and abstracts were screened by two reviewers, with all full texts screened by two reviewers also. Study quality was assessed using QualSyst.

Results: From 3,904 screened records, 39 papers were included. The majority of studies were qualitative, with 23 countries represented. Barriers and facilitators could be categorised into the following five categories/themes: Situational, psychological, interpersonal, structural, and cultural. Barriers were notably more prominent than facilitators, and were multi-faceted, with many factors hindering or facilitating access to social care linked together.

Conclusions: People with dementia and carers experience significant barriers in accessing care in the community, and a varied approach on multiple levels is required to address systemic and individual-level barriers to enable more equitable access to care for all.

P38: A qualitative study on the impacts of stressful life events on the mental health of older adults in Colombia

Authors: Clarissa Giebel[1,2,*], Gabriel Saldarriaga-Ruiz[3], Mark Gabbay[1,2], Erika Maria Montoya[3], Maria Isabel Zuluaga-Callejas[3]

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Background: Many older adults in Colombia have lived through violent and stressful life events, particularly in areas of poverty where the problem of mental ill-health is commonly 239tigmatized in lower- and middle-income countries. The aim of this qualitative study was to understand the impact of stressful life events on the mental health and wellbeing of older Colombians living in areas of relative poverty.

Methods: Older adults (aged 60+) living in the Turbo region in Colombia were interviewed face-to-face between August and December 2021. Participants were recruited via snowball sampling based on criteria of ethnicity, gender, age, and place of residence. Transcripts were coded in Spanish and English by at least two research team members, using inductive thematic analysis.

Results: Twenty-six older adults participated in the study. Four overarching themes were generated: Living in violent and dangerous communities; Disturbing gender violence and gender roles; Lack of mental health awareness; Coping mechanisms. Older adults experienced a long narrative of stressful life events, from their youth into old age. Younger generations appeared to disrespect older members of Society, and participants witnessed a constant availability of around them – both interpersonal and within their neighbourhoods. Without any mental health support or awareness, older adults coped by merely accepting the extreme situations or seeking solace in their faith.

Conclusions: The health system and Government need to build up trust in its institutions and generate an awareness of mental health, as older Colombians will not approach psychological support otherwise.

Intergenerational community-based interventions embedded within neighbourhoods may provide a first avenue of mental health support.

P39: Predictors of loneliness in Chilean informal caregivers of people with dementia during the COVID-19 pandemic

Authors: Miranda-Castillo, C*; Valenzuela, M; Slachevsky, A; Thumala, D; Olavarría, L; Pinto, A; Lema, J; Gajardo, B.

Objective: The aim of this study was to determine the predictors of loneliness in informal caregivers of people with dementia in Chile during the Covid-19 pandemic.

Methods: 195 Chilean informal caregivers responded to an online or telephone survey. They were asked about sociodemographic aspects, clinical and caregiving changes experienced by them and the person with dementia during the pandemic, perceived psychosocial support and loneliness.

Results: Less years of formal education, lower income, low level of support with care tasks, living with the person with dementia, low social support, high levels of burden and depressive and anxious symptomatology were significantly related to higher loneliness. In contrast, carrying out physical and mental activity was significantly associated with lower feelings of loneliness. Almost half of the variability of loneliness was explained by higher depressive and anxious symptomatology ($\beta = 0.53$), low psychosocial support ($\beta = -0.29$) and living with the person with dementia ($\beta = 0.16$) (adjusted $R^2 = 0.48$).

Conclusion: The risk of developing loneliness in informal caregivers of people with dementia is high. Special emphasis should be placed on developing interventions that improve the mental health of this group, as well as increasing their contact with formal and informal support networks. Thus, they would be able to cope with care tasks in a better way, reducing the likelihood of experiencing feelings of loneliness.

P40: Character strengths as protective factors for the psychological well-being of grandparents

Authors: Leyre Galarraga Cristina Noriega Javier López Gema Pérez-Rojo

Objective: The aim of this study was to comprehend the role of character strengths as protective factors of grandparents' psychological well-being. Following the Lazarus and Folkman's stress model, our analyses incorporated three groups of variables (sociodemographic data, stress, and protective factors).
Method: A sample of 536 grandparents participated in the study, which an average age of 70.23 (*SD* = 7.17). We conducted staged stepwise regression analyses to test our hypotheses.

Results: Our results evidenced that younger grandparents and those providing supplementary care showed higher levels of psychological well-being than non-caregivers. Moreover, the analyses suggested that sociodemographic variables and the caregiving role lost their significance when psychological resources were taken into account. The character strengths of optimism, courage, humor, justice, problem-solving, and emotional intelligence explained the 32.7% of psychological well-being variance.