

(MMSE). The gender-specific effect of educational mobility on the risk of cognitive impairment was tested by logistic regression analyses. Results: Older men who experienced downward educational mobility through marriage had a higher risk of cognitive impairment, when compared to their upwardly mobile counterparts. This association was not observed in women. Having more years of schooling protected both men and women from being cognitively impaired in late life. Discussion: These findings provide further evidence that downward socioeconomic mobility through marriage is associated with adverse health outcomes. Yet, the impact of spousal education on health must be understood through the lens of gender. Potential mechanisms that may link spousal education to cognition over the life course were discussed, including health literacy, health behaviors, and household resources.

EVENT CENTRALITY OF POSITIVE AND NEGATIVE AUTOBIOGRAPHICAL MEMORIES IN OLDER ADULTHOOD

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Centrality of an event (CE) is a characteristic denoting how important a life experience is to one's identity. Usually, positive memories are more central than negative ones in the community samples. Nevertheless, there is emerging evidence showing substantial individual differences in how one perceives CE. Especially regarding age, one could expect pronounced differences due to age-related changes in personal goals. In this study, we investigated how older adults differ from young and middle-aged adults. Apart from age, we tested whether personality traits such as neuroticism and openness to experience influence the CE ratings among age groups. The sample comprised of 363 German participants, age ranging from 18 to 89 ($M=49.57$, $SD=17.087$), 67.2 % of the sample were women. Using multilevel analysis, we found the CE of positive memories to be higher in all age groups. The CE of positive events significantly differed for older adults compared to younger adults but not to the middle-aged group. With respect to personality, neuroticism had an impact only on the CE of negative memories in younger and middle-aged adults. For older adults, neither neuroticism, nor openness to experience had an impact on CE ratings. This shows that while older adults significantly differ from younger adults in the CE of positive memories, other individual differences characteristics do not have an impact on the way older adults perceive memories as central to their identity.

EVIDENCE FOR A SPECIFIC ASSOCIATION BETWEEN SUSTAINED ATTENTION AND GAIT SPEED IN MIDDLE-TO-OLDER-AGED ADULTS

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Although cognitive decline has previously been associated with mobility limitations and frailty, the relationship between sustained attention and gait speed is incompletely characterized. To better quantify the specificity of the sustained attention and gait speed association, we examined the extent to which this relationship is unique rather than accounted for by executive functioning and physical health characteristics. 58 middle-to-older-aged community-dwelling adults without overt illness or diseases (45-90 years old, 21 females) participated in the study. Each participant completed a 4-meter gait speed assessment and validated neuropsychological tests to examine various domains of executive functions including working memory (i.e., Digit Span), inhibitory control (i.e., Stroop Color Word Test), and task switching (i.e., Trail Making Test). Multiple physical and vascular risk factors were also evaluated. Sustained attention was assessed using the gradual onset continuous performance task (gradCPT), a well validated go/no-go sustained attention task. A series of linear regression models were created to examine how different aspects of cognition, including sustained attention and traditional measures of executive functioning, related to gait speed while controlling for a variety of physical and vascular risk factors. Among all predictors, gradCPT accuracy explained the most variance in gait speed ($R^2 = 0.21$, $p < 0.001$) and was the only significant predictor ($\beta = 0.36$, $p = 0.01$) when accounting for executive functioning and other physical and vascular risk factors. The present results indicate that sustained attention may be uniquely sensitive and mechanistically linked to mobility limitations in middle-to-older adults.

EXECUTIVE FUNCTIONING, EMOTION REGULATION, AND NEGATIVE EMOTION IN SUICIDAL OLDER ADULTS

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Deficits in executive functioning, emotion regulation, and negative emotion have all been linked to suicidality. Yet, the complex interactions between these three factors and their relationships to suicidal behavior in older adults remain unclear. Participants ($N = 39$) were depressed middle and older adult ($M = 62.0$, $SD = 9.41$) inpatients with recent suicidal attempt or ideation, without psychotic depression or moderate or greater cognitive impairment ($DRS > 90$). Participants were administered measures of executive functioning (Stroop and COWAT), emotion regulation (ERQ Suppression and Reappraisal; RRS-Brooding; UPPS- Premeditation Scale), and negative emotion (PANAS-X), in addition to measures of depression (MADRS) and suicidality (C-SSRS). Results indicated that executive functioning was not significantly related to emotion regulation or negative affect, but measures of emotion regulation were related to negative emotion and frequency of suicidal ideation in bivariate analyses. Lower