We examined sleep quality and loneliness as mechanisms through which support and strain predict depressive symptoms across ten years utilizing National Social Life, Health, and Aging Project data. Our sample included partnered participants at waves 1 and 2 (N = 1,293; 39% female, M age = 66, SD = 6.93). Support (e.g., rely on spouse) and strain (e.g., spouse criticizes you) were measured at W1, loneliness (UCLA) and sleep quality (restless sleep) were measured at W2, and depression (CES-D) was measured at W3. We estimated latent-variable structural equation models, controlling for age, gender, and W1 depression. Indirect effects of support and strain on depressive symptoms through loneliness were significant. There was an additional trend-level indirect effect of spousal strain on depressive symptoms through restless sleep. Findings highlight multiple pathways through which marital quality predicts later-life well-being.

LINKS BETWEEN PERSONALITY AND SLEEP MIDPOINT IN OLDER ADULTS IN THE NATIONAL SOCIAL LIFE, HEALTH, AND AGING PROJECT
Krishna Patel,1 Darlynn Rojo-Wissar,2 Katherine Duggan,3 Garrett Hisler,4 Brant Hasler,4 and Adam Spira,2, 1.
Johns Hopkins Bloomberg School of Public Health, Johns Hopkins Bloomberg School of Public Health, Maryland, United States, 2. Department of Mental Health, Johns Hopkins Bloomberg School of Public Health, Baltimore, Maryland, United States, 3. Department of Psychology, North Dakota State University, Fargo, North Dakota, United States, 4. Department of Psychiatry, University of Pittsburgh, Pittsburgh, Pennsylvania, United States, 5. Johns Hopkins Bloomberg School of Public Health, Baltimore, Maryland, United States

Chronotype has been linked to poor cognitive outcomes and mortality among older adults. Although previous studies indicate an association between personality and sleep, little is known about associations between personality and chronotype in older adults. We examined the association between personality and objective sleep midpoint (a measure of chronotype) in 463 older adults aged 73.5 ±7.7 from the National Social Life, Health, and Aging Project who completed the Midlife Developmental Inventory Personality scale and three nights of wrist actigraphy, from which we derived participants’ average sleep midpoints. After adjusting for demographics, higher conscientiousness was associated with earlier sleep midpoint (B=-0.53, SE=0.02, p<0.01). Associations for other traits were not significant. Findings link conscientiousness to chronotype and raise the possibility that earlier sleep timing may partially account for associations of conscientiousness with health outcomes. Further studies are needed investigating the role of personality in links of sleep and circadian factors with health.

HABITUAL SLEEP, SLEEP DURATION DIFFERENTIAL, AND WEIGHT CHANGE AMONG ADULTS
Yin Liu,1 Mari Palta,2 Jodi Barnet,2 Erika Hagen,2 Paul Peppard,2 and Eric Reither,1 1. Utah State University, Logan, Utah, United States, 2. University of Wisconsin-Madison, Madison, Wisconsin, United States

We assessed longitudinal associations between diary-measured sleep duration and clinically assessed body mass index (BMI) among 784 men and women enrolled in the Wisconsin Sleep Cohort Study (mean [SD] age = 51.1 [8.0] years at baseline). The outcome was BMI (kg/m²). Key predictors were habitual sleep duration (defined as average weekday nighttime sleep duration) and sleep duration differential (defined as the difference between average weekday and average weekend nighttime sleep duration) at each data collection wave. Men with shorter habitual sleep duration on weekdays had higher BMI than men with longer habitual sleep duration on weekdays. Participants with larger differentials between weekday and weekend sleep duration experienced more rapid BMI gain over time for both men and women. Inadequate sleep, characterized as shorter habitual sleep during weekdays and larger weekday-weekend sleep differential, is positively associated with BMI levels and trajectories among men and women in mid-to-late life.

EFFECT OF A BIOBEHAVIORAL ENVIRONMENTAL APPROACH ON SLEEP IN LOW-INCOME OLDER ADULTS
Junxin Li,1 Saffiyah Okoye,1 Lena Sciarratta,1 and Sarah Szanton,2, 1. Johns Hopkins University, Baltimore, Maryland, United States, 2. Johns Hopkins School of Nursing, Baltimore, Maryland, United States

Low socioeconomic status and disability are independent risk factors for disturbed sleep. The CAPABLE intervention used a multidisciplinary team approach of occupational therapist, nurse, and handyworker to reduce functional disability in low-income older adults. The 6-month intervention may benefit sleep as the intervention addressed multiple individual factors associated with sleep quality, including pain, depression, communication, mobility, strength, and balance. This study examined the effect of the CAPABLE intervention on actigraphy-measured sleep in a sub-sample of 73 older adults from the CAPABLE trial (26 intervention vs. 47 control). The sample was aged 75.8±7.45 years, 86.3% female, and 84.9% African American. No significant group differences in sleep parameters were found at 6-month, controlling for baseline values. The intervention resulted in a 5.56% increase in sleep efficiency (95% CI= [1.39, 9.71], Cohen’s d=0.54), and 7.39 minutes decrease in sleep onset latency (95% CI= [0.10, 14.5], Cohen’s d=0.41) within the intervention group at 6-months.

ASSOCIATIONS OF HABITUAL SLEEP DURATION AND SLEEP STAGES WITH SPEECH-IN-NOISE PERFORMANCE
Kening Jiang,1 Adam Spira,2 Kelsie Full,1 Emmanuel Garcia,1 Frank Lin,4 Nicholas Reed,2 Pamela Lutsey,1 and Jennifer Deal,4 1. Johns Hopkins Cochlear Center for Hearing and Public Health, Baltimore, Maryland, United States, 2. Johns Hopkins Bloomberg School of Public Health, Baltimore, Maryland, United States, 3. Division of Epidemiology and Community Health, University of Minnesota, Minneapolis, Minnesota, United States, 4. Johns Hopkins University, Johns Hopkins University, Maryland, United States, 5. School of Public Health, University of Minnesota, Minneapolis, Minnesota, United States, 6. Johns Hopkins University, Baltimore, Maryland, United States
Speech-in-noise performance involves central auditory and cortical processing and is fundamental to communication. We investigated cross-temporal associations of habitual sleep duration and stages (1996-1998) with speech-in-noise performance (2016-2017) in a subset of the Atherosclerosis Risk in Communities Study participated in the Sleep Heart Health Study, N=755, 61±5 years, 53% female). Speech-in-noise performance was measured by Quick Speech-in-Noise Test; range: 0-30; lower scores = worse performance. Time spent in each stage (stage 1,2,3/4; rapid eye movement (REM)) was measured by polysomnography. Habitual sleep duration was calculated by self-reported duration on weekdays and weekends. In models adjusting for demographic and disease covariates, every 10-minute increase in REM sleep was associated with better speech-in-noise performance (0.10 points, 95% CI: 0.00, 0.21); every 1-hour increase in habitual sleep duration was associated with worse speech-in-noise performance (-1.28 points, 95% CI: -2.49, -0.08) among participants sleep >8 hours. Long sleep duration might be a risk marker of speech-in-noise performance, but REM sleep might be a protective factor.

**Session 1135 (Symposium)**

**SOCIAL CONNECTION IN TIMES OF PHYSICAL DISTANCING**

Chair: Jeongeun Lee

COVID-19 has been especially devastating to older adults. To prevent the spread of the virus, physical distancing has become the norm. As a result, there are fewer opportunities available for face-to-face interaction and social activities, which may be particularly harmful to older adults, given their existing loneliness levels. Thus, this symposium brings together a collection of papers that exemplify the interplay of social connection, activities, and mental health outcomes among older adults facing loneliness. The first paper will discuss how activity diversity is linked to higher loneliness and depressive symptoms among heterosexual and LGBTQ older adults. The second paper will present findings on the changes in social connectedness due to physical distancing and their associated impact on the mental health outcomes among older adults. The third paper will present qualitative findings on the effect of physical distancing on older adults’ social connectedness using a mixed-method study. The final paper discusses the challenges faced by older adults in their use of digital media for social connection and the health benefits of active lifestyles among older adults, though there is a considerable gap in scholarship for sexual minority groups. Utilizing the Social Integration Model, we hypothesize that social activities enhance individual psychological well-being, but those effects differ by one’s social identities. Using a national AARP foundation survey of adults (45+), this study examines whether individuals’ activities predict loneliness and depressive symptoms of heterosexual (n=2905) and LGBTQ adults (n=318). We utilize an index of diverse activities, which includes, social technology use, meetings with friends, and volunteer activities. Multiple linear regression is used to study cross-sectional associations of loneliness and depressive symptoms on the diverse activity index. Results show that a wider array of activities correspond with higher psychological well-being and lower loneliness, and this association is higher for LGBTQ older adults. We discuss implications for counseling and wellness programming for LGBT older adults.

**CAN WE REPLACE OUR HUMAN CONNECTION WITH TECHNOLOGY?**

Nicholas Cone,1 and Jeongeun Lee,2 1. Iowa State University, Iowa State University, Iowa, United States, 2. Iowa State University, Ames, Iowa, United States

The COVID-19 pandemic has led to social distancing protocols, subsequently increasing social isolation for older adults. The purpose of this study was to explore the relationship between social connectedness and mental health outcomes. Leveraging NHATS, a nationally representative study (n = 2,558, Mage = 79.20, SDage = 6.25), we examined the association between the method of social connectedness and mental health outcomes. Descriptive analyses revealed older adults are using various methods (e.g., in-person, phone, and video calls) to remain connected with their social networks during COVID-19. Findings from all of the linear regression analyses indicated phone or video calls are associated with negative affect, whereas in-person visits are associated with lower levels of negative affect. These findings suggest substituting in-person visits with video calls may not be sufficient to relieve their loneliness and negative affect. Future studies should investigate this effect on physical or emotional health outcomes.

**SOCIAL CONNECTION PLANNING FOR LONELY OR SOCIALLY ISOLATED OLDER ADULTS**

Emily Bower,1 Aurora Newman,1 Paige Reohr,1 and Kimberly Vandorden,2 1. Pacific University, Hillsboro, Oregon, United States, 2. University of Rochester Medical Center, Rochester, New York, United States

Social connections are important for maintaining health and well-being with age. Behavioral interventions to promote connectedness hold promise, but there is limited evidence to guide effective modifications in the context of physical distancing or quarantine restrictions, such as those required during the COVID-19 pandemic. We present evidence for a brief (1-2 session) social connection intervention, “Connections Planning,” to enhance social connectedness for older adults. We first describe a cognitive-behavioral model of loneliness, which served as the framework for developing the intervention. We then present two case examples to demonstrate the application of the intervention with older adults in a community mental health clinic during physical

---

**DIVERSITY OF ACTIVITIES AND LONELINESS AMONG HETEROSEXUAL AND LGBT OLDER ADULTS**

Jeongeun Lee, and Joseph Svec, Iowa State University, Ames, Iowa, United States

The extant literature highlights the physiological and psychological benefits of active lifestyles among older adults, DIVERSITY OF ACTIVITIES AND LONELINESS...