Results: A series of hierarchical linear regressions were run using separate IADL timeliness and accuracy as the dependent variable. In the first step, demographics (age, sex, education) were entered. Then, EMA EF was entered, followed by mean EMA sleep hours and EMA mean restfulness, and lastly, variability in EMA sleep hours and EMA restfulness. EMA EF was found to significantly predict both IADL accuracy (B = .46, p = .001) and timeliness (B = .45, p = .005). Variability in EMA sleep hours (B = .40, p = .008) and restfulness (B = -.29, p = .043) both predicted IADL accuracy beyond other variables, while mean levels did not. Additionally, variability in sleep hours and restfulness substantially improved the prediction of IADL accuracy above and beyond other variables in the model, accounting for an additional 16% of variance (F (2) = 3.80, Δ R2 = .16, p = .006). Neither mean levels of or variability in sleep hours or restfulness predicted IADL timeliness.

Conclusions: Results suggest that greater fluctuations in the amount and quality of sleep across days may render healthy older adults more susceptible to lapses in daily functioning abilities, particularly the accuracy with which IADL tasks are completed.

Categories: Aging
Keyword 1: activities of daily living
Keyword 2: executive functions
Keyword 3: sleep
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49 Health Literacy and Well-Being in Older Adults

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Objective: Although health problems are often a natural consequence of aging, many older adults struggle to manage their health care problems. Health literacy refers to the ability to access, process, and use health information to make appropriate decisions to promote good overall health. Low levels of health literacy are associated with a host of negative outcomes such as less efficient use of healthcare services, higher healthcare costs, increased mortality, and poorer self-rated health. In those with medical conditions (e.g., diabetes), lower health literacy is linked with higher levels of depression. It is important to investigate whether mental health is linked to health literacy as understanding these links has the potential to identify those at risk for negative outcomes and thus implement protective strategies. Therefore, the current study sought to determine the extent to which various mental health constructs such as happiness, well-being, anxiety and depression are related to health literacy in a community-based sample of cognitively healthy individuals. We hypothesized that higher levels of health literacy would be associated with higher self-reported well-being, happiness, and lower anxiety and depression.

Participants and Methods: _Design_ - Cross-sectional, prospective study. _Setting_ - Community-based. 93 individuals were included with mean age=59.02 years (SD=15.12) and mean education=15.70 (SD=2.39). 60% were women, the majority were White (55%) while 38% were Black and 7% belonged to other races; 90% were non-Hispanic. **Measures:** _Health Literacy_ - Health literacy was measured by an 8-item instrument in the Rush Memory and Aging Project that examined the participant's understanding of health care, treatment, and related behaviors. _Happiness_ - Happiness was measured by 5 items from the Satisfaction with Life Scale using a 7-point scale (1 = strongly agree; 7 = strongly disagree). Higher scores indicated lower levels of happiness. _Well-being_ - Well-being was measured with an 18-item instrument from the Rush Memory and Aging project, with higher scores indicating better well-being. Statistics: Bivariate correlations between age, education, and mental health measures and health literacy were examined.

Results: Higher level of health literacy was significantly associated with age (r = .282 p = .009) and education (r = .228 p = .039). Contrary to our hypothesis, health literacy was not significantly associated with happiness (r = .002 p = .987), well-being (r = .037 p = .742), depression (r = .005 p = .962) or anxiety (r = -.064 p = .568). Even after controlling for age and education, these associations remained significant.

Conclusions: Higher level of healthy literacy was associated with older age and higher level of education. However, no significant association was found between health literacy and mental health measures of happiness, well-being, depression, and anxiety in cognitively healthy individuals, even after controlling for demographics. The lack of such associations in this study was unexpected and suggests that other factors such as the presence of health conditions (e.g., diabetes, cancer) might critically contribute to such associations. Future studies should examine these associations in a larger context to better understand how to promote healthy self-care behaviors.

Categories: Aging
Keyword 1: aging (normal)
Keyword 2: everyday functioning
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50 Examining the Utility of a Performance-Based Test of Everyday Function for Assessing Cognition in Older Adults Who Speak English as a Second Language

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Objective: Accurate early detection of subtle cognitive difficulties is critical for optimizing treatment of neurodegenerative disease. Those who speak English as a second language (ESL) in the US may be at a disadvantage on English-written neuropsychological tests, increasing the potential for error, particularly when cognitive difficulties are mild and/or when informants are not available/unreliable. This study examined the utility of a standardized, performance-based test of everyday function for the assessment of cognition in ESL older adults.
Participants and Methods: Five ESL participants (Mage=83 years; range 65-84 years old) were recruited along with 43 cognitively healthy, native English speakers (controls) as part of a larger study of functional assessment in community-dwelling older adults. Participants were required to identify a study partner to answer questions about their cognitive abilities and everyday functioning. ESL participants reported diverse native languages: Cantonese, Mandarin, Gujarati/Hindi, Farsi, and Azeri. One of the 5 ESL participants reported a diagnosis of MCI. Participants completed the Mini-Mental Status Exam, Trail Making Tests, Digit Span, Boston Naming Test, Hopkins Verbal Learning Test, and Brief Visual Memory Test, resulting in 15 test scores. Participants also completed the Naturalistic Action Test (NAT), a performance-based tests that requires preparation of a breakfast and lunch using standardized objects presented on a table. Recordings of NAT performance were scored by two coders for time to completion, accomplishment of task steps, and errors (overt, micro-error, motor), resulting in 10 scores for the Breakfast and the Lunch tasks. Any discrepancies amongst the two coders were resolved by our lab. Informant-report questionnaires included the Functional Assessment Questionnaire (FAQ), Everyday Cognition Questionnaire (ECog) and IADL-C. Total scores from the cognitive tests, NAT, and informant reports for each ESL participant were compared against the scores of Controls by computing T-scores using the Control M and SD. Low/impaired test scores were defined as <1.5 SD.
Results: Informants reported intact everyday function (FAQ, IADL-C) for all ESL participants. Informant-reported ECog scores varied as expected; with mild decline reported for the participant with MCI. On traditional cognitive tests, ESL participants showed variable performance, such that low scores were obtained on up to 9 of the 15 scores. The ESL participant with MCI obtained low scores on 11/15 scores. On the NAT, all of the ESL participants without MCI showed scores on the Breakfast (accomplishment, errors) that were comparable to Controls. Completion time for both Breakfast and Lunch and Lunch scores (accomplishment, errors) were variable, with low across observed in ESL participants with healthy cognition.
Conclusions: Older participants with ESL and healthy cognition showed highly variable scores on traditional, neuropsychological tests. However, on one item from a performance-based assessment of everyday function (NAT Breakfast), ESL participants with healthy cognition consistently performed well compared to healthy Controls. Performance was less consistent for completion time across both NAT