Impact on identity, and mental well-being. A sample of 279 primarily white (88%) female (95.3%) adults aged 40 to 84 (M = 59.9-years-old) were interviewed during the Covid-19 Pandemic. A structural equation model was developed in AMOS 28.0 to correlate these variables and do a multiple groups analysis, comparing 100 older adults (65+) and 179 middle aged adults (40-64) who all reported at least one creative hobby. Results found a negative relationship between identifying with a creative hobby and receiving recognition for the hobby, a negative relationship between mental well-being and recognition, and a positive relationship between identifying with one's hobby and mental well-being. The results suggest that recognition from others may have mixed effects on mental health but identifying with one's creative hobby may be a protective factor. Implications expectations of recognition will be discussed.

LONELINESS AND DEPRESSION: EXAMINING THE MODERATING EFFECTS OF RESILIENCE RESOURCES
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Loneliness is highly prevalent among older adults and can negatively influence their mental health. However, less is known about the factors that might mitigate the effects of loneliness on mental health outcomes such as depression. We propose that resilience resources may serve as potential protective factors that buffer the impact of loneliness on depressive symptoms. This study aimed to (a) test the effects of loneliness, as well as resilience factors of perceived family support and optimism, on depressive symptoms, and (b) examine resilience factors as moderators of the relationship between loneliness and depressive symptoms. Participants derived from the Health and Retirement Study (HRS), a nationally representative sample of the population aged 50 years and older. The analytic sample was selected with baseline measurements in either 2006 or 2008 and two follow-ups across four-year intervals (N= 7,336). Structural equation modeling with latent variables and interaction terms was used to investigate study aims. Results revealed that (a) loneliness was significantly related to an increase in depressive symptoms; both perceived family support and optimism significantly reduced depressive symptoms, and (b) the link between loneliness and depressive symptoms was weaker when older adults reported higher levels of perceived family support and greater optimism. This study highlights the important protective roles played by perceived family support and optimism in reducing the adverse impact of loneliness on depression. Results suggest that strengthening family support and fostering optimism might be promising avenues for improving mental health in older adults particularly among those experiencing loneliness.

IMPACT OF A SOCIAL CONNECTION PROGRAM ON OLDER ADULTS DURING THE COVID-19 PANDEMIC
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Background: Research demonstrates social connections decrease loneliness and improve life satisfaction among older adults. However, the COVID-19 pandemic limited social connectedness, specifically for older adults. Thus, programs aimed to increase social connectedness among older adults are integral to their well-being. Purpose: The primary objective of this study was to determine if the telephonic Peer-to-Peer (P2P) program could improve social connectedness and reduce loneliness among older adults. A secondary objective was to improve life satisfaction and social support.

Methods: Eligible older adults (age 65+) were recruited via outbound calls and/or a mailer. Participants were mailed a T1 survey, completed intervention training, and matched into a dyad. The matched dyad engaged in weekly telephone calls for 12 weeks. Post 12 weeks, participants completed a T2 survey, and a T3 four weeks later.

Results: A total of 475 participants completed a T1, and 125 dyads (250 individuals) completed a T3. Older females were more likely to participate (77% female, 44% 75+ old). Individuals who were lonelier at baseline showed a significant improvement in loneliness throughout the program, as well as improvement in social support, life satisfaction, and subjective happiness.

Conclusion: Results from this program showed significant improvement in psychosocial well-being outcomes for lonely older adults. This program took place during the initial months of the COVID-19 pandemic and demonstrated success for lonely older adults with limited technology who may have been socially isolated during this time.

LONELINESS DURING THE COVID-19 PANDEMIC AND THE EFFECT ON PSYCHOSOCIAL FACTORS AND HEALTH OUTCOMES
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Loneliness and social isolation have harmful impacts on health and well-being; thus, the social distancing mandates during the COVID-19 pandemic, meant to protect our most vulnerable populations including older adults, may have had unintended consequences. The current study aimed to assess changes in loneliness (prior to and during the pandemic) and its impact on outcomes such as perceived stress, resilience, purpose in life, quality of life and health outcomes. An annual survey on healthy aging was mailed to a randomly selected national sample (age >65 years) in 2018/2019. Respondents completed the survey again in 2020 (N=3,564) to measure the impact of COVID-19. Measures included well-being and various psychosocial factors. Health care claims data were also used to derive diagnoses for health conditions. Respondents were 52% female and 44% between 65-74 years old. Loneliness symptoms increased for one-fifth of the sample during the pandemic. Respondents lonely at both time 1 and time 2 had lower resilience, purpose in life, and quality of life and higher perceived stress