two years after decedent death. Partners had increased odds of SMI exacerbation at 3 months into bereavement compared to 9-12 months prior to partners’ death (AOR=1.43, [1.13-1.81]). Children with a history of SMI had lower odds of SMI exacerbation in the second year of bereavement. Sociodemographic characteristics and co-occurring alcohol and substance abuse disorders were associated with higher odds of SMI exacerbations. These findings have implications for targeted bereavement support.

SESSION 4540 (SYMPOSIUM)

FOSTERING SOCIAL CONNECTIVITY AND RESILIENCE IN SEXUAL AND GENDER MINORITY OLDER ADULTS
Chair: Hyun-Jun Kim

While social connectedness and engagement are key aspects of well-being over the life course, sexual and gender minority (SGM) older adults are found to experience elevated risks of social isolation and limited social connectivity, which have been linked to loneliness. Social isolation and loneliness have been significant health concerns, increasing risk of premature death, cognitive decline, and poor health and well-being, yet SGM older adults are resilient populations. To address the strengths and challenges found in evidence-based intervention development, it is critical to understand how they have managed to build and maintain their social resources and reduce social isolation and loneliness. To this end, this symposium will analyze and incorporate the results using data from both Aging with Pride: National Health, Aging and Sexuality/Gender Study (NHAS), the first longitudinal study of SGM older adults in the United States and Innovations in Empowerment and Action (IDEA) Café, the first clinical trial pilot study addressing social isolation among SGM older adults living with dementia. Dr. Kim and colleagues with present a factor analysis suggesting a multi-dimensional construct of social resources unique to SGM older adults. Dr. Fredriksen Goldsen and colleagues will identify sexual and gender diverse older adults at heightened risk of loneliness and examine risk and protective factors. Dr. Emlet and colleagues will present findings from a pilot study, IDEA Café, designed to enhance social connectedness, physical functioning, and quality of life among socially isolated SGM older adults with cognitive impairment.

UNDERSTANDING THE DIMENSIONS OF SOCIAL RESOURCES AMONG SEXUAL AND GENDER MINORITY OLDER ADULTS
Hyun-Jun Kim, Karen Fredriksen Goldsen, and Meghan Romanelli, University of Washington, Seattle, Washington, United States

Despite the growing number of recent studies on the positive role of social resources on health and well-being among SGM older adults, the multi-dimensional construct of social resources has not been examined due to a lack of adequate measures and data. This study describes the rationale behind the measurements of social resources used in the National Health, Aging, and Sexuality/Gender Study (NHAS). We analyze NHAS data collected in 2014 (N = 2,450) to assess the reliability of these social resource measurements. Out of 28 indicators of social resources (α = .82), three distinct factor structures emerged: relational social connectedness (α = .71), collective social connectedness (α = .82), and perceived social connectedness (α = .79). All item-rest correlations for each scale were moderate to strong. The scales could be used to understand various aspects of social resources and its role in enhancing health and well-being in the historically marginalized populations.

LINKING LIVES: DISRUPTING THE CYCLE OF SOCIAL ISOLATION
Karen Fredriksen Goldsen1, Hyun-Jun Kim2, Charles Hoy-Ellis3, and Christi Nelson1, 1. University of Washington, Seattle, Washington, United States, 2. University of Utah, Salt Lake City, Utah, United States

Loneliness has been found to be associated with increased risk for early mortality and dementia, with sexual and gender diverse older adults at elevated risk of both social isolation and loneliness. Based on the Health Equity Promotion Model and Iridescent Life Course, we examine factors associated with increased risk of loneliness over time, utilizing 2014 to 2016 data from the Aging with Pride: National Health, Aging, Sexuality/Gender Study, a longitudinal national study of LGBTQ+ midlife and older adults. The findings illustrate that sexual and gender diverse older adults had nearly double rates of loneliness compared to the general population, with those living alone and having cognitive decline at increased risk. We found that higher mastery, LGBTQ+ community engagement, larger network size, and being partnered/married were associated with less loneliness over time. Loneliness is ripe for the development of interventions; additional longitudinal data is needed to further assess trajectories in loneliness.

REACHING THE SOCIALLY ISOLATED OLDER ADULTS IN DEMENTIA RESEARCH
Charles Emlet1, Karen Fredriksen Goldsen1, Hyun-Jun Kim2, Linda Teri3, Hailey Jung4, and Brittany Jones5, 1. University of Washington, Tacoma, Washington, United States, 2. University of Washington, Seattle, Washington, United States

Sexual and gender minority (SGM) older adults are at greater risk for dementia and social isolation compared to their heterosexual peers. Lack of an available caregiver is of major concern. Yet, most dementia interventions to date have been designed primarily for caregiver-care recipient dyads or solely caregivers. A pilot study evaluated a 9-session virtual program designed to address social isolation, physical functioning and quality of life among SGM older adults living with dementia without a caregiver. Participants in the experimental group (n = 14) showed high attendance (75%) and retention rates. Social support was associated with intervention adherence. Compared to controls, the experimental group showed a significant increase in physical functioning and quality of life and decrease in depressive symptomatology and perceived stress. To meet the needs of this population without adequate social resources, research must address the different configurations of resources to better serve socially isolated SGM older adults.