

MCI and AD groups. However, the AD group responded more quickly than the controls, which may have impacted their accuracy. These findings indicate that PM performance differences among groups can be detected by examining speed and not just accuracy. As speed appears to be an essential aspect involved in PM performance, future research should consider incorporating speed as a measure of PM performance when examining PM differences in populations.

Categories: Dementia (Alzheimer's Disease)

Keyword 1: memory: prospective

Keyword 2: reaction time

Keyword 3: dementia - Alzheimer's disease

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68 Bilinguals' Perceived Workloads on The Boston Naming Test

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Objective: The Boston Naming Test (BNT) is a 60-item confrontation naming task requiring participants to name a series of pictures. Prior research has shown that bilingual children have smaller vocabularies than monolinguals and that this effect continues into adulthood. Numerous studies have confirmed that bilingual adults name fewer pictures correctly than monolinguals on the BNT. Research also shows that self-reported workload correlates with neuropsychological test performance and that estimates of workload provide additional information regarding cognitive outcomes. Hardy and Wright (2018) conditionally validated a measure of perceived mental workload called

the NASA Task Load Index (NASA-TLX; Hart & Staveland 1988) with healthy adults on a neuropsychological test (i.e., the Tower of Hanoi). Research also shows that bilinguals report higher perceived workloads on cognitive tasks compared to monolinguals. Although this work has recently extended to other tests, to our knowledge, the workload profile of the BNT remains relatively unexplored. We evaluated BNT performance and perceived workload via the NASA-TLX in monolinguals and bilinguals. We predicted that monolinguals would outperform bilinguals on the BNT, but that bilinguals would report higher workloads.

Participants and Methods: The study sample consisted of 84 healthy participants (36 monolinguals, 48 bilinguals) with a mean age of 28.94 (SD = 10.76). Participants completed the standard 60-item BNT in English. The NASA-TLX scale was utilized to evaluate perceived workload across six subscales. The NASA-TLX was also completed in English after the completion of the BNT. ANOVAs were used to test BNT performance and perceived workload ratings between our language groups.

Results: We found that monolinguals performed better on the BNT compared to bilinguals, $p = .001$, $\eta^2 = .24$. However, bilinguals reported exerting more effort when completing the BNT compared to monolinguals, $p = .002$, $\eta^2 = .11$. Additionally, bilinguals also experienced more frustration when completing the BNT compared to monolinguals, $p = .034$, $\eta^2 = .05$.

Conclusions: As expected, results revealed that monolinguals outperformed bilingual participants on the BNT. However, bilinguals exerted more effort on the BNT and reported the BNT to be more frustrating. A possible reason for bilinguals underperforming and reporting higher perceived workloads on the BNT may be because correct responses were only accepted in English. This may have caused bilingual speakers to exert increased effort to complete the task in a non-native language. In turn, this increased effort likely increased cognitive load and led to higher frustration levels. Further research is needed to confirm our findings and support the idea that bilingualism leads to perceiving greater effort and frustration, and to determine whether there are subgroup differences in BNT performances among bilingual individuals (e.g., English learned as a first language compared to English learned as a second language).

Categories: Language and Speech Functions/Aphasia

Keyword 1: language: second/foreign

Keyword 2: bilingualism/multilingualism

Keyword 3: naming

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69 Verbal Comprehension and PTSD: A Glimpse into Trauma and Resilience

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Objective: Many of those who experience the trauma and abuse of sex trafficking also struggle with a variety of physical and mental health issues, a major one of those issues being posttraumatic stress disorder (PTSD). In this study, we explored the relationship between verbal comprehension and a PTSD diagnosis to see if this aspect of intelligence might be stronger for individuals without a diagnosis of PTSD.

Participants and Methods: Participants included 22 adolescent girls between the ages of 14 and 18 who had experienced sex trafficking. Participants were referred to Fuller Psychological and Family Services for learning difficulties, where they were given comprehensive clinical neuropsychological evaluations, including a Wechsler Intelligence Scale (WISC or WAIS) and a screening for PTSD. WISC or WAIS Full Scale IQ ranged from 75 to 115 ($M = 85.1$, $SD = 11.2$).

Results: Contrary to the hypothesis that those without PTSD would have higher verbal comprehension scores than those with PTSD, the results indicated no difference between the two groups, $t(23) = -.86$, $p = .40$. However, verbal comprehension scores across both groups were significantly below the normal range, suggesting a relationship between trauma and verbal comprehension.

Conclusions: The diagnosis of PTSD may impact intelligence in ways not anticipated for this population, or perhaps our method of diagnosing PTSD did not adequately nuance the varying responses to trauma. By further exploring the relationships between Verbal

Comprehension Indexes and markers of resilience, we may be able to better understand the characteristics of resilience demonstrated by those who become involved in prostitution.

Categories: Language and Speech Functions/Aphasia

Keyword 1: post-traumatic stress disorder

Keyword 2: verbal abilities

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70 The Effect of Executive Functioning on Predicting Health Literacy in a Memory Disorders Clinic

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Objective: Health literacy is the degree to which an individual is able to attain, process, and understand information, skills, and services required to make informed decisions. Limited health literacy is a risk factor for problems understanding health information and adhering to medical instructions, underuse of preventive services, increased hospitalizations and associated medical costs, and higher mortality rates. Recognizing individuals with reduced health literacy can be difficult given demographic information such as age or years of education do not reliably reflect an individual's health literacy level. Cross-sectional studies have identified limited health literacy as associated with lower scores on cognitive tests measuring memory, executive function (EF), and processing speed, independent from the influence of demographic variables (e.g., age, race, education). This study assessed the association of objective measures of executive functioning and health literacy when controlling for premorbid estimated intellectual functioning and relevant demographic variables.

Participants and Methods: A sample of 44 adult patients (20 Male; 24 Female) referred for neuropsychological evaluation for memory complaints who were administered the Test of Premorbid Functioning (TOPF), and multiple measures of EF including the Trail Making Test – Part B (TMT-B), Stroop Color and Word Test