Status for Japanese (TICS-J) and modeled as a binary outcome (cut-off <33 points). Natural language data was collected by semistructured interviews about health conditions and cognitive orientation in space, time, and place. We used an open-source text segmentation library to parse natural language text into bag-of-words and term frequency-inverse document frequency (TF-IDF) representations. Results: There were 38 (19.9%) outpatients and 153 (80.1%) community dwellers, and 60 (31.4%) participants were defined as cognitive impairment. The maximized TF-IDF score was 0.49 in cognitive orientation in time questions. In this question, participants without cognitive impairment could not calculate the score. There were no significant differences in TF-IDF scores between participants with and without cognitive impairment. Conclusions: Elderly without cognitive impairment might not have an episode about cognitive orientation in time, and this may help for early detection of cognitive impairment

EXAMINING COGNITIVE FUNCTION AND SELF-ESTEEM OF MIDDLE AGED AND OLDER ADULTS

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Research shows that self-esteem and well-being have strong correlations to cognitive abilities. People with high self-esteem, compared to those with a low self-esteem, tend to evaluate themselves as more favorable after both high and low performance. However, less research has been conducted on self confidence among the older population and how this can potentially negatively or positively influence the aging process. The purpose of the study was to see if there is an effect of age on cognitive function. The second aim was to see if there is an effect of cognitive function on self-esteem. The first hypothesis was that middle-aged adults would exhibit higher cognitive functioning than older adults. The second hypothesis was that those with lower cognition would exhibit lower self-esteem. A secondary analysis of data from the National Social Life, Health, and Aging Project (NSHAP) was performed on 60 randomly selected individuals from a total of 3,005 participants. A 2 x 2 chi square test revealed that the younger group (63%) compared to the older group (37%) were significantly more likely to exhibit perfect cognitive functions (versus not), χ^2 (1) = 4.27, p < .05. A One-Way ANOVA revealed no significant main effect of cognitive function on self-esteem, F(1, 58) = 2.97, p = .09. This suggests that cognitive functions are more likely to decline as one ages but cognitive function alone might not strongly influence self-esteem. Future research should aim to understand under what conditions confidence influences cognitive function to promote healthy interventions for successful aging.

NEUROPSYCHIATRIC SYMPTOMS BY COGNITIVE STATUS FOR MEXICAN-AMERICANS AGED 85 AND OLDER

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Older adults with dementia and cognitive impairment often experience neuropsychiatric symptoms (NPS). Few studies have investigated the presence of NPS among older Mexican-American adults. Our objective was to describe the NPS of Mexican-Americans 85 years and older according to cognitive status. Data came from wave 9 (conducted in 2016) of the Hispanic Established Populations for the Epidemiological Study of the Elderly. The final sample consisted of 381 care recipients aged 85 years and older, along with their caregivers. The 12-item Neuropsychiatric Inventory (NPI-12) was administered to measure behavioral and psychiatric symptoms among the care recipients. Cognitive impairment was defined as a score of 18 or less on the Mini Mental Status Exam (MMSE). Care recipients with a diagnosis of dementia as reported by the caregiver were also classified as cognitively impaired. Overall, 259 (68.0%) participants had one or more NPS. Logistic regression models were used to estimate the average marginal effect (range = -1 to 1) of cognitive impairment on NPS, controlling for care-recipient characteristics. Approximately 87% of care recipients with cognitive impairment had at least one NPS compared to 55.8% of those without cognitive impairment (p<0.01). The predicted probability of having one or more NPI symptoms was 0.25 percentage points (95% CI=0.14-0.35) higher for participants with cognitive impairment than those without. NPS are present in the majority of older Mexican American adults, particularly in those with cognitive impairment. Future research could also investigate sociodemographic correlates of NPS.

OLDER AND YOUNGER ADULTS REAPPRAISE NEGATIVE LIFE EVENTS IN DIFFERENT WAYS

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Past reappraisal studies have been equivocal regarding age and reappraisal efficacy potentially due to the use of laboratory-generated stimuli. We examined reappraisal in a more self-relevant context: negative autobiographical events. 49 younger adults (YA) and 47 older adults (OA) generated 50 negative memories and provided negativity, positivity, and vividness ratings. One to two weeks later, participants underwent the reappraisal task during which physiological data were collected. Participants implemented one of three instructions for 30 seconds: remember naturally, increase negative reactions, or decrease negative reactions via a "positivizing" tactic. Each instruction was provided for 10 unique memories with negativity, positivity, and vividness ratings collected after each trial. 2 (Age; YA, OA) × 3 (Instruction; Remember, Increase, Decrease) mixed ANOVAs uncovered no differences in negativity or vividness ratings before reappraisal. However, OAs rated all memories more positively than YAs. This age difference persisted after reappraisal; however, OAs rated all memories more negatively and vividly than YAs, although both decreased compared to pre-reappraisal levels. Cardiorespiratory data were tested via 2 × 3 mixed ANOVAs, uncovering only a main effect of age on average heart rate. A multilevel model revealed significant variability in the time-course of pupillary responses. 2 × 3 mixed ANOVAs illustrated that reappraisal brought about faster and more frequent spikes in pupil diameter, particularly for OAs. We conclude that OAs and YAs may achieve reappraisal in different ways. Contrary to strict hedonic orientations, OAs simultaneously maintain higher negativity and positivity than YAs challenging existing propositions regarding age-related prioritization of hedonic goals.