The impact of COVID-19 on dementia caregivers is gaining new interest. It is unknown how the pandemic has impacted caregivers’ burden and existential suffering. Analyses were performed on data for dementia caregivers (n=89) enrolled in the Indiana University Telephone Acceptance and Commitment Therapy for Caregivers (TACTICS) pilot trials. Individuals were primary caregivers of a family member with dementia and had clinically significant anxiety measured by a GAD-7 score >10 or between 5-9 with reported interference in life. COVID-19 anxiety was measured using the NIH CoRonA1US Health Impact Survey (CRISIS) questions. Caregivers were on average 52.2 years of age with 56.2% being child or child-in-law, 71.9% were white and 24.7% were Black. Mean burden scores, measured by the Zarit Burden Index, were higher (44.29) compared to means reported across the literature (26.7) indicating the sample experienced higher than normal levels of burden. Mean existential suffering scores measured by the subscale of Experience of Suffering Scale were lower (9.37) compared to means across the literature (11.5) indicating that overall participants experienced lower levels of existential suffering compared to those in previous studies. A significant relationship was found between COVID-19 anxiety and burden levels (x2= 9.07, p<0.05), with higher levels of COVID-19 anxiety associated with greater burden. A non-significant relationship was found between COVID-19 anxiety and existential suffering (x2=5.99, p=0.11). Results highlight the impact of COVID-19 anxiety as an external stressor on dementia caregiving, and the importance of considering context of external stressors when implementing intervention protocols for caregivers of individuals with dementia.

THRIVING-IN-PLACE: EXAMINING THE IMPACT OF INTERGENERATIONAL LIVING IN THE TORONTO HOMESHARE PROGRAM

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Most global cities, like Toronto, have rapidly aging populations who want to remain in homes and communities of their choice. Concurrently, seniors face vulnerabilities associated with low income, ageism, social isolation, and loneliness. These vulnerabilities inhibit many seniors’ desires to age-in-place. The Toronto HomeShare Program, an intergenerational homesharing program facilitates aging-in-place by matching seniors with post-secondary students. The program, with an implementation focus and a research study, was developed to address and understand the needs of seniors seeking assistance, light supports and companionship at home, in exchange for reduced-rent housing for students. A mixed methods research design was employed. Seniors and students (n=22) completed a 167 question survey (n=22) and in-depth interviews (n=18). Quantitative data yielded descriptive statistics and qualitative data was subject to thematic content analysis. Participants agreed that homesharing programs could address risk for social isolation (95%), the need to move from their community (96%), and reduce risks of economic and social exclusion for young and old (97%). From the qualitative data, six benefits were apparent for all participants: (1) reduced social isolation and loneliness, (2) increased intergenerational exchange, (3) increase financial security, (4) household assistance, (5) increased general wellbeing; (6) enhanced companionship/safety. In 2020, Toronto HomeShare (now Canada HomeShare) was recognized by the World Health Organization as an age-friendly best practice, and has been scaled nationally in 16 cities. Intergenerational homesharing programs could be a catalyst for policy and cultural reform and to support older adults to not only remain in their communities, but to thrive-in-place.

TOO CLOSE FOR COMFORT? COVID-19-RELATED STRESS AMONG OLDER COUPLES AND THE MODERATING ROLE OF CLOSENESS

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Married and cohabiting couples have important influences on one another’s stress and well-being. Pandemic-related stress may influence the extent to which couples’ stress levels are coregulated. This study examined the experience of nonspecific stress and pandemic-related stress and the moderating role of closeness among couples aged 50 and over in which at least one member had hypertension. A total of 30 couples reported their feelings of closeness to one another in a baseline interview and their feelings of nonspecific stress and pandemic-related stress every three hours for 5 days. There was no difference in closeness and nonspecific stress between husbands and wives. Wives reported greater pandemic-related stress than husbands. Actor-partner interdependence models revealed that wives’ nonspecific stress predicted husbands’ nonspecific stress (b = 0.17, SE = 0.04, p < .001) and that husbands’ nonspecific stress predicted wives’ nonspecific stress in each three hour period (b = 0.19, SE = 0.04, p < .001) and these associations were not moderated by closeness. Coregulation in pandemic-related stress among husbands and wives was moderated by wives’ feelings of closeness such that when wives’ feelings of closeness were lower, greater husband pandemic-related stress predicted lower pandemic-related stress for wives (b = -0.16, SE = 0.07, p < .05) whereas when wives’ feelings of closeness were higher, greater husband pandemic-related stress predicted greater pandemic-related stress for wives (b = 0.22, SE = 0.09, p < .05). These findings indicate that closeness may have detrimental effects especially when considering emotional coregulation in couples regarding the pandemic.

TREATING CAREGIVER GRIEF WITH NARRATIVE THERAPY

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Dementia, a devastating neurodegenerative disease with over 10 million new diagnoses each year, is characterized by many symptoms including memory loss. Individuals with memory less experience changes in mood, personality, behavior, cognition and activities of daily living which affect their daily lives. These monumental life shifts often occur rapidly, leaving caregivers unprepared to deal with the changes. Caregivers face a unique situations navigating anticipatory grief and changes in their relationships with their loved ones. Current psychological intervention for
caregivers includes utilization of cognitive-behavioral therapy and psychoeducation. More recently, intriguing research has emerged regarding the efficacy of narrative therapy for couples where one partner experiences memory loss. However, treating the anticipatory grief component specifically for caregivers has been largely overlooked in these studies. Narrative therapy revolves around identifying the current story that caregivers utilize as their cognitive framework, helping to find alternative plotlines and to process their newly-built cognitive framework. It involves externalizing the problem (in this case, dementia) and locating strengths that the caregiver and their care receiver share to “fight” the problem. Insights from both the current literature and the field have demonstrated a promising outlook on the use of narrative therapy. Such insights imply a need for more research regarding this modality specifically for caregivers, as its core ideas can be easily disseminated to gerontologists, mental health professionals and caregivers.

USER PERCEPTIONS OF A TECHNOLOGY-BASED SOCIAL MEMORY AID FOR PERSONS WITH MEMORY CONCERNS
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People with memory concerns (PWMC) are likely to experience social withdrawal and isolation. Although assistive technologies and memory aids are available to support PWMC and their family caregivers, few have been shown to improve social engagement. This study aimed to gain perspectives of PWMC and their family caregivers on the feasibility and utility of a technology-based social memory aid. We recruited 20 dyads of people with mild to moderate memory concerns and family caregivers to evaluate Smartwatch Reminder (SR), a notification system that provides a name, relationship, and photograph of nearby social contacts to aid in recognition. Dyads viewed a demonstration of the SR prototype, and then participated in semi-structured interviews over Zoom video conferencing from June to August, 2020. Interview transcripts were analyzed using thematic analysis, with analyses completed in August 2021. Our findings indicate that participants anticipated important benefits from using the technology, and thought the technology would be easy to use. Participants perceived that the memory aid could benefit them now and in the future by alleviating socialization-related stress for both members of the care dyad; however, certain features of SR restricted the potential benefits, such as the requirement that social contacts have the SR application, and that prompts are only provided during social encounters. Our findings will inform future technology-enabled memory aid development to improve social engagement for PWMC and support family caregivers.

WITHIN-PERSON VARIATION IN EMOTIONAL EXHAUSTION AMONG CAREGIVERS FOR OLDER ADULTS
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Caregiving is everyday life for family members of older adults. Care recipients’ care requirements, service usage, and caregivers’ physical and emotional conditions differ day by day. Little is known how the differences and variances relate to informal caregivers’ mental health. This study aimed to examine informal caregivers’ day-to-day fluctuation in emotional exhaustion and discuss the within-person effects on mental health among informal caregivers. We developed the Caregiving Visualization Project toolkit (Care VIP), a software program for tracking on daily basis components of care experiences such as care task of Activity of Daily Living (ADL) and Instrumental Activity of Daily Living, service usages, and caregiving burden, as well as eight items of caregivers’ emotional exhaustion. We recruited study participants between May 2018 to March 2019 who provided instrumental help to community-dwelling older adults. A total of 75 participants, who accessed the Care VIP every day by using tablets or computers and completed a one-month study, were analyzed in this study. Females comprised 80.0%, and the average age of caregivers was 52.7 years (SD=9.1). The majority were those who provided care to parents (69.3%), and those who provided to parents-in-law and spouses were 16.0% and 5.3%, respectively. The average score of the eight items on the emotional exhaustion scale, with a 4-point Likert scale, was 23.4 (SD=4.9); however, each question showed different variations. Within-person effects on mental health among informal caregivers will be discussed.

YOUR SUFFERING IS ALSO MINE: OLDER AND YOUNGER COUPLES’ RESPONSES TO THE PARTNER’S UPSETTING MEMORY
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Aging theories posit that older adults maximize their well-being by regulating their emotions and investing in their closest relationships. Most research has examined these mechanisms using study confederates rather than close dyads. The existing work on couples has focused on marital conflict; none has examined responses to the spouse’s emotional suffering. To address this, 107 married couples ages 40–86 listened to their partner disclose an upsetting personal memory. Afterward, listeners rated their own and their partner’s emotions and perspective-taking; observers reliably coded listeners’ engagement and disclosers’ emotional intensity. Aging theories offer competing predictions: older listeners may disengage from their partner’s disclosure to avoid experiencing negative emotions. Alternatively, older adults may be more engaged and thus more reactive, given the increased investment in their close relationships. Findings showed that older listeners rated their disclosing partner as less sad compared to younger counterparts (p < .05). However, this effect was attenuated (p = .077) by observed