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Psychological and Social Factors Associated with Sleep Health Across Adulthood

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participants who scored lower in Neuroticism, and higher in Extraversion, Openness, and Conscientiousness retrieved more words, independent of age, gender, and education. These associations were consistent across semantic and letter fluency tasks. Moderation analysis indicated that the associations between personality and semantic fluency were stronger in older samples (except for Openness) and among individuals with lower education. This pattern suggests that these associations are stronger in groups vulnerable to cognitive impairment and dementia. Personality traits have pervasive associations with fluency tasks that are replicable across samples and age groups.

ASSOCIATIONS BETWEEN PERSONALITY TRAITS AND COGNITIVE RESILIENCE IN OLDER ADULTS

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There are considerable individual differences in the rates of cognitive decline across later adulthood. Personality traits are one set of factors that may account for some of these differences. The current project explores whether personality traits are associated with trajectories of cognitive decline, and whether the associations are different before and after a diagnosis of dementia. The data will be analyzed using linear mixed effects regression. Across these goals is a focus on replicability and generalizability. Each of these questions will be addressed in four independent longitudinal studies of aging (EAS, MAP, ROS, SATSA), then meta-analyzed, thus providing an estimate of the replicability of our results. This study is part of a registered report of existing data that is currently under stage 1 review.

ASSOCIATIONS BETWEEN PERSONALITY TRAITS AND COGNITIVE RESILIENCE IN OLDER ADULTS

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There is often discordance between brain pathology and dementia diagnosis. Some individuals maintain cognitive function throughout their lives but show high burden of neuropathology after death (e.g. amyloid plaques, neurofibrillary tangles, vascular disease, Lewy bodies, and/or TDP-43). Conversely, some demonstrate significant decline and receive a dementia diagnosis, while showing minimal neuropathology at autopsy. The current study seeks to understand these resilience/vulnerability profiles, with a focus on individual differences. That is, are individuals with certain personality characteristics (e.g. high openness, low neuroticism) more/less likely to have cognitive resilience or vulnerability? Using psychosocial and autopsy data from the Rush Memory and Aging Project and the Religious Orders Study, this study uses a resilience index based on residuals derived from regressing global cognition on global pathology, then entering personality traits as predictors of cognitive resilience. The analysis plan will be submitted to the Journal of Gerontology's special issue on pre-registration of existing data.

SESSION 3580 (SYMPOSIUM)

PSYCHOLOGICAL AND SOCIAL FACTORS ASSOCIATED WITH SLEEP HEALTH ACROSS ADULTHOOD

Chair: Soomi Lee, *University of South Florida, Tampa, Florida, United States*

Discussant: Orfeu M. Buxton, *Pennsylvania State University, University Park, Pennsylvania, United States*

Sleep is associated with all-cause mortality, cardiovascular disease, cognitive impairment, as well as daily social interactions and productivity. Studies often have focused on sleep duration only, lacking the ability to comprehensively understand the importance of age-related changes in varied facets of sleep health. Moreover, psychological and social factors that may be associated with sleep health in adulthood are still poorly understood. This symposium showcases contemporary endeavors towards understanding how diverse indicators of sleep health relate to psychological and social factors across adulthood. Paper 1 uses perceived job discrimination as a social stressor to test associations between perceived job discrimination and sleep health (difficulty falling/staying asleep, excessive daytime sleepiness, sleep duration) among working women. Paper 2 examines the relationship between personality traits and self-reported and actigraphy-measured sleep health (sleep duration, sleep quality, sleep latency, insomnia symptoms, wake-after-sleep-onset). Paper 3 uses daily diary data to examine the link between pain and sleep health (sleep disturbances, napping) in older adults' everyday lives and test moderating effect of social support. Paper 4 examines sleep health (sleep latency, feeling unrested) as a mechanism linking physical activity and cognitive function. These papers use different project datasets that include diverse populations of middle-aged and older adults, such as the Sister Study, Midlife in the United States Study, and Daily Experiences and Well-being Study. At the end of these presentations, Dr. Buxton will discuss their theoretical and methodological contributions, and consider challenges and opportunities for future research.

PERCEIVED JOB DISCRIMINATION AND SLEEP HEALTH AMONG WORKING WOMEN: FINDINGS FROM THE SISTER STUDY

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Job discrimination is a social stressor that may lead to sleep health disparities in workers; however, limited research has examined the relationship, especially with specified sources of job discrimination. Using longitudinal data from the Sister Study, we tested the associations of perceived job discrimination (due to race, sex, age, and health conditions) with sleep health among working women (n=26,085). Among those without sleep difficulty at Time 1, race- and age-specific job discrimination was associated with increased