

suburban areas and 5 in urban areas and four were private-pay residences while 5 offered subsidized rent. ANOVA results showed private-pay buildings had higher total MAPS scores than subsidized buildings ($p=0.001$), and urban buildings had higher total MAPS scores than suburban buildings ($p < 0.000$). Mean step differences were non-significant between different building types: (mean steps = 3,317 private-pay, 3,629 subsidized, 3,536 urban, 3,350 suburban). Pearson product-moment correlations showed a positive association between steps and MAPS positive streetscape features ($p=0.011$). Multiple regression analysis showed higher temperature days, precipitation, and more minutes of daylight were associated with higher step counts ($p=.04$). Given the dramatic variation in individual step counts, future research should investigate personal factors that contribute to activity among independent living residents.

Session 4080 (Symposium)

FAMILY CAREGIVING DISRUPTED BY COVID-19: OVERCOMING CHALLENGES THROUGH RESILIENCE AND FLEXIBILITY

Chair: Mary Wyman

Discussant: Laura Wray

The impacts of the COVID-19 pandemic have been global and pervasive – yet only partially understood. Older adults and their family caregivers have experienced profound and unprecedented challenges as a result of COVID-19. This symposium features research on these disruptions and the creative adaptations undertaken in response. Four presentations present a variety of geographic regions, caregiving settings, and research focal points. Avidor and Ayalon present findings from interviews with family caregivers of residents in long-term care, highlighting the issues faced as a result of dramatic shifts in policy and procedures in support of pandemic infection control. Gum and colleagues focused on how service access has changed for community-dwelling older adults and their families during the pandemic, and how agencies may best leverage the flexibility of caregivers to adapt service provision. Boucher et al. compare the challenges faced by family caregivers during COVID-19 with those faced during a natural disaster, and highlight unique differences in service access for caregivers of military veterans. Finally, Ko and co-authors share their experience with the implementation of a technology intervention to reduce caregiver stress as part of a research trial, and how the protocol adjustments necessitated by COVID-19 revealed the unique potential of such technologies to support caregivers under isolated conditions. The presenters will focus on themes of resilience and lessons learned for health care systems, service agencies, and society to best support family caregivers in challenging circumstances moving forward.

DISASTER CAREGIVING: CAREGIVERS NEGOTIATING STORMS AND COVID-19 FOR VETERANS AND NON-VETERANS ON THE GULF COAST

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Natural disasters and COVID-19 likely add complexity to caregiving efforts, yet little is known about these effects. We will discuss our findings exploring additional needs and challenges experienced by caregivers during hurricanes, floods, and COVID focused on US Gulf Coast states. We interviewed caregivers of both Veterans ($n=13$) and non-Veterans ($n=11$). The presentation will include an overview of 1) types of resources needed or used related to storms and to COVID, including social support and access to information for both emergency planning and recovery; 2) caregiver experience before, during, and after the disaster including psychological effects on caregivers and addressing special health needs; 3) comparisons of challenges during storms versus COVID including emotional impact and access to health and specialty care; and 4) additional resources used by caregivers of Veterans. We will also address how these data are informing national caregiver support programs.

PANDEMIC DEPLOYMENT OF A SMARTHEALTH TECHNOLOGY TO IMPROVE STRESS IN DEMENTIA FAMILY CAREGIVERS

Eunjung Ko,¹ Karen Rose,¹ Kristina Gordon,² Emma Schlegel,³ Matthew McCall,² Ye Gao,⁴ and Jason Jabbour,⁵ 1. *The Ohio State University, Columbus, Ohio, United States*, 2. *The University of Tennessee Department Of Psychology, Knoxville, Tennessee, United States*, 3. *The Ohio State University College Of Nursing, Columbus, Ohio, United States*, 4. *University Of Virginia Department of Computer Science, Charlottesville, Virginia, United States*, 5. *University of Virginia Department of Engineering Systems and Environment, Charlottesville, Virginia, United States*

Caregiving stress from repetitive and heavy caregiving workloads can trigger poor emotional health, such as stress, anxiety, and depression, leading to higher caregiver mortality rates. Interest in technology-based interventions for this population has increased among researchers due to availability, acceptability, and flexibility compared to in-person services, especially now, during an unprecedented pandemic. Our study focuses on in-home SmartHealth technologies for caregivers of persons with Alzheimer's Disease and related dementias, delivered using Ecological Momentary Assessment and a novel acoustic monitoring, mood recognition, and self-learning recommendation system. The system provides mindfulness-based stress management in response to interpersonal conflict in real-time. We will report challenges and solutions of creating and deploying a SmartHealth system for older adults in their home during the COVID-19 pandemic. Potential effects of this system on caregivers' emotional health are also examined. Findings suggest SmartHealth technologies may assist caregiving populations adapt and thrive in a new, more isolated normal.

THE CHALLENGES FACED BY LONG-TERM CARE RESIDENTS AND THEIR FAMILIES DURING COVID-19

Sharon Avidor,¹ and Liat Ayalon,² 1. *Ruppin Academic Center, Ruppin Academic Center, HaZafon, Israel*, 2. *Bar Ilan University, Ramat Gan, HaMerkaz, Israel*

The present research aims to examine the effects of protective measures due to the coronavirus disease (COVID-19) within long-term care (LTC) settings on the residents and their family members. Open-ended qualitative interviews were conducted with 14 family members of older adults who resided in LTC settings during the first wave of the pandemic in Israel. The first theme identified is Rupture, including physical disconnect; the disruption in routine treatment to residents; and decline in the satisfaction with the setting. The second theme is Response, including sharing viewpoints and involvement in decision making, as well as an intense ambivalence shared by family members. Our findings highlight the distress caused to residents and family members by the isolation and restrictions in LTC settings during the pandemic, and underscore values and priorities that are central to them and their family members, including maintaining continuity, transparency, and working in unison with their families.

Session 4085 (Paper)

Family Caregiving III

DEMENTIA CARE-RELATED STRESS AND WORKING MEMORY PERFORMANCE: EXAMINING THE MEDIATING ROLE OF SLEEP

Ashley Blasi,¹ and Francesca Falzarano,² 1. *Fordham University, Bronx, New York, United States*, 2. *Weill Cornell Medicine, Douglaston, New York, United States*

Dementia family caregivers often experience significant stress and burden, which has been associated with a myriad of adverse effects on physical and mental health, as well as cognition. The impact of caregiving on health and well-being may have negative implications on the provision of quality and effective care. Specifically, working memory is a key domain of cognition that ultimately underlies logic and decision making processes. Thus, the purpose of the current study is to examine the associations between dementia care-related stress and working memory, as well as potential mediators of this relationship, in a sample of 50 primary caregivers who completed measures examining stress, including burden and overload, and several domains of cognition. Our results showed that higher levels of caregiving overload were associated with worse working memory performance, measured using the N-back task. Additionally, we found that lower sleep quality fully mediated the relationship between overload and working memory performance, such that the negative effects of overload on working memory performance may operate as a result of sleep impairment. By determining the mediating role of sleep while also providing evidence to support the negative relationship between stress and working memory, our results provide support for the development of interventions that target factors such as burden and sleep quality to help mitigate stress in caregivers.

EXAMINING MENTAL AND PHYSICAL HEALTH STATUS AMONG SANDWICH GENERATION CAREGIVERS

Hansol Kim,¹ Richard Schulz,¹ Scott Beach,² and Heidi Donovan,¹ 1. *University of Pittsburgh, Pittsburgh,*

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With a sample of 54,076 caregivers, the Behavioral Risk Factor Surveillance System (BRFSS, 2015-2017) provides an opportunity to assess the impact of caregiving on U.S. adults varying in age, gender, and race. We focused on sandwich generation (SG) caregivers, aged 30-59, with childcare and eldercare responsibilities (n=8,805). In multivariate regression models of mental and physical health, we evaluated the association of age, gender, race and caregiving factors controlling for marital status, education, housing status, income, employment status, and self-rated health status. SG caregivers were predominantly female (65.6%), white (69.6%), black (13%) and were caring for a parent/parent-in-law (50%) or another relative (26.4%). Age, gender, and race were associated with mental health outcomes such that SG caregivers who were younger (aged 30-39), female, and white reported poorer mental health during the past month ($p < .05$). Older (aged 50-59), female, and white SG caregivers reported poorer physical health during the past month ($p < .05$). Caregiving factors were not associated with mental health, but SG caregivers who had been providing care for a longer period of time were more likely to report poor physical health in the past month. Finally, education, income, employment, housing status, and self-rated health status were statistically significant covariates in both models ($p < .05$). These findings demonstrate that young caregivers are at risk for poor mental health; older caregivers for poor physical health. Being female, white, with lower socioeconomic status is associated with poor mental and physical health. Future research should address the unique needs of SG caregivers with dual caregiving responsibilities.

EXPLORING THE SUBJECTIVE CAREGIVING EXPERIENCE AMONG CHINESE, KOREAN, AND SOUTHEAST ASIAN COMMUNITIES

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Although the Asian American community is one of the fastest growing racial groups in the US, members of this group continue to be underserved and understudied, especially when it comes to the needs of family caregivers. Therefore, through a national initiative to understand the lived experiences of diverse family and friend caregivers, survey data was collected from a variety of Asian American ethnic subgroups including Chinese (n=148), Korean (n=131), and Southeast Asian (i.e., Vietnamese, Hmong, Cambodian, Laotian; n=161). Surveys were distributed in-person and online, and also offered in the translated native languages of the abovementioned groups. Caregivers had to be 18 years and older and providing care to a person aged 55 and older who needed assistance because of ongoing health problems or disabilities. For the overall sample of Asian American caregivers (n=440), participants were on average 51.68 years of age (SD=15.98), identified as female (n=336), were not born in the US (n=348), lived with the care receiver (n=247), and reported less than \$10,000 in income per year (n=199). As guided by the Stress Process Model and through a series of ANOVA tests, when compared on all major outcomes, Southeast Asian caregivers