older LGBTQ+ adults and older adults living with HIV/AIDS during the COVID-19 pandemic. Researchers who conduct studies with LGBTQ+ populations and with older adults living with HIV/AIDS already face challenges in recruiting and retaining large enough sample sizes. Social distancing guidelines during the pandemic prohibited many researchers from conducting in-person studies. Conducting health and social science research entirely online may have its challenges when working with these older adult populations, but it may also present new opportunities for reaching hidden or hard-to-reach groups. Presenters draw on their recent experiences conducting semi-structured interviews, online surveys, and qualitative analyses of public records to illuminate the complex considerations of conducting research remotely with LGBTQ+ older adults and older adults living with HIV/AIDS. Presenters also discuss how conducting remote research with these populations may require methodological changes in study design in order to collect the most meaningful and reliable data from research participants. Ultimately, COVID-19 has required researchers to alter or change their methods of conducting research. As the internet becomes more heavily relied upon for conducting research, it is imperative that scholars in LGBTQ+ aging and HIV/AIDS consider the potential challenges and opportunities that online research presents for their studies, and for research participants who are living with HIV/AIDS or who identify as LGBTQ+.

RECRUITING AND CONDUCTING ONLINE DYADIC SEMI-STRUCTURED INTERVIEWS WITH LGBTQ+ COUPLES FACING ADVANCED CANCER

Kristin Cloyes, Lee Ellington, Brian Baucom, Katherine Supiano, Kathi Mooney, and Sara Bybee.

In this study, LGBTQ+ adult couples facing advanced cancer were recruited online. Eligible couples were sent a direct link to electronic consent and surveys in REDCap®. Participants were then invited to complete a 45-minute dyadic semi-structured interview regarding their experience coping with cancer as a couple. This study faced difficulties in recruiting LGBTQ+ couples, and also faced the challenge of identifying and managing online responses from individuals misrepresenting themselves, and from automated accounts or “bots”. LGBTQ+ aging scholars must acknowledge how conducting research remotely with LGBTQ+ adults may necessitate changes in study design, such as changes to recruitment and more comprehensive eligibility screening designed to prevent and detect the collection of untrustworthy data. Ultimately, protecting the integrity of participant data in online research supports research accessibility and inclusion for LGBTQ+ older adults, and is the first step in conducting research that promotes health equity.

COVID-19 continues to transform the way scientists conduct research with study participants, particularly older adults who are at high risk of becoming seriously ill from the virus. For older adults who may be negatively affected by the digital divide, inclusive data collection practices become even more nuanced. Qualitative researchers moving their research into digital spaces must think critically about their use of technology, and how it affects the quality of data as well as the participant experience. This presentation highlights ethical and methodological considerations from a completely digital, community-based, qualitative research study conducted alongside LGBTQ older adults of color during COVID-19. Strategies to build and strengthen community partnerships are discussed along with challenges and opportunities for collecting data in the current digital landscape. Publicly available records are identified as a potential data source to understand the lives of LGBTQ older adults of color when in-person research is not feasible.

LGBTQ OLDER ADULT RECRUITMENT IN THE MIDST OF A COVID-19 LOCKDOWN: REMINISCENCES OF A POST-DOCTORAL FELLOW

Robert Beringer, University of Victoria, Victoria, British Columbia, Canada

Within days of obtaining ethics approval for a qualitative study “Optimizing LGBTQ Engagement with Hospice and Palliative Care in the Island Health Region” our local Covid-19 lockdown began. It took several months to have new Covid-19 research protocols (Zoom Town Hall meetings/Zoom or telephone interviews) approved. Being impatient, I teamed with another group of researchers to launch “Covid-19: Your Current Experiences and Planning for the Future,” an online survey with a large qualitative component where we planned to oversample LGBTQ respondents. In time both projects were approved, and here I reflect on recruitment lessons learned. These include my perceptions how Zoom Town Hall meetings and interviews differ from those I’ve conducted in-person, reflections on how to use social media (including targeted Facebook advertising) to recruit participants, and sadly, how to manage anti-LGBTQ sentiment that resulted from even the most targeted advertising.

QUALITATIVE RESEARCH WITH HIV+ OLDER ADULTS LIVING IN RURAL AREAS: METHODOLOGICAL CONSIDERATIONS DURING COVID-19

Erin Robinson, University of Missouri, Columbia, Missouri, United States

Older adults living with HIV/AIDS (OALWHA) in rural areas of the U.S. are a highly marginalized community. Intersectional stigma related to age, HIV status, geography, sexual orientation, gender identity, and race oftentimes create a complex lived experience for this population group. While there is a significant need for qualitative research that highlights the intersecting stigmas experienced by OALWHA in rural areas, recruitment challenges exist. Fear of being outed in their rural communities, due to their HIV status and LGBTQ+ identities, makes many OALWHA reluctant to participate in research. However, there is much resiliency in the population as well, especially during the COVID-19 pandemic. In fact, as research approaches have pivoted to phone/virtual data collection during the pandemic, this can
help promote anonymity among this population group. This presentation will detail methodological considerations for recruitment, data collection, and analysis for qualitative research with OALWHA in rural areas of the U.S.

Session 4605 (Symposium)

SOCIAL RELATIONS, STRESS, AND RACIAL HEALTH DISPARITIES
Chair: Kristine Ajrouch Co-Chair: Noah Webster
Discussant: Toni Antonucci

This symposium brings together four papers that address racial health disparities by investigating stressful aspects of social relations at different points in the life course. Clearly and colleagues focus on racial disparities in psychological health by testing cross-sectional effects of intergenerational stress over time. In particular, they investigate effects of network composition on the relationship between mothers' stressors and their children's depressive symptoms at three time points over 23 years. Camacho and colleagues use longitudinal data from the National Social Life, Health and Aging Project to examine cognitive decline among U.S. African-American, Latino, and White adults aged 60 and above. Results indicate loneliness predicted greater global cognitive decline over time in all groups. However, race differences in this association were found across cognitive function domains. Turner and colleagues consider dementia caregiving challenges among non-Hispanic Blacks. Data from five focus groups were analyzed to reveal distinctive challenges to caregiver health during the COVID-19 pandemic including increased burden and barriers to service access. Finally, Sol and colleagues examined the bidirectional association between loneliness and self-rated health over time among a racially diverse sample. Findings illustrate racial patterns in how loneliness at midlife influences health in later life. Antonucci will discuss the role of stress from social relations as a means to fully understand racial disparities in health across the life course.

MATERNAL STRESS, FAMILIAL TIES, AND CHILDREN’S WELL-BEING ACROSS 23 YEARS
Jasmine Manale,1 Simon Brauer,2 and Jennifer Cleary,2
1. National Human Genome Research Institute, Bethesda, Maryland, United States, 2. University of Michigan, Ann Arbor, Michigan, United States

According to the family stress model, parental stress impacts child well-being through several mechanisms, which may be amplified in ethnic/racial minority families given increased experiences of stress. We extend this model to examine associations between maternal stress and child well-being at three points spanning 23 years, beginning when children were aged 8-12 years and mothers were aged 24-59 (n=193 dyads). Preliminary results indicate that maternal stressors are associated with increased depressive symptoms in childhood (B=3.56, p<0.001), and this association was stronger among Black children compared to White (B=4.12, p<0.001). Effects of maternal stress on children's depressive symptoms strengthened among White children with proportionally larger kin networks (B=0.05, p<0.001). However, this association weakens as children enter adulthood. Future work will focus on identifying social resources that account for changes in the intergenerational effects of stress.

CHALLENGES IN RESOURCE UTILIZATION FOR CAREGIVERS OF PERSONS WITH DEMENTIA: A QUALITATIVE STUDY
Jen Weaver,1 Eric Owens,1 Meredith Boe,1 Jessica Bride,1 Maritza Dowling,2 Christina Prather,1 Melinda Power,1 and Robert Turner,1, 1. The George Washington University, Washington, District of Columbia, United States, 2. George Washington University - School of Nursing, Washington, District of Columbia, United States, 3. The GW Medical Faculty Associates, Washington, District of Columbia, United States

This study highlights primary caregivers’ experiences with health department policies designed to support people with cognitive impairment/Alzheimer’s Disease and Related Dementias (ADRD). Caregivers were defined as individuals aged 45-85 that provide at least 10 hours of unpaid care. Five, 90-minute focus groups were conducted virtually with 24 caregivers of individuals with cognitive impairment/ADRD. Transcripts were analyzed thematically. Caregivers were primarily Black females (75%) with at least a high school education (42%). Care recipients were likely to be community-dwelling parents (71%), with moderate or advanced (79%) dementia. Caregivers described challenges with accessing resources intended for care recipients, especially as cognitive impairment worsened. Caregivers reported providing care 24/7 as traumatizing. Home-based personal aides and companion services did not reduce this burden. COVID-19 impacted caregivers and care recipient’s access to resources increasing burden. Policies need to be flexible for ever-changing needs of individuals with ADRD and support the overall well-being of the caregivers.

LONGITUDINAL ASSOCIATIONS BETWEEN LONELINESS AND SELF-RATED HEALTH
Simon Brauer, Toni Antonucci, and Ketyne Sol, University of Michigan, Ann Arbor, Michigan, United States

Cross-legged structural equation models examined the bidirectional association between loneliness and self-rated health over three time points. We adjusted for age, gender, network size, and depressive symptoms at baseline. At baseline, the sample was 28% Black and 40% male. Average age at time 1 was 46 years, 56 years at time 2, and 63 years at time 3. Results indicated that loneliness at time 1 was associated with loneliness at time 2; loneliness at time 2 was associated with loneliness at time 3. We had similar findings for associations among self rated health. However, only one of the cross-legged paths was significant. Specifically, more loneliness at time 2 was associated with worse self rated health at time 3. These associations did not vary across black and white race. Findings indicate that loneliness at later midlife may be detrimental to later life health, regardless of race.

LONELINESS AND CHANGES IN COGNITIVE FUNCTIONING AMONG RACIALLY DIVERSE OLDER ADULTS IN THE UNITED STATES
Kelly Pacheco,1 Charles Henderson,2 M. Cary Reid,3 Elaine Wethington,4 and David Camacho,3 1. New York University, New York University, New York, United States, 2. Cornell University, Cornell University, New York, United States, 3. Weill Cornell Medicine, Weill Cornell Medicine,