related anxiety (DRA) may occur when cognitive lapses are appraised as threatening. Individuals with DRA may seek activities to improve cognitive function, including popular computerized cognitive training programs like Lumosity®. We evaluated if DRA changed after eight