

cognitive impairment. We tested a structural equation model with AARC gains and losses as predictors of cognitive performance and depressive symptoms as a mediator of the association of AARC losses with cognitive performance. The model fit the data well. The correlation between AARC gains and losses was negligible, yet higher levels of both AARC gains and losses predicted poorer cognitive scores. Hence, higher AARC gains did not confer cognitive protection. This unexpected pattern of results underscores the complexity of mapping individuals' awareness onto objective outcomes.

EXAMINING THE RELATION AMONG SUBJECTIVE AGE AND WORKING MEMORY IN OLD AGE ON A HIGH-FREQUENCY BASIS ACROSS 7 DAYS

Anna Lücke,¹ Jelena Siebert,¹ Oliver Schilling,¹ Denis Gerstorff,² Ute Kunzmann,³ Anna Kornadt,⁴ David Weiss,⁵ and Hans-Werner Wahl,⁶ 1. *Heidelberg University, Heidelberg, Baden-Württemberg, Germany*, 2. *Humboldt University Berlin, Berlin, Berlin, Germany*, 3. *University of Leipzig, Leipzig, Sachsen, Germany*, 4. *University of Luxembourg, Esch-sur-Alzette, Diekirch, Luxembourg*, 5. *Leipzig University, Leipzig, Sachsen, Germany*, 6. *University of Heidelberg, Heidelberg, Baden-Württemberg, Germany*

While increasing longitudinal evidence suggests that negative age views accelerate cognitive decline and increase dementia risk, we know little about such co-variance dynamics on a daily basis. We make use of subjective age and working memory performance data obtained six times a day over seven consecutive days as people went about their daily routines from 123 young-old (aged 66-69 years, 47.2% women) and 42 old-old (aged 86-90 years, 55.8% women) adults. Notably, multilevel models revealed considerably-sized short-term intra-individual variation of subjective age and working memory within days and these short-term within-day fluctuations in subjective age and working memory were coupled as expected. Hence, increased subjective age went along with lowered working memory confirming previous research. However, the respective between-day associations appeared reversed. Given this evidence of correlated short-term variability, we also discuss implications of different change dynamics that might explain moment-to-moment versus day-to-day associations between subjective age and working memory.

SESSION 5625 (SYMPOSIUM)

IMPROVING DETECTION OF COGNITIVE DECLINE AND IMPAIRMENT USING EVERYDAY BEHAVIORAL AND SOCIAL MARKERS

Chair: Ruixue Zhaoyang

Co-Chair: Eric Cerino

Discussant: Stacey Scott

Early detection of cognitive decline and mild cognitive impairment (MCI) during the pre-symptomatic phase of Alzheimer's disease is particularly important for maximizing effectiveness of clinical trials and efficiency of resource allocation. However, it is difficult to distinguish early signs of decline and impairment from normative aging, especially with biomarkers and clinical-based assessments that are expensive and challenging to apply widely. Ambulatory assessments

in naturalistic settings provide opportunities to capture everyday markers of cognitive decline and offer cost-effective tools for sensitive, early detection of transitions to MCI in community-dwelling older adults. In this symposium, we present four studies that use ecological momentary assessment (EMA) data from the Einstein Aging Study to showcase how everyday markers of behavioral and social functioning assessed up to six times a day for 14 consecutive days can facilitate early detection of cognitive difficulties. Zhaoyang et al. examine whether older adults with intact cognition versus MCI differ in patterns of daily social interactions. Hyun et al. investigate how the diversity of daily activities is associated with ambulatory cognitive deficits. Cerino et al. compare the sensitivity of everyday markers of stress versus global trait-based stress measures to detect MCI. Roque et al. use completion time from EMA surveys as a reliable and unobtrusive way to measure cognition and distinguish those with and without MCI. Stacey Scott will integrate insights gained from these four papers, and discuss the opportunities and challenges faced when combining ambulatory assessments of everyday markers with traditional methods to better detect cognitive decline and impairment.

THE ROLE OF DAILY SOCIAL INTERACTIONS IN DETECTING MILD COGNITIVE IMPAIRMENT

Ruixue Zhaoyang,¹ Stacey Scott,² Eric Cerino,³ and Martin Sliwinski,⁴ 1. *The Pennsylvania State University, University Park, Pennsylvania, United States*, 2. *Stony Brook University, Stony Brook, New York, United States*, 3. *Pennsylvania State University, University Park, Pennsylvania, United States*, 4. *Penn State University, University Park, Pennsylvania, United States*

Social relationships play an important role in cognitive health and aging. However, it is unclear how older adult's cognitive function affects their everyday social interactions, especially for those with mild cognitive impairment (MCI). This study examined whether older adults with intact cognition vs. MCI differed in their daily social interactions. Community-dwelling older adults from the Einstein Aging Study (N=244, 70-91 yrs) reported their social interactions five times daily for 14 consecutive days using smartphones. Compared to those with normal cognitive function, older adults with MCI reported less frequent positive social interactions (p=0.012) and in-person social activities (p=0.006) on a daily basis. These two groups, however, did not show significant differences in their social relationships assessed by a conventional global questionnaire. The results support that, relative to global social relationships, daily social interactions are more sensitive, ecologically valid social markers that can facilitate the early detection of MCI.

EVALUATING DAILY VERSUS GLOBAL STRESS APPRAISALS' SENSITIVITY TO MILD COGNITIVE IMPAIRMENT

Eric Cerino,¹ Stacey Scott,² Ruixue Zhaoyang,³ Richard Lipton,⁴ and Martin Sliwinski,⁵ 1. *Pennsylvania State University, University Park, Pennsylvania, United States*, 2. *Stony Brook University, Stony Brook, New York, United States*, 3. *The Pennsylvania State University, University Park, Pennsylvania, United States*, 4. *Albert Einstein College of Medicine, Bronx, New York*,