healthcare, with most of these cases during the pandemic. Virtual healthcare was more often used for physical compared to mental healthcare services, with college-aged participants more likely to use mental healthcare services than adult and retirement-aged participants. Laptop computers were most widely used to access services, with smartphone use proportionally lower in retirement-aged participants (31.4%). Overall satisfaction with virtual services was high (Mdn = 5 on a 6-point Likert scale), but college-aged participants trended toward a lower satisfaction (Mdn = 4.25) than other age categories. These results support that virtual healthcare service development and access experienced significant growth during the pandemic. Age differences in the types of services, types of devices, and satisfaction with virtual services all suggest a similar theme for age-related considerations of life stage, life responsibilities, and comfort and familiarity with technology that must be addressed for virtual healthcare to reach its full potential and reach equitably across the lifespan.

THE EFFECT OF A VIRTUAL REALITY DELIVERED PHYSICAL ACTIVITY INTERVENTION ON THE PHYSICAL FUNCTION OF OLDER ADULTS

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COVID-19 public health recommendations have prohibited many older adults from attending in-person physical activity (PA) programs that improve physical function and promote functional independence. Most PA programs have shifted towards a video conference (VC) format, but this modality has been noted to "flatten" the social experience which is fundamental for lasting behavior change. Virtual reality (VR) is now designed for immersion and place-presence and may be better suited for instilling a feeling of social connection, which will likely improve physical function. The purpose of this study was to evaluate differences in physical function after a 4-week in-home VR or VC based PA intervention. Low-active adults (66.8±4.8 years) were randomized to VR (n=5) or VC (n=4) based PA counselling and instructed to find activities that were intrinsically motivating. VR participants were asked to select pre-approved available active games in addition to enjoyable real-world activities. ANCOVA models were used to explore group differences in six-minute walk distances across time. Results are reported using η^2 effect sizes based on the small sample size. After controlling for baseline values, the ANCOVA models revealed a moderate-to-large magnitude effect for distance traveled during the six-minute walk test (η^2=.10). Additionally, the VR group participants walked 42.63 meters further, which approaches a clinically meaningful difference. These promising early findings suggest there is value to exploring the impact of VR-delivered, group-mediated activity promotion on physical functioning in older adults. Future research should investigate aspects of VR that promote increased social connection and physical function in the older adult population.

THE HERITABILITY OF COGNITIVE AGING: A SYSTEMATIC REVIEW OF LONGITUDINAL TWIN STUDIES

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Heritability of cognitive ability changes across late adulthood, although whether genetic variance increases or decreases in importance is not understood well. We performed a systematic review of the heritability of cognitive ability derived from longitudinal twin studies of middle-aged and older adult twins. Using the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) guidelines, articles were identified in APA PsycINFO and Clarivate Web of Science electronic databases. Identified articles were screened by title and abstract; remaining full-text articles were then fully evaluated. Reference sections served as an additional method for identification of relevant articles. In total, 3,106 articles were identified and screened, 28 of which were included and were based on data from 10 longitudinal twin studies published from 1994-2021. There are large genetic influences on an initial level of cognitive performance across domains whereas there are small to moderate genetic influences on change in performance with age. Evidence was less definitive about whether the same or different genetic factors contribute to both level and change. Non-shared environmental influences appeared to drive individual changes in cognitive performance. Heritability tended to either be stable or decline after 65 years, possibly because of the increasing importance of non-shared environmental influences on cognitive ability. Recent studies report increases in heritability across specific subtests and domains. Shared environmental variance accounted for little variance in cognitive ability. Emerging research questions and future directions for understanding genetic and environment influences in the context of gene-environment interplay are highlighted in this review.

THE IMPACT OF AGE ON MOBILE TECHNOLOGY USE DURING THE COVID-19 PANDEMIC

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The COVID-19 pandemic led to quarantines and mandatory spatial distancing; people of all ages were encouraged to use technologies instead of actual human contact as part of COVID-19 prevention. The promotion of mobile applications (apps) during the pandemic influenced mobile technology use behavior. This study explored age differences in mobile technology use during the COVID-19 pandemic. A pilot-tested survey was distributed using online survey software. Persons surveyed were 35 years of age or older, currently living in the United States of America with experience using mobile technology. Survey questions pertained to mobile technology use frequency and factors influencing the decision to use mobile technology. The nationwide response included 1212 individuals. The average age of participants is 56.12±12.26 years old (female: male = 1.24:1). Responses were categorized participants into three age groups, 35 to 49, 50 to 64, and 65 or older. Daily mobile technology use frequency increased significantly (p<0.01) for all groups