

total population (National Bureau of Statistics of China, 2020). By 2050, the number of adults aged 60+ would be up to 430 million, reaching one third of the total population (Du, Zhai & Chen, 2005). Considering such a rapid aging process and the existing large number of older adults in China, it becomes imperative to investigate how psychosocial factors affect this group's subjective well-being. This study proposed that, among older adults, higher support received from each of the three relational sources (adult children, family and friends) were associated with reduced loneliness and improved well-being. Structural equation modeling was conducted using a sample of rural adults aged 60 and older ($N=1142$) from the 2018 wave of data from the Longitudinal Study of Older Adults in Anhui Province, China. Findings indicated that support from adult children directly and indirectly decreased older adults' depression and improved their life satisfaction through loneliness; while support from family members directly decreased depression but did not directly improve life satisfaction or indirectly improve well-being through loneliness. Although support from friends did not have a significant impact on older adults' well-being, it indirectly improved well-being through reduced loneliness. Findings have implications for programs or interventions targeting both parent-adult-child support and friends support and reducing rural older adults' loneliness.

LONELINESS AND PURPOSE IN LIFE ARE IMPORTANT PREDICTORS FOR FUTURE CARE PLANNING

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Experiencing purpose and social connection in later life is associated with better quality of life, better cognition, less morbidity, and lower risk of mortality. People who experience less purpose in life are more likely to report loneliness (Neville et al., 2018), and those with vision impairment are at greater risk for loneliness than the general population (Brunes et al., 2019). Planning for future care may be one way to enhance late life outcomes, but it is unclear how loneliness and purpose in life are related to planning behaviors in older people with vision loss. Using a sample of 200 older adults who were diagnosed with macular degeneration, this study explored the association of loneliness and purpose in life on future care planning variables after controlling for basic health and demographic variables. Hierarchical regressions showed that 1) people who are lonelier ($\beta=.26, p<.05$) but report greater purpose in life ($\beta=.19, p<.05$) are more aware of future care needs ($\Delta R^2=.14, p<.001$); 2) people who are lonelier ($\beta=-.16, p<.05$) but report greater purpose in life ($\beta=-.46, p<.001$) are less avoidant of planning ($\Delta R^2=.14, p<.001$); and 3) people who report greater purpose in life are more likely to gather information ($\beta=.24, p<.05$; $\Delta R^2=.04, p<.05$) and establish concrete plans related to planning for future care ($\beta=.25, p<.05$; $\Delta R^2=.06, p<.001$). These results suggest that having purpose in later life may boost planning behaviors, while those who are lonely may need help translating their awareness of future care needs into planning behaviors.

MORE EXERCISE IS LINKED TO LESS LONELINESS IN ADULT DAY HEALTH ATTENDEES

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There is a growing evidence that more physical activity is linked to less loneliness (Cigna, 2018; Pels & Kleinert, 2016). It is less clear whether this relationship persists in older adults who are attending adult day health services and often have multiple comorbidities. In this study, we examined whether spending more time exercising would significantly predict whether adult day health attendees reported loneliness. We used UAS-NY data from a sample of 221 adult day health attendees from 2019 to early 2020 who scored five or greater on the Nursing Facility Level of Care Index, which is a score derived from assessments of cognition, communication and vision, mood and behavior, functional status, continence, and nutritional status. A logistic regression showed that after controlling for demographic variables, cognition, health, and quality of family relationships, participants were less likely to report loneliness if they had been attending adult day health services for at least six months or more ($B=.86, p<.05$), spent less time alone ($B=-.45, p<.05$), and exercised more ($B=.47, p<.05$; $\chi^2(3)=15.6, p=.001$). These results suggest that in addition to participating in adult day services and spending more time with others, exercising may have an impact on the experience of loneliness.

RESILIENCE OF HMONG OLDER ADULTS: COPING WITH LONELINESS

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Older refugees are especially susceptible to loneliness with their history of trauma, forced migration, and social isolation in host countries. Rates of loneliness among older immigrants range from 24% to 50%. Despite their heightened vulnerability to loneliness, coping mechanisms among this population remain understudied. The purpose of this study was to examine how community-dwelling Hmong older adults, an aging refugee group, cope with loneliness. The data was drawn from a larger constructivist grounded theory study aimed at understanding the loneliness experiences of community-dwelling Hmong older adults. Semi-structured individual interviews were conducted in the Hmong language with 17 Hmong age 65 and older residing in Northern California. Data was collected and analyzed in an iterative and comparative process using initial coding, focused coding, and connecting the focused codes to form categories and subcategories. Five coping mechanisms emerged from the data: (a) religious and spiritual beliefs; (b) social support; (c) wandering; (d) activity engagement; and (e) avoidance and control. Coping mechanisms utilized by Hmong older adults in this study highlighted the resilience of this aging population and the lack of culturally-relevant programs to prevent and address their persistent loneliness and emotional distress. Implications for research, practice, and policy suggests the need for greater culturally- and linguistically-competent services informed by Hmong older adults.