

emerged from these experiences. Specifically, a priority in preparedness planning should be on solutions addressing the social isolation precipitated by the pandemic that older adults experienced. Technology may help. Devoting more programming to activities enabling older adults to utilize accessible technological resources is key. Efforts implemented during the pandemic have demonstrated that with preparation and access to resources, virtual communication is a feasible option for the older population. With limited access to alternative neighborhood food sources, devising a contingency plan for adequate food delivery services to replace congregate meals also merits attention. Overall, the pandemic's widespread impact highlights the importance of creating an infrastructure that builds upon older persons' strengths, while addressing their vulnerabilities, enabling them to thrive.

FUNCTIONAL STATUS, MEANINGS OF LIFE ACTIVITIES, AND COVID-19 RELATED DISRUPTIONS AMONG DISABLED OLDER ADULTS

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Participating in meaningful activities has been proven beneficial to the well-being of disabled older adults. However, social distancing policies and restrictions on public activities have been implemented since the outbreak of COVID-19 at the beginning of 2020 in Taiwan. These restrictions not only prevent older individuals from performing meaningful activities but also have actual impacts on their daily life. This study aims to elucidate the intervening role of meanings of life activities on the relationship between functional status and COVID-19 disruptions. Data were collected from a sample of 526 community-dwelling older adults with disabilities in Taiwan between April and July, 2020. Utilizing Multiple Regression Analysis, the research findings were as follows. First, participants with better functional status experienced more COVID-19 related disruptions to their daily routine. In the meantime, they also valued their life activities as more meaningful than those with worse functional status. Second, higher levels of meanings in performing life activities also positively related to COVID-19 disruptions. Third, meanings of life activities fully mediated the relationship between functional status and COVID-19 disruptions. That is, disabled older individuals with better functional status may experience more COVID-19 related disruptions because their accessibility to meaningful activities was limited. Since preventive approaches to control the spread are necessary during COVID-19 epidemic, efforts should be made to sustain meaningful life activities participation among disabled older adults. Based on the findings of this study, this would be especially critical to the well-being of more capable older individuals with disabilities during the pandemic.

HOW AGE AFFECTS PERSONAL AND SOCIAL REACTIONS TO COVID-19: RESULTS FROM THE NATIONAL UNDERSTANDING AMERICA SURVEY

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The pandemic of COVID-19 has had tremendous impact on Americans' lives including their personal and social behaviors. While everyone is affected in some way by the pandemic, older persons have been far more likely to suffer the most severe health consequences. For this reason, how people have responded to the COVID-19 outbreak may differ by age. Using a nationally representative sample from the Understanding America Study (UAS), we examined differentials in behavioral responses to COVID-19 by age and how they change over time. At the beginning of the pandemic (March, 2020), older people were less likely than younger ones to engage in preventive behaviors. As the pandemic progressed, however, older people have adopted healthy behavioral changes more than younger people, such that about two months after the pandemic started, older people were more likely to comply with suggested and regulated behaviors including practicing better hygiene, quarantining, and social distancing. Even when considering other potential influences on behavioral responses, older age was significantly related to performing more preventive behaviors, and gender, racial/ethnic minority status, perceived risk for infection and dying and political orientation were also found to be related to people's behavioral responses.

HOW ARE INFORMAL CAREGIVERS ADAPTING TO COVID19? PRELIMINARY RESULTS OF AN ONLINE SURVEY.

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COVID19 may disrupt informal caregivers' (CG) ability to support their care recipients (CR) but little is known how caregivers adapt. A 10-minute, anonymous, online survey with no geographic restrictions was fielded April-August 2020. Two screening items ensured that the respondents were at least 18y and self-identified as a CG. This English-language survey assessed: sociodemographics; reactions to COVID19; changes in CG responsibilities and abilities; depression (Patient Health Questionnaire, PHQ-2); CG burden (Zarit Burden Inventory, ZBI-4); and anxiety (Generalized Anxiety Disorder, GAD-2). Univariate analyses determined the proportion of those who screened positive on PHQ-2 (cutoff=3), GAD-2 (cutoff=3), and ZBI-4 (cutoff=8). Of the 314 respondents, 74% lived in USA; 73.5% of caregivers and 48.2% CR were women. While 63.4% were married, only 28% cared for their spouse. CG mainly cared for adults (83%), and reported that 75.0% of their CR had 2+ conditions. 49.6% CG provided >20h of care/wk. Since COVID19, 53% reported an increase in CG responsibilities; 28.0% noted a decrease in income. Many CG screened positive on the ZBI-4 (48.4%), GAD-2 (30.9%), and PHQ-2 (26.8%). 74% worried about contracting COVID19 at least some of the time. 35.0% noted limits to performing all caregiving tasks when they (N=34) or their CR (N=57)