

## SHIFTS IN OLDER ADULTS' SOCIAL SUPPORT DURING EARLY MONTHS OF THE COVID-19 PANDEMIC

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In recent months, older adults have faced great health risks due to COVID-19, yet social distancing measures may also heighten risks to their social well-being. This mixed methods study explores changes in older adults' social support satisfaction and interpersonal connections across the first few months of the COVID-19 pandemic. A Midwestern sample of 70 older adults aged 70-97 completed two phone interviews (April and June 2020) about their experiences with social distancing due to COVID-19. At both timepoints participants rated their satisfaction with social support and responded to open-ended questions about their interpersonal interactions, communication, and support in current daily life. Mean social support satisfaction significantly increased between the two interviews. Ensuing analysis of qualitative responses suggested this shift could reflect psychological adjustment to the circumstances or adaptation in methods of interpersonal connection over time. Emergent themes included: 1) increased family support and strain, 2) adaptable and flexible friendships, 3) isolation fatigue, and 4) communication through technology. Evaluation of change over time indicated divergent and shifting perceptions of social support as the pandemic endures. Findings suggest nuanced and diverse social support experiences amongst older adults, yet general patterns of initial shock to social support systems that subsided or adapted over time. Future research should build upon these findings to better understand older adults' social support needs and seek to explore ways to best foster social connections during instances of forced social isolation or societal crises such as the current and ongoing global COVID-19 pandemic.

## SOCIAL ACTIVITIES IN COMMUNITY SETTINGS: IMPACT OF COVID-19 AND TECHNOLOGY SOLUTIONS

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COVID-19 has created challenges for staff in promoting resident activity. To better understand the pandemic-related challenges that Activity Professionals are facing, we asked COVID-19 specific questions as part of a larger survey. The overall survey focused on identifying challenges and potential technology solutions (e.g., socially assistive robots) to assist Activity Professionals in their job duties. Activity Professionals (N=19) completed the online questionnaire. Respondents (aged M=48.00, SD=12.87; 95% female, 100% native English speakers, 68% White/Caucasian, 21% Black/African American) were highly educated/experienced: 68% had a Bachelor's degree or above, and 53% had 10-35 years of experience. Respondents worked in Independent Living (68%), Assisted Living (37%), Memory Care (26%), Skilled Nursing (21%), or Personal Care (11%). All Activity Professionals reported impact by COVID-19, as follows: 1) Cancelled

activities: Group activities/gatherings; hosting outside entertainment; fewer volunteers, vendors, paid sources. 2) New restrictions: Number of people in elevators, rooms; no contact with residents. 3) Unexpected new tasks: More 1:1 meetings; video conferencing; additional phone calls with residents, staff, and families; ordering groceries online. Daily duties changed significantly with less help and limited availability of technology. 4) Effect: Fewer activities and new delivery models (online, TV). Concerns about potential negative effects on residents while trying to meet the creativity challenge: "This has caused lots of "out of the box" thinking for ways to engage residents and keep things upbeat despite the challenges." Results illustrate the breadth of challenges that staff are facing, some of which can be addressed by technology.

## SOCIAL DISTANCING WITH OLDER ADULTS: COMPARING PRE- AND POST-PANDEMIC PREFERENCES IN CHILDREN

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The Covid-19 pandemic has made age more salient, and the media has included numerous ageist messages (Bronwen, 2020), included messages aimed at children (e.g., "stay home to protect grandma and grandpa!"). When the pandemic reached Germany in March, we halted data collection on a project assessing ageism in children ages 4 to 8. In July, the situation had improved and testing resumed following hygiene protocols. We report findings from a simulated-behavioral measure where 45 children were asked to plan a party. One task involved asking the children to place pictures of ten party guests, plus themselves, around two party tables. We then assessed how many seats away the younger and older adult guests were placed, on average, from the child (i.e., social distance). Although, we anticipated that the pandemic might lead children to further distance themselves from older adults, our results, thus far, indicate similarity between pre- and post-pandemic preferences. At both occasions older adult guests were seated, on average, one seat further away from the child than younger adult guests. The guest chosen to sit closest to the child was younger on 88% of occasions, whereas the guest chosen to sit farthest away from the child was older on 64% of occasions. Preference for younger adults was confirmed in a second task where children selected teammates for a game. On average, children's teams consisted of 70% younger guests versus 30% older guests. Findings indicate a social preference for younger, versus older, adults in children irrespective of the pandemic.

## SOCIAL ISOLATION, LONELINESS AND WELL-BEING IN THE COVID-19 CRISIS: A LOOK AT NURSING HOME RESIDENTS IN LUXEMBOURG

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During the COVID-19 crisis, older adults, in particular those with underlying health conditions, were at a special risk for severe illness and mortality, and efforts were made

to shield them from exposure to the virus. While measures of physical distancing and reduction of in-person contacts were necessary to prevent contraction, they hit residents of care settings particularly hard since visits from family and friends were banned and the risk for loneliness and social isolation increased. In the present study, we therefore gave the voice to nursing home residents and focused on their perceived loneliness and subjective well-being during the crisis. We were both interested in difficulties but also in personal resources and resilience factors that might protect older adults from negative mental health outcomes and help to maintain subjective well-being. A sample of  $N = 76$  residents in care homes in the Grand Duchy of Luxembourg were interviewed by use of a standardized questionnaire during July and August 2020. Participants reported on their loneliness and life satisfaction during the crisis, on their self-regulatory strategies as well as on personal and social resources (e.g. self-efficacy, generativity, social support). Data will be analyzed by use of regression analysis to predict loneliness and well-being by risk and protective factors. Results will be discussed applying a life-span developmental and systemic perspective to understand the mutual interplay of individual, social and institutional resources to mitigate negative side effects of protective measures on care home residents.

#### SUCCESSFUL TRANSITIONS TO REMOTE ASSESSMENTS AND TECHNOLOGY INSTALLATIONS DUE TO COVID-19: THE I-CONNECT PROJECT

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I-CONNECT is a randomized controlled clinical trial to examine the impact of social interaction delivered via video-chat on cognitive function (clinicaltrials.gov number: NCT02871921, project website: [www.I-CONNECT.org](http://www.I-CONNECT.org)). We aimed to enroll 320 community-dwelling socially isolated older adults (age  $\geq 75$  years). The recruitment of participants has started in 2018 and was ongoing when COVID-19 pandemic began. Video chat and telephone-based social interaction interventions did not change during COVID-19. However, new recruitment and cognitive assessments, which require in-person contact and deployment and retrieval of video chat devices in participant homes, were suspended due to the nature of our study population (i.e., older age, higher likelihood of comorbidities). Recently we were able to successfully switch to complete remote assessments including 1) telephone-based cognitive assessments using T-COG (Telephone Cognitive Assessment battery), and 2) contactless delivery of our study devices (Chrome books and electronic pill boxes) for subject self-installation. Our creative approach to self-installations includes color coded pictures and an easy-to-follow installation manual, accompanied by remote instruction and support via telephone. This poster introduces our remote assessment and installation protocol and participant and technical support team feedback regarding this new contactless protocol. This presentation provides useful guidance for future studies considering completely remote assessment and telemedicine approaches.

#### SUPPORTING OLDER ADULTS AND CAREGIVERS THROUGH INTEGRATIVE SERVICE LEARNING DURING COVID

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There is a growing population of older adults who are living longer and acquiring chronic illness and disabilities, making it difficult for them to complete everyday activities and age in place. More than 2 million of these older adults are homebound and 5 million need help leaving their homes. They experience social isolation, food insecurity, and lack of connection to community resources which has intensified since the pandemic. Integrative service learning models can provide home-based support to older adults while offering valuable, hands-on learning experiences for students. This study examined findings for a community-based program which trained university students to provide practical home-based support for older adults and their caregivers. Data was collected for 109 older adults who were connected with student trainees. Students provided services with groceries, companionship, and help accessing needed services. Findings from t-test results using the UCLA Loneliness Scale indicated that older adults reported less loneliness after engagement with students (mean difference = 6.15,  $t = 3.14$ ,  $df = 82$ ,  $p < 0.01$ ). Qualitative process data suggested that older adults benefited from services and a connection to their assigned students prior to and during the pandemic. Student trainees reported that the experience enriched their learning and reaffirmed their commitment to working with older adults. Community-based service learning can address home-based needs of older adults and their caregivers and enhance learning opportunities for students. Policies and practice can support a pipeline of geriatric health professionals through innovative service learning models to benefit older adults, caregivers and students.

#### THE FIRST COVID-19 STAY-AT-HOME RESTRICTIONS: AN INTERGENERATIONAL COMPARISON OF THE IMPACTS

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"Social distancing" and stay-at-home orders were enacted in many states in response to the spread of COVID-19. We sought to understand intergenerational differences in the impact of the initial COVID-19 restrictions on interactions, loneliness, and stress. Data was collected via online survey from individuals ages 18 and above during the period April 7-May 8, 2020. The predominantly female, White, and well-educated sample ( $n = 962$ ) included 245 younger adults (YAs) ages 18-34, 374 middle-aged adults (MAs) ages 35-64, and 343 older adults (OAs) ages 65+, with overall mean age 51.67 (SD=20.257; range 18-96). Before the restrictions, 41% of these OAs infrequently/never interacted