

linear models were used to model the discrepancies between the number of activities of daily living for which the care recipient required assistance and the number of tasks caregivers provide, by race/ethnicity, gender, and employment status, accounting for confounders and complex sampling. Care recipients whose primary informal caregivers were employed were 69% more likely than those whose informal caregivers were not employed to experience unmet caregiving need (OR 1.69, 95%CI 1.19-2.41). A similar association between employment and unmet caregiving was observed among White caregivers (OR=1.79, 95% CI 1.16-2.69), while the association was not significant among Black caregivers ($p=0.228$). These findings suggest potentially addressable disparities in informal caregiving duties between Black and White caregivers, and can be used to inform and develop of policies and programs designed to improve caregiver health and reduce undue strain on caregiver health and wellbeing.

SESSION 1175 (SYMPOSIUM)

FACTORS INFLUENCING SELF-REPORTED COGNITION OVER TIME

Chair: Nikki Hill, *Penn State University, University Park, Pennsylvania, United States*

Discussant: Mindy Katz, *Albert Einstein College of Medicine, Bronx, New York, United States*

Self-reported cognitive problems among cognitively intact older adults are often associated with an increased risk of future cognitive decline and Alzheimer's disease (AD). However, cross-sectional evidence suggests that self-reported cognition may be more influenced by factors such as personality or affective symptoms than concurrent objective cognitive performance. Furthermore, self-reported cognition is measured using a variety of items that assess different constructs (e.g., current memory performance, perceived decline over time), which may be differentially influenced by individual characteristics or item interpretation. The purpose of this symposium is to present findings from multiple analyses that examined the influence of individual characteristics (i.e., personality, perceived stress, and family history of dementia) on self-reported cognitive problems, and to further describe how item type influences older adults' responses to questions about their memory. First, we present the results of an investigation that examined the influence of personality on three types self-reported memory, with a specific focus on how these associations may differ in Black and White older adults. Second, we extend this discussion with results of an examination of associations among personality, family history of AD, and memory self-report. Our third presentation explores bidirectional associations between perceived stress and memory complaints over time. And finally, we present the results of a factor analysis of self-reported cognition items that distinguishes those that tend to travel together over time from those that are better at discriminating between individuals.

THE INFLUENCE OF PERSONALITY ON MEMORY SELF-REPORT AMONG BLACK AND WHITE OLDER ADULTS

Nikki Hill,¹ Jacqueline Mogle,² Sakshi Bhargava,² Tyler Bell,² and Rachel Wion², *1. Penn State University,*

University Park, Pennsylvania, United States, 2. Penn State College of Nursing, University Park, Pennsylvania, United States

Personality traits, particularly neuroticism, have been associated with self-reported memory problems, but little is known regarding differences across racial groups. Community-dwelling older adults ($n=425$; $M(SD) = 76.7(4.7)$ years; 62.6% female; 72.0% White) without cognitive impairment completed up to 11 annual comprehensive medical and neuropsychological examinations as part of the Einstein Aging Study. Multilevel modeling tested: 1) the association of neuroticism, conscientiousness, extraversion, openness, and agreeableness with three types of self-reported memory problems (frequency, one-year decline, and ten-year decline), and 2) whether these associations differed by race, specifically Black and White. Neuroticism predicted self-reported frequency of memory problems and perceived one-year decline when considered alone; however, this did not remain significant after including all personality traits. Conscientiousness influenced perceived ten-year memory decline in Black older adults but not White. Our findings suggest that the influence of personality on self-reported memory problems may not be consistent across racial groups.

PERSONALITY AND FAMILY HISTORY OF ALZHEIMER'S DISEASE AS PREDICTORS OF OLDER ADULTS' SELF-REPORTED MEMORY PROBLEMS

Sakshi Bhargava,¹ Nikki Hill,² Jacqueline Mogle,² Tyler R. Bell,² and Rachel Wion², *1. Penn State College of Nursing, University Park, Pennsylvania, United States, 2. The Pennsylvania State University, University Park, Pennsylvania, United States*

Understanding individual factors (e.g., personality) associated with self-reported memory problems is important to refine identification of individuals at a higher risk of developing Alzheimer's disease (AD). Using multilevel modeling, we examined the association of family history of AD and personality traits with self-reported memory problems in older adults ($n = 421$; 72.21% White; 62.95% female; $Mage = 76.69$). Results showed that individuals with a family history of AD reported more frequent memory problems and greater one-year memory decline. Similar findings were reported for individuals with higher extraversion scores. Further, older adults with higher neuroticism scores reported greater one- and ten-year memory decline. Neuroticism was positively related to frequency of memory problems, but only among participants with a family history of AD. Findings suggest that higher neuroticism and lower extraversion may increase older adults' reports of memory problems. Family history of AD may further exacerbate this tendency.

LONGITUDINAL ASSOCIATIONS BETWEEN PERCEIVED STRESS AND MEMORY COMPLAINTS

Tyler Bell,¹ Tyler Bell,² Jacqueline Mogle,² and Nikki Hill², *1. Penn State College of Nursing, University Park, Pennsylvania, United States, 2. Pennsylvania State University, University Park, Pennsylvania, United States*

Memory complaints increase cognitive decline but show weak concurrent associations with objective memory. Instead, affect might underlie some memory complaints and their impact on future cognition. Perceived stress