

Self-Perceptions of Aging Among LGBTQ+ Older Adult
Caregivers for Individuals Living with Neurocognitive
Disorders

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Caregiving for individuals living with neurocognitive disorders is associated with more negative self-perceptions of aging among LGBTQ+ older adults, suggesting that addressing caregivers' views of their own aging may be an important, yet underrecognized, component of dementia care.

INTRODUCTION	METHODS	RESULTS	CONCLUSIONS	
- Self-perceptions of aging (SPAs), a strong predictor of future health, are shaped by social roles and inequalities. - Caring for individuals living with neurocognitive disorders (e.g., mild cognitive impairment, Alzheimer’s disease and related dementias; MCI/ADRD) may increase risk for negative SPAs. - Higher prevalence of caregiving in LGBTQ+ communities due to poorer health, lack of family support, and LGBTQ+ stigma may exacerbate negative SPAs. - Due to the protracted and progressive deterioration, caring for individuals with MCI/ADRD may be more burdensome and detrimental to SPAs than caring for those with other age-related conditions.	- We utilize Wave 3 data from the LGBTQ+ Social Networks, Aging, and Policy Study (QSNAPS), which surveyed 982 LGBTQ+ adults aged 50+ across four U.S. states in 2023. - Associations between caregiver role and SPAs (e.g., felt age, aging-related concerns) were examined using chi-square tests and median, logistic, and Poisson regressions while controlling for sociodemographic characteristics. - In the QSNAPS Wave 3 sample, 1 in 12 (8.1%) respondents provide care to individuals with MCI/ADRD, and 1 in 8 (12.6%) care for individuals with other age-related conditions.	- MCI/ADRD caregivers (CGs) reported a felt age 4.3% higher than non-CGs (IRR=1.04, 95% CI: 1.01–1.08, $p<0.05$). - Median regression results showed that MCI/ADRD CGs felt 3.4 years older than their chronological age relative to non-CGs (95% CI: -0.01 to 6.75, $p=0.05$). - MCI/ADRD CGs were twice as likely to have concerns about stopping enjoyable activities in later life than non-CGs (OR=2.02, 95% CI: 1.16–3.51, $p<0.05$). - MCI/ADRD CGs also reported greater concerns about financial insecurity (IRR=1.26, 95% CI: 1.13–1.41, $p<0.001$) and supporting family in later life (IRR=1.47, 95% CI: 1.30–1.66, $p<0.001$).	- We find significant associations between caregiver role and SPAs in a large sample of LGBTQ+ older adults in the U.S. - Screening and appropriate counseling for negative SPAs and aging-related concerns should be incorporated into routine clinical assessments of LGBTQ+ caregivers to improve health outcomes. - Because SPAs are a modifiable predictor of future health, integrating the assessment and promotion of positive SPAs into culturally responsive caregiver supports and interventions may offer an important opportunity to enhance the health of LGBTQ+ older adult CGs, while supporting their long-term caregiving capacity.	 CONTACT N. M. Lampe, Ph.D. Department of Behavioral Health Science & Practice College of Behavioral and Community Sciences University of South Florida Tampa, Florida, USA nlampe@usf.edu  ALZHEIMER'S ASSOCIATION  AAIC>26