four time points (baseline, 2 weeks, 12 weeks, and 24 weeks). As depressive cognitions are the precursor to the development of depressive symptoms, a latent growth curve model was tested to gain an understanding of how depressive cognitions impacts the trajectory of depressive symptoms over time. The model fit the data well (Chi Square=21.025; df=9; p=.013; TLI=.976; CFI=.985; RMSEA=.063). Baseline depressive cognitions had a strong impact on the intercept (Standardized Beta=.76, p<.001) and the slope of depressive symptoms (Standardized Beta=-.67, p<.001). The continued impact of depressive cognitions over 24 weeks indicates the need for potential interventions to further address depressive cognitions as a way to decrease depressive symptoms in grandmother caregivers.

DEVELOPMENT OF A NEW MEASURE OF INTERGENERATIONAL CONTACT

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Intergenerational relationships are a predictor of greater physical, mental, and emotional well-being; they can reduce ageism and facilitate feelings of purpose and meaning, shown to be important for health and mortality. Surprisingly there are no measures of intergenerational contact (IGC) shown to be reliable and valid across age groups. Therefore, we aimed to develop a psychometrically sound survey measure of IGC. We utilized a three-phase development process, which included a Delphi-style expert panel review of items, focus groups, and validation of the survey via Amazon MTurk. The resulting 18-item survey captures details on and comparisons between both familial and non-familial contact and is appropriate for adults of all ages. We conducted confirmatory factor analyses with the 9-item family and 9-item non-family subscales for 380 young and 256 middle-aged adults reporting on contact with older adults, and 348 older adults reporting on contact with younger adults. The family scale had good model fit across all three groups ($\chi 2$ (78) = 245.74, p<.0001; RMSEA = 0.08, 90% CI = [0.07, 0.10]; CFI = .94; TLI = .92). After covarying for 2 pairs of items among the middle-age group, the non-family scale had good model fit across all groups ($\chi 2(75) = 217.21$, p<.0001; RMSEA = 0.08, 90% CI = [0.07, 0.09]; CFI = .95; TLI = .93), indicating construct equivalence across age groups. The new IGC measure can be used in all adult age groups, making it useful for scientific projects as well as program evaluations. Funded by the RRF Foundation on Aging

INTERGENERATIONAL CONFLICT AMONG ASIAN IMMIGRANT FAMILIES AND PSYCHOLOGICAL WELL-BEING: RESULTS FROM PIETY STUDY

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Research suggests that stress from migration and cultural adjustment may lead to intergenerational conflict (IC) within Asian immigrant families. Current research reports management of IC but fails to acknowledge the consequences it may have on offspring. The PIETY study, a longitudinal study of Chinese adult children (n = 547) in the

greater Chicago area, aims to examine the relationship between IC and psychological wellbeing in children of Asian immigrant families. IC is assessed by the sum of items on conflicting opinions with parents based on finances, health, parenting, and lifestyle. Psychological wellbeing was measured by the Perceived Stress Scale with a cutoff value greater than or equal to 14, R-UCLA Loneliness Instrument scored on a binary scale, and Hospital Anxiety and Depression Scale (HADS) Anxiety Subscale with a cutoff value greater than or equal to 8. Logistic regression was conducted and controlled for age, gender, education, income, marital status, and household composition. Every one-point higher conflict with parents was associated with being 2.31 times more likely to experience stress for the adult child (OR: 2.31, 95% CI: 1.49-3.57, p<.001) and being 4.56 times more likely to experience loneliness (OR: 4.56, 95% CI: 2.79-7.43, p<.001). IC, however, had a nonsignificant positive association with anxiety in adult children. The association between IC and psychological wellbeing suggests that conflict is a result of complex factors, for which interventions could be developed to improve psychological wellbeing and resiliency in families who continue to navigate cultural changes in a foreign land.

INTERGENERATIONAL FAMILY LEISURE IN THE COVID-19 PANDEMIC: SOME POTENTIALS, PITFALLS, AND PARADOXES

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COVID-19 has significantly changed the way we engage in leisure. The influence of public health measures and messaging on leisure put older and younger people alike at increased risk of stress, anxiety, loneliness, and isolation. Despite these similar experiences, ageism and tensions between generations intensified during the pandemic. Thus, it is imperative to encourage strategies that foster connections and solidarity between generations, such as participating in intergenerational family leisure. Intergenerational family leisure can both attenuate negative outcomes heightened or created by the pandemic (i.e., risk reduction) and increase positive experiences (i.e., wellness promotion). However, it is important to recognize that intergenerational family leisure may not be available, or ideal, for everyone, especially during the pandemic. There are longstanding and pandemic-specific pitfalls to engaging in intergenerational family leisure that need to be considered. Further, the conditions and handling of the COVID-19 pandemic have complicated family leisure in paradoxical ways. Many contradictions emerge as we navigate social systems and personal experiences when engaging in intergenerational family leisure during the pandemic. This paper critically presents some of the potentials, pitfalls, and paradoxes associated with connecting multiple generations in and through family leisure during the pandemic.

INTERGENERATIONAL STRAIN AND SUBJECTIVE WELL-BEING: THE ROLE OF LEISURE ACTIVITY ENGAGEMENT

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Family strain is associated with higher numbers of depressive symptoms and lower levels of life satisfaction. Leisure