and unfavorable health outcomes in LGBTQ-PoC aging with HIV. Using data from ROAH 2.0 study (N=723), we explored facets of stigma, barriers to medical services and health status in racial/ethnic minorities of older adults with HIV (OAH) living in California, New York, and Illinois. Stigma was evident in >50% of OAH who expressed reservation to self-disclose HIV status. Importantly, 20%-24% of Asian, Black/African-American, Hispanic/Latinx and Multiracial vs. 7% White OAH withheld this information from at least one health care provider. Over 10% of OAH experienced prejudice/discrimination while accessing service. Non-disclosure and prejudice/discrimination were linked to lower self-rated health status, thus, evidencing stigma-related health burden.

Session 2335 (Symposium)

THE WISCONSIN LONGITUDINAL STUDY: NEW COGNITIVE, GENETIC, BIOLOGICAL, AND SOCIAL DATA AND A DIVERSIFYING SAMPLE

Chair: Michal Engelman

The Wisconsin Longitudinal Study (WLS) has followed a sample of one in three Wisconsin high school graduates from the class of 1957 for over 64 years, making it an excellent data source for researchers interested in linking early and midlife characteristics to a wide range of later-life outcomes. The WLS is unique among major studies of aging cohorts for its duration of follow up, the inclusion of siblings, and the combination of rich social and health information. This symposium will provide an overview of the WLS, describe recent data collection and linkages, and introduce ongoing efforts to diversify the educational and racial/ethnic composition of the study sample. WLS data cover nearly every aspect of the participants’ lives from early life socioeconomic background, schooling, family, and work, to physical and mental health, social participation, civic engagement, well-being, and cognition. The study is linked to administrative data including Medicare records, Social Security records, mortality records, and resource data on primary and secondary schools attended by participants as well as characteristics of their employers, industries, and communities of residence. Recent data collection efforts have generated a wealth of new biological and cognitive information, including genetic data collected from saliva and blood samples, measures of the gut microbiome, and derived polygenic scores for educational attainment, cognitive performance, depression, and subjective well-being. The currently-fielding ILIAD effort is implementing rigorous AD diagnostic protocols to track the progression of dementia across cognitive phenotypes. The symposium will conclude with practical information on accessing and using the data.

THE WISCONSIN LONGITUDINAL STUDY: OVERVIEW, DATA LINKAGES, AND FUTURE PLANS

Michal Engelman, University of Wisconsin-Madison, Madison, Wisconsin, United States

The WLS is a study of Wisconsin high school class of 1957 graduates, with follow-ups in 1964, 1975, 1993, 2004, 2011, and 2020. The data reflect the life course of the graduates (and their siblings), initially covering education, switching to family, career, and social participation in midlife, and physical and mental health, cognitive status, caregiving, and social support as respondents age. The WLS is linked to multiple administrative data sources including: parent earnings from state tax records (1957-60) and Social Security earnings and benefits for respondents; 1940 Census 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

Pamela Herd,1 Victoria Williams,2 and Sanjay Asthana,3
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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.

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