Became socially isolated from family and friends, which led to them becoming depressed and mentally strained. Several caregivers felt they could not carry out their caregiver duties due to the constraints surrounding the pandemic. The varying levels of interaction with and the comfort level of physicians utilizing telehealth led to caregivers having mixed reviews on the popularized service. The results of this study will be used to culturally adapt caregiving education courses and programs promoting mastery and competency during a pandemic. In preparations for future public health crises, healthcare professionals will be able to use the results of this study to address the specific needs and improve the experiences of African American dementia caregivers.

Factors associated with older peoples’ perceptions of dignity and well-being at residential care facilities.

Charlotte Roos,1 Moudud Alam,2 Anna Swall,1 Anne-Marie Boström,3 and Lena Hammar,4 1 Dalarna University, Falun, Dalarnas Lan, Sweden, 2 Dalarna University, Borlänge, Dalarnas Lan, Sweden, 3 Karolinska Institutet, Karolinska Institute, Stockholms Lan, Sweden, 4 Mälardalen University / Dalarna University, Västerås, Vastmanlands Lan, Sweden.

Dignity and well-being should be promoted in care of older people living at residential care facilities (RCFs). In addition, care should be person-centred. Dignity and well-being can be interpreted as person-centred outcomes. Older people living at RCFs experience a lack of dignity and well-being. To promote this, it is important to understand the associated factors to target. The aim of this study was to examine the associations between perceived dignity and well-being and factors related to attitudes of staff, the care environment and individual issues (age, gender, self-rated health and dementia) among older people living at RCFs. A national cross-sectional study was conducted retrospectively. All older people 65 years and older (n=71,696) living at RCFs in 2018 were invited to respond to the survey. The survey included the areas: self-rated health, indoor-outdoor-mealtime environment, performance of care, treatment from staff, safety, social activities, availability of staff and care in its entirety. Age, gender and diagnosed dementia were collected from two national databases. Data was analysed using ordinal logistic regression models. The result indicated that respondents who had experienced disrespectful treatment, collected from two national databases. Data was analysed using ordinal logistic regression models. The result indicated that respondents who had experienced disrespectful treatment, who did not thrive in the indoor-outdoor-mealtime environment, who rated their health as poor and respondents with dementia had higher odds of being dissatisfied with dignity and well-being. There is a need to improve the prerequisites of staff regarding respectful attitudes and to improve the care environment. The Person-centred Practice framework, targeting the prerequisites of staff and the care environment, can be used as a theoretical framework for designing future improvements.

Experiences of African American dementia caregivers during the COVID-19 pandemic.

Sloan Oliver, Karah Alexander, and Fayron Epps, Emory University, Atlanta, Georgia, United States.

African American caregivers are often confronted with the complexities of caregiving through the lens of race and associated health disparities. The COVID-19 pandemic has both exacerbated the systemic disparities and deeply rooted inequities experienced by African Americans and laid bare their effects on the community of caregivers. The purpose of this project was to explore the experiences of African American dementia caregivers during the COVID-19 pandemic. Nineteen African American caregivers of persons living with dementia were recruited by primary investigators and community partners with purposeful sampling techniques to participate in semi-structured focus groups that were held April 2021. Four overarching themes were constructed during thematic analysis: social isolation, decreased well-being, the good and bad of telehealth, and challenges in fulfilling the caregiver role. Caregivers expressed that they became socially isolated from family and friends, which led

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Fake news detection in aging during the era of infodemic.

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Increasing misinformation spread, including news about COVID-19, poses a threat to older adults but there is little empirical research on this population within the fake news literature. Embedded in the Changes in Integration for Social Decisions in Aging (CISDA) model, this study examined the role of (i) analytical reasoning; (ii) affect; and (iii) news consumption frequency, and their interplay with (iv) news content, in determining fake news detection in aging during the COVID-19 pandemic. Young (age range 18-35 years, \( M = 20.24, SD = 1.88 \)) and older (age range 61-87 years, \( M = 70.51, SD = 5.88 \)) adults were randomly assigned to view COVID or non-COVID news articles, followed by measures of analytical reasoning, affect, and news consumption frequency. Comparable across young and older adults, fake news detection accuracy was higher for news unrelated to COVID, and non-COVID fake news detection was predicted by individual differences in analytic reasoning. Examination of chronological age effects further revealed that detection of fake news among older adults aged over 70 years depended on interactions between individual CISDA components and news content. Collectively, these findings suggest that age-related susceptibility to fake news may only be apparent in later stages of older adulthood, but vulnerabilities are context dependent. Our findings advance understanding of psychological mechanisms in fake news evaluation and empirically support CISDA in its application to fake news detection in aging.

FALLING BETWEEN THE CRACKS: EXPERIENCES OF BLACK DEMENTIA CAREGIVERS NAVIGATING U.S. HEALTH SYSTEMS
Karah Alexander, Sloan Oliver, and Fayron Epps, Emory University, Atlanta, Georgia, United States

In addition to numerous care responsibilities, family caregivers are expected to navigate health systems and engage in healthcare management tasks on behalf of their persons living with dementia (PLWD). These challenging tasks pose additional difficulties for Black dementia caregivers. Due to the centuries-old, disadvantaged social history of Black Americans, several unique stressors, vulnerabilities, and resources have emerged which inform and affect Black dementia caregivers’ experiences and well-being. Focus groups were held with Black caregivers (\( N = 19 \)) from the United States (U.S.) to explore the unique experiences and perspectives of this population navigating the U.S. health system on behalf of their PLWD. Five overarching themes were developed through thematic analysis: Forced Advocacy, Poor Provider Interaction, Payor Source Dictates Care, Discrimination, and Broken Health System. Black dementia caregivers unanimously concurred that the health system that they experience in America is “broken.” Gaps in the health system can lead to people [as one caregiver passionately expressed] “falling between the cracks,” in terms of care, services, and resources needed. Caregivers agreed that class, sex, utilizing public health insurance, and being a “person of color” contribute to their difficulties navigating the health system. Caregivers perceived being dismissed by providers, forcing them to advocate for both themselves and their PLWD. Healthcare providers and researchers can utilize these findings to improve the experiences and healthcare outcomes of Black patients with dementia and their caregivers. Additionally, these findings can lead to the development of culturally tailored caregiver education programs.

FEAR, RESISTANCE, OR ANTICIPATION? OLDER TRUCK DRIVERS’ REACTIONS TO THE ADOPTION OF AUTOMATED VEHICLES
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The forecasted adoption of autonomous vehicles (AVs) will lead to major changes to the job of truck driving. These changes may be particularly challenging for drivers, as the population of truck drivers skews much older than that of other occupations. In this study we sought to understand truck drivers’ attitudes towards AVs and the longevity of their job. We conducted focus groups with truck drivers, their supervisors, and upper-level managers of trucking companies. We relate supervisors’ and managers’ experiences working with drivers through the rollout of new technologies to further understand drivers’ initial reactions to automation and how their attitudes may develop. Based on qualitative open coding our analysis uncovered two overarching themes. The first theme is the unknown. With AVs, companies expect that experience will be less important, so they can hire younger workers. In response, drivers have expressed fear of being displaced and anxiety over the uncertainty of not knowing how their jobs will be affected. The second theme is adaptability, and desire to adapt. Older drivers have expressed resistance to adapting to AVs and to their job changing. Concerning however, managers envision the need for a driving workforce that has experience working with technology and is adaptable. Our study identifies key challenges concerning older workers’ reactions and career decisions in response to automation. Accounting for driver reactions to AVs is necessary not only to build theory and understanding on worker reactions to automation, but also for workforce planning and to support employees, particularly older workers.

FEASIBILITY, ACCEPTABILITY, AND IMPACT OF A SELF-GUIDED E-LEARNING MEMORY PROGRAM FOR OLDER ADULTS
Danielle D’Amico,1 Iris Yusupov,2 Lynn Zhu,3 Jordan Lass,3 Cindy Plunkett,1 Brian Levine,1 Angela Troyer,1 and Susan Vandermorris,2 1. Ryerson University, Toronto, Ontario, Canada, 2. York University, Toronto, Ontario, Canada, 3. Baycrest, Toronto, Ontario, Canada, 4. Baycrest, North York, Ontario, Canada

Clinician-led memory interventions have been shown to increase knowledge, reduce anxiety, promote memory-strategy use, and increase brain-healthy lifestyle behaviours in older adults with normal age-related memory changes. A self-guided, e-learning version of the Baycrest Memory and Aging Program® was recently developed to increase accessibility to memory interventions. The objectives of the current study were to assess program feasibility (retention rate), acceptability (satisfaction), and participant-reported impact (memory concerns, behaviour change, goal attainment). As part of a larger study, participants were 139 healthy older adults.