

adapt to maintain adequate levels of QoL. The stress model of Lazarus and Folkman (1984) states that the impact of stress on the person depends on the resources that they use to face the factors associated with stress. Previous research has supported the protective role of reminiscence, personal growth, digital skills, psychological well-being, acceptance, resilience, gratitude, and family functioning in QoL. Likewise, interventions focused on these variables have shown an increase in QoL. However, studies based on a strengths model are still very limited in older people.

Factors associated with older adults' quality of life

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Background: The COVID-19 situation could be considered as an uncontrollable stressful life event. It may exert an impact on their quality of life (QoL). Not only COVID related variables, sociodemographic characteristics, health and appraisal but also personal resources could have an impact on QoL.

Research Objective: This study aims to assess the association between QoL and sociodemographic characteristics (sex, age), levels of health (physical health, emotional distress, and psychological well-being), COVID-19 related variables

(having got infected, having lost a loved person, being hospitalized or having had a loved one hospitalized), appraisal (fear of COVID-19 outbreak), personal resources (family function, resilience, acceptance and gratitude).

Method: QoL was assessed in all participants using CASP-19. A regression model was tested. 361 older adults in Spain participated in this study. The average age was 68.44 (SD= 5.31) and 62.8% were women (N= 227) and 58.2% were married (N= 210).

Preliminary results on the ongoing study: The results suggest that the nature of the COVID-19 may not be as relevant for the older adults' QoL as their levels of health, personal resources for managing COVID related and emotional status. We found that the older adults QoL increased when increased the levels of health, acceptance, gratitude, personal growth, and purpose in life and when there were lower scores in anxiety and depression. This model explained 66.4% of variance. In contrast, COVID-19 variables or appraisal did not show any association with QoL.

Conclusion: A better understanding of the factors associated with QoL could help health professionals to develop interventions that enhance it. Efforts to address older adults' QoL focusing on older adults' personal resources, perceived health and emotional status should be considered.

Protective and Vulnerability Factors of Posttraumatic Growth in Older Adults during the COVID-19 Pandemic

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Background: The group population of older adults has suffered the highest number of deaths and impact on health associated with the COVID-19 pandemic. Many older adults can perceive this pandemic as a traumatic experience. However, many older adults may have also experienced positive changes, defined as post-traumatic growth (PTG). Several factors may enhance or hinder this possibility of development.

Objective: This study aimed to analyze if the effects of COVID-19 affection (direct and indirect), anxiety and depression on PTG would be mediated by the protective variables life purpose and resilience.

Method: 359 older adults over 60 years old completed a web-based survey during the COVID-19 pandemic including sociodemographic data, direct/indirect affectation by COVID-19, anxiety, depression, resilience, life purpose and PTG.

Preliminary results on the ongoing study: 63.2% of the participants were women and 58.2% were married. 89.1% had been infected by COVID-19, 1.7% had been hospitalized, 15.6% had lost a loved one and 17.2% have had a relative hospitalized because of COVID-19. Women ($M = 56.77$; $SD = 18.00$) showed higher levels of PTG than men ($M = 52.41$; $SD = 17.84$) ($t = -2.19$; $p < .05$). Differences in the outcome variables based on direct or indirect COVID-19 affection were not found. The path analysis showed that the effect of COVID-19 symptoms on PTG was mainly mediated by life purpose, and anxiety to a lesser extent. We also confirmed two indirect effects: (1) the negative effect of depression on PTG through resilience and life purpose assessed simultaneously; (2) the positive effect of resilience on PTG through life purpose. Results showed an excellent model fit to this model ($\chi^2 = 3.759$; $\chi^2/df = 5$; $p = .585$; $GFI = .997$; $CFI = .999$; $RMSEA = .001$).

Conclusion: The identification of protective and vulnerability variables is essential to protect older adults from mental disorders. This study highlights the need for developing interventions that aim to increase PTG by promoting life purpose and resilience.

Older adults and digital skills

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Background: New technologies have many benefits for the quality of life of older people, but their use also carries risks and can transform older people in potential victims of cyber-attacks. The increase of ICT use has caused many older adults to be displaced from these social advances, resulting in greater isolation, negative feelings related to ICTs and less access to services.

Due to the absence of extensive and generalisable studies in this area with this population, we consider it necessary to analyse older people's behaviour in relation to ICT and the psychosocial variables that are related to their adaptation.

Objective: To determine the effect of different psychosocial variables that may be related to the adaptation to TIC and protection measures used in cyberspace in older adults.

Method: We have used a mixed research methodology: Firstly, a quantitative pilot study, analysing the variables descriptively; secondly, using qualitative interviews and an exploratory analysis. The next step is to design and validate a questionnaire that will include the 4 factors that we found relevant: victimisation, use of new technologies, fear of cybercrime and use of online protection barriers.

Preliminary results on the ongoing study: The 84% of the sample uses ICT more than one hour per day and 77% had not received training in TIC and their perception of online vulnerability is low. The need for social support for the management of these tools was observed. Older people who use ICT less are those who are not digitally literate, perceive themselves as more vulnerable in their use of ICTs and have no one to help them with these tools.

Conclusion: The identification of variables related to the use of TIC, the perception of vulnerability and the online protection of older adults is fundamental for the development of effective interventions. It would be desirable not only to offer them training in digitalisation but also to provide them with the social support they demand.