data; characteristics of high schools and colleges, employers, industries, and communities of residence; voting records from 2000-2018; Medicare claims; and the National Death Index. Efforts are underway to expand the racial/ethnic and educational composition of the WLS by supplementing the original sample with a new cohort of age-matched adults drawn from Wisconsin's Black, Hispanic, Asian-American, and Native American communities.

#### WLS-ILIAD: INITIAL LIFETIME'S IMPACT ON ADRD

Pamela Herd, Georgetown University, Georgetown University, District of Columbia, United States

Between 2021 and 2025, WLS will collect two new waves of data, which will capture detailed measures of cognitive change and dementia as the cohort reaches their early to mid 80s. In this session, I will provide an overview of the data that we're collecting, as well as opportunities to explore early and mid-life determinants of cognitive change and dementia onset in this unique study. Compared to existing studies, the WLS offers some novel opportunities. First, it will provide one of the only opportunities to study how early and midlife life conditions and experiences, on data gathered prospectively, can shape cognitive trajectories and dementia in later life. Second, its unique sibling design provides significant analytic advantages, improving causal inference. Third, the study includes a large group of rural participants, allowing for closer examinations of how rural conditions may shape risk and resilience against cognitive decline and dementia in later life.

#### WLS-ILIAD: NEW LONGITUDINAL RESOURCE FOR COGNITIVE AND DEMENTIA DATA

Sanjay Asthana,<sup>1</sup> Pamela Herd,<sup>2</sup> and Victoria Williams,<sup>3</sup> 1. University of Wisconsin, Madison, Wisconsin, United States, 2. Georgetown University, Georgetown University, District of Columbia, United States, 3. Division of Geriatrics and Gerontology, UW-Madison,, University of Wisconsin-Madison, Wisconsin, United States

One of the distinctive strengths of WLS is the availability of Henmon-Nelson IQ scores on all participants while in high school, followed by prospective collection of data through cognitive batteries of varying size and sophistication. Launched in 1993, the initial longitudinal cognitive testing included 8 abstract reasoning items followed by the administration of larger cognitive batteries in 2004 and 2011 comprised of a 10-item word recall test, digit ordering task, phonemic and category fluency, as well as repeated and new items from the WAIS-R similarities task first administered in the 1993 survey. In 2018, with R01 funding from NIA, the scope of cognitive testing expanded significantly and includes administration of a phone-based cognitive screening measure, and a comprehensive in-person neuropsychological assessment for individuals identified at risk for dementia targeting a range of cognitive domains, including memory, language, attention, visuospatial abilities, and executive functioning.

# BIOLOGICAL MEASURES IN THE WLS: GENETIC AND MICROBIOME DATA

Kamil Sicinski, University of Wisconsin-Madison, Madison, Wisconsin, United States

Ever since releasing genotype data in 2017, the WLS continually expands resources available to users interested in genetic research. Key advantages to the WLS data for genetics research include its sibling sample and nearly full life course longitudinal study design. In 2021, we now have state-of-the-art polygenic scores available in multiple domains, such as health, cognition, fertility, personality, risk behaviors and attitudes, and life satisfaction. The scores cover phenotypes spanning from adventurousness, through educational attainment, to age at which voice deepened. Additionally, the genotype data was re-imputed in 2021 to the superior Haplotype Reference Consortium reference panel and the WLS expects to obtain copy number variants data next year. In addition to genetic data, we have a set of novel microbiome data on a subset of participants that allows researchers to study relationships between environments and gut microbial composition.

## HOW TO ACCESS AND USE DATA FROM THE WISCONSIN LONGITUDINAL STUDY

Carol Roan, University of Wisconsin - Madison, Madison, Wisconsin, United States

With over 27,000 analysis variables covering more than 60 years of participants' lives, the WLS data can be overwhelming to new users who are looking for the measures they need to answer their research questions. Core WLS survey data is free and easy to download from our website. As we add new types of measures and new waves of data, we refine our data sharing methods to balance our need to make the data easily available with the need to protect the confidentiality of participants. This presentation will teach users how to access to the data files they need for their research and how to use our online documentation of survey instruments and data files. Symposium attendees will also receive a USB drive with the publicly available data and complete documentation.

#### Session 2340 (Symposium)

### TRANSITIONS TO LONG-TERM RESIDENTIAL CARE SETTINGS

Chair: Bram de Boer

Co-Chair: Hilde Verbeek

Discussant: Joseph Gaugler

During their life course, many older adults encounter a transition between care settings, for example, a permanent move into long-term residential care. This care transition is a complex and often fragmented process, which is associated with an increased risk of negative health outcomes, rehospitalisation, and even mortality. Therefore, care transitions should be avoided where possible and the process for necessary transitions should be optimised to ensure continuity of care. Transitional care is therefore a key research topic. The TRANS-SENIOR European Joint Doctorate (EJD) network builds capacity for tackling a major challenge facing European long-term care systems: the need to improve care for an increasing number of care-dependent older adults by avoiding unnecessary transitions and optimising necessary care transitions. During this symposium, four presenters from the Netherlands and Switzerland will present different aspects of transitions into long-term residential care. The