

cognitive health than men, controlling for age, education and health status despite previous literature suggesting that women experience more dementia than men. In total, this symposium highlights the need to consider contexts such as gender, race and ethnicity in order to fully understand factors influencing cognitive health and AD/DRD

LATINOS' PERCEPTIONS AND CONCERNS ABOUT ALZHEIMER'S DISEASE

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Several studies indicate that Latinos are at higher risk of developing Alzheimer Disease (AD). While research has centered on African-American/White or Latino/non-Latino differences, there exists heterogeneity within those groups. Clustering Latinos under a single group in AD resources, neglects cultural, biological and environmental differences. To address this complexity we examine perceptions and concerns about AD symptoms, diagnosis, and care among Mexicans and Puerto Ricans via six focus groups. A priori variables for thematic exploration include familiarity, cultural beliefs, trust, privacy, notions of identity and personhood. We use a pragmatic neuroethics framework as a lens to discuss and assess our findings and related implications. This will help address the multidimensional and multidirectional nature of knowledge and communication about diagnosis, treatments and nature of AD. These findings will help to identify differences and similarities among two distinct Latino groups, thereby contributing to scholarship in the fields of Latino's health, aging, and neuroethics.

PREVALENCE AND RISK FACTORS FOR AD/DRD AMONG ARAB AMERICANS

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In the United States (U.S.), Alzheimer's Disease and Related Dementias (AD/DRD) afflict over 4.7 million individuals ages 65 or older. Arab Americans are a subgroup of whites in which AD/DRD is not well understood. This study estimates prevalence and risk factors for AD/DRD among Arab Americans ages 45 or older. Data for 2000-2017 from the National Health Interview Survey (NHIS) using the region of birth question was used (N=222,219). The age- and sex-adjusted prevalence of AD/DRD was 10.3% for foreign-born Arab Americans compared to approximately 7.5% for US-born non-Hispanic whites (NHW), blacks and Asians. The prevalence of AD/DRD was 8.6% for Hispanics (all p-values <.0001). When controlling for age and sex, Arab Americans were 1.4 times (OR=1.02,1.93) more likely to have AD/DRD compared to US-born NHW. Future studies should capture other generations of Arab Americans to better understand the trend of AD/DRD among this understudied, often invisible population.

CHILDHOOD SES AND AGE-RELATED BRAIN CHANGES RACIALLY-ETHNICALLY DIVERSE OLDER ADULTS

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Socioeconomic disadvantages in childhood has been linked to dementia in late life. However, the underlying pathways through which childhood socioeconomic status (CSES) affects health in old age is unclear. CSES has been linked to age-related differences in regions affected by Alzheimer's disease (AD; e.g., hippocampus). CSES varies across race/ethnicity; It is critical to examine the relationship between CSES and age-related brain structural changes across diverse aging populations. We used an established proxy for CSES, number of siblings (i.e., sibship size), to examine whether CSES buffered age-related changes in hippocampal volume in a community-based sample of racially/ethnically diverse older adults. Sibship size moderated age-related differences in hippocampal volume in Whites ($\beta=-5.61[-11.09,-0.12]$), but not in Blacks and Hispanics. Results indicate that Whites with no sibling (vs. Whites with siblings) show less age-related difference in hippocampal volume. Future analyses will examine other CSES factors (i.e., parental education/occupation) on age-related structural changes across race/ethnicity.

EXPLORING SEX DIFFERENCES IN COGNITION IN OLDER BLACKS

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Previous literature suggest that women experience more dementia than men. However, it is unclear what accounts for these differences and whether sex differences exist among Blacks over time. We hypothesize that Black women will have worse cognitive outcomes than men and smoking may potentially explain these differences. Longitudinal data from the Baltimore Study of Black Aging-Patterns of Cognitive Aging was used to assess cognitive change over 33 months in five domains. The sample consisted of 602 community-dwelling Blacks, aged 48-92 years at baseline and 450 at follow-up. Findings indicated that Black women reported better vocabulary, working and verbal memory than Black men, controlling for age, education, smoking, and health status. These findings suggest that Black women may have some cognitive advantages in mid to later life compared to Black men. Future research should continue exploring longitudinal sex differences in cognitive domains among Blacks and the underlying drivers of these differences.

SESSION 2460 (SYMPOSIUM)

POLICY SERIES: CONGRESSIONAL UPDATE

Chair: Brian W. Lindberg, *The Gerontological Society of America, Washington, District of Columbia, United States*

This popular annual session will provide cutting-edge information on what the 116th Congress has and has not accomplished to date, and what may be left for this year. Speakers will discuss key issues such as Social Security, Medicare, Medicaid, and the Older Americans Act, caregiving, the National Institutes of Health. Hill staffers, advocates, and lobbyists will present.