

cognitive activity (Lachman et al., 2010). The present study examined whether frequent cognitive activity could compensate for lower education when focusing on change in cognitive performance across nine years. The study also explored whether cognitive activity can slow down declines in retired adults as previous research suggested that retiring is associated with an increased risk of cognitive decline (e.g., Wickrama et al., 2013). Longitudinal data from the MIDUS study included $N = 3,325$ middle-aged and older adults. Outcome variables were two factors of cognitive performance: Episodic Memory (EM) and Executive Functioning (EF). Independent variables were years of education, work status (working vs. retired), and frequency of cognitive activity. The results suggest that cognitive activity moderated the effect of educational attainment on change in EM. Individuals with both higher education and cognitive activity showed the smallest declines in EM. Individuals with lower educational attainment but high cognitive activity had less decline in EM compared to their low education counterparts. Those who increased their cognitive activity over time showed less decline in EF. In terms of work status, working adults had less decline in EM and EF compared to retired adults and retired adults who did not maintain their cognitive activity declined more in EF. The results emphasize the importance of frequent engagement in cognitive activity across the lifespan, which can attenuate cognitive declines especially among those who have lower education or have retired.

COGNITIVE PERFORMANCE IN OLDER ADULTS WITH SUBJECTIVE COGNITIVE DECLINE

Vanessa Taler,¹ Cassandra Morrison,¹ and Christine Sheppard,² 1. *University of Ottawa, Ottawa, Ontario, Canada*, 2. *Sunnybrook Research Institute, Toronto, Ontario, Canada*

Subjective cognitive decline (SCD) refers to a perceived decline in cognitive function in the absence of neuropsychological deficits. Older adults with SCD are at increased risk of subsequent development of mild cognitive impairment or dementia. We had 224 adults aged 65+ complete questionnaires assessing their subjective appraisal of their cognitive function, including questions about word-finding difficulty, memory, and attention/concentration. Participants also completed the Montreal Cognitive Assessment (MoCA). All participants exhibited cognitive performance that was within normal limits for age and education. In total, 29.5% of participants reported word-finding difficulties, 16.5% reported difficulties with remembering things, and 8.5% reported difficulties with attention/concentration. We found that (1) self-reported word-finding difficulties were associated with lower performance on delayed word recall, and (2) self-reported difficulties in concentration/attention or memory were associated with lower performance on the abstraction subtask in the MoCA. No other MoCA subtasks were associated with self-reported cognitive function. A subset of the participants ($n=69$) also completed a battery of tasks assessing semantic function, including picture naming, associative matching tasks, identification of semantic features, and semantic questions. Again, self-reported word-finding difficulty predicted lower performance on semantic tasks. These results suggest that older adults may be aware of changes in their cognitive

performance prior to objective neuropsychological impairment. Moreover, their awareness appears to be domain-specific: self-reported language difficulty is associated with lower performance on language-based tasks, while self-reported difficulty in memory, attention, or concentration is associated with lower performance on an abstraction task.

DEPRESSION AND COGNITIVE FUNCTIONING AMONG ADULTS AGE 60 AND OVER: UNITED STATES, 2011-2014

Ellen Kramarow, and Debra Brody, *National Center for Health Statistics, Hyattsville, Maryland, United States*

Previous studies have noted an inverse association between depression and cognitive functioning. The objective of this research is to explore this relationship with data from a nationally representative survey containing validated measures of cognition, depression, and other health conditions. The study population was respondents aged 60 and over who completed the examination component of the 2011-2014 National Health and Nutrition Examination Survey (NHANES) ($N=3,472$). Cognitive tests included the CERAD word list learning trials, measuring immediate and delayed memory, and the Digit Symbol Substitution test (DSST), measuring attention and processing speed. The presence of depressive symptoms was based on a score of 10 or higher out of 27 from the Patient Health Questionnaire (PHQ-9). Statistical analyses included regression models with low cognitive performance (scoring in the lowest 25th percentile) as the dependent variable. Results from regression models showed that having depressive symptoms significantly increased the odds of scoring in the lowest 25th percentile of both the DSST (OR = 3.4) and the CERAD test (OR = 1.7), controlling for age, sex, and race and Hispanic origin. Adding in a measure of heart disease showed an independent effect of heart disease on low cognitive performance (OR = 1.7 for DSST and OR = 1.3 for CERAD test), while the effect of depression was lessened but still statistically significant. In this study, depression is associated with cognitive functioning, but its effect may be attenuated by the presence of other chronic health conditions.

DEVELOPING A SPATIAL-SKILLS-FOCUSED MUSIC PROGRAM FOR OLDER ADULTS WITH CHANGES IN COGNITION

Jennie Dorris, and Juleen Rodakowski, *University of Pittsburgh, Pittsburgh, Pennsylvania, United States*

Older adults with cognitive changes need stimulating programming to maximize their cognitive abilities. One area to maximize includes spatial skills, its decline can lead to disorientation and wandering. Music has potential to maximize spatial skills: reading music's notation is associated with enhanced spatial skills in children and professional musicians. It's critical to understand the potential impact of a spatially focused music program for older adults with changing cognition; if successful, future music programs could support people staying orientated in their environments and living independently longer. We developed and assessed a six-week marimba program focused on reading music with 15 older adults ages 65-89 with changes in cognition. We compared their scores on the Orientation Test from the Test of Visual Perceptual Skills pre- and post-intervention and assessed if