Cognitive Reserve and Cognitive Function in Healthy Older People: A Meta-Analysis

Carol Opdebeeck<sup>1</sup>, Anthony Martyr<sup>2</sup>, and Linda Clare<sup>2</sup>

<sup>1</sup>Bangor University, UK; <sup>2</sup>University of Exeter, UK

#### Author Note

Complete departmental affiliation: Carol Opdebeeck, Research in Ageing and Cognitive Health, School of Psychology, Bangor University; Anthony Martyr, Centre for Research in Ageing and Cognitive Health, School of Psychology, University of Exeter; Linda Clare, Centre for Research in Ageing and Cognitive Health, School of Psychology, University of Exeter.

Acknowledgements: We are grateful to Dr Sharon M. Nelis, Dr Catherine Quinn, and Dr Gill Toms for their help, advice and support. This research is funded by a Bangor University, School of Psychology PhD scholarship awarded to Carol Opdebeeck.

Correspondence to: Professor Linda Clare, REACH: The Centre for Research in Ageing and Cognitive Health, School of Psychology, University of Exeter, Exeter EX4 4QG, United Kingdom, Tel: +44 1392 724659, Email: l.clare@exeter.ac.uk

Running head: COGNITIVE RESERVE AND COGNITION

2

Abstract

The associations between proxy measures of cognitive reserve (CR) and cognition vary

across studies and cognitive domains. This meta-analysis aimed to assess the relationship

between CR and cognition in multiple domains (memory, executive function, visuospatial

ability, and language). CR was considered in terms of three key proxy measures - educational

level, occupational status, and engagement in cognitively-stimulating activities – individually

and in combination. One-hundred and thirty-five studies representing 128,328 participants

were included. Of these, 109 used a measure of education, 19 used a measure of occupation,

31 used a measure of participation in cognitively-stimulating activities, and six used a

combination of these. All three proxy measures had a modest positive association with

cognition; occupational status and cognitive activities showed the most variation across

cognitive domains. This supports the view that the commonly-used proxy measures of CR

share an underlying process but that each additionally provides a unique contribution to CR.

Key words:

Occupational status; education; cognitively-stimulating leisure activities; memory; executive

function; visuospatial ability; language.

Main text word count: 7,724

# Cognitive Reserve and Cognitive Function in Healthy Older People: A Meta-Analysis

The concept of cognitive reserve (CR) was developed to explain the repeated finding that the amount of observed brain pathology or damage does not always correspond with the clinical presentation of an associated condition. In some older people, despite the presence of considerable brain pathology, there may be no clinically-observable signs or symptoms of disease (Mortimer, Snowdon, & Markesbery, 2003). Stern (2002) proposed that CR is "the ability to optimize or maximize performance through differential recruitment of brain networks, which perhaps reflect the use of alternate cognitive strategies" (p. 451). More recently, Stern (2009) noted that CR is relevant not just to the onset of dementia but also to normal ageing, as it may allow individuals to cope more effectively with typical age-related brain changes.

Both active and passive models of reserve have been outlined. The passive model is often referred to as 'brain reserve' while the active model is commonly referred to as 'cognitive reserve' (see Stern, 2002; 2006; 2009 for thorough reviews). The passive model of brain reserve refers to the relationship between greater brain size or neuronal count and the ability to sustain more pathology before a clinical impairment is observed (Stern, 2009). In contrast, the active model of CR focuses on the role of experiences such as education, occupation and participation in cognitively-stimulating leisure activities, suggesting that higher levels of education, engagement in more complex occupations, and participation in more cognitively-stimulating leisure activities may provide a buffer against the effects of brain damage or pathology, helping the individual to cope by enlisting compensatory processes (Stern, 2009). CR has also been referred to as 'behavioural brain reserve' by some researchers (e.g. Valenzuela & Sachdev, 2006a; 2006b), as it is suggested that certain behaviours or experiences lead to increased reserve. In this meta-analysis the term 'cognitive reserve' will be employed as it is the more frequently-used of these two terms describing

active reserve. The lifestyle factors underpinning CR are potentially amenable to modification and hence, in principle, they could provide a basis for preventive intervention (Tucker & Stern, 2011). As CR cannot be directly measured, it is commonly indexed by those experiences and activities thought to increase it. The most commonly-used proxy measures are educational level, occupational status and engagement in cognitively-stimulating leisure activities. Cognitively-stimulating activities are those leisure pursuits that involve cognitive effort, such as reading, attending further education classes, doing crosswords or Sudoku, or playing games such as bridge etc. (see Aartsen, Smits, van Tilburg, Knipscheer, & Deeg, 2002; Mousavi-Nasab, Kormi-Nouri, & Nilsson, 2014; Wilson et al., 1999 for descriptions of what constitutes cognitive activity). A number of cross-sectional studies have observed a relationship between the most common indicators of CR and cognitive function in generally healthy older people but, as will be discussed below, there are variations in these findings, as well as methodological issues relating to the way in which CR has been assessed.

Cross-sectional results have varied across studies examining the relationship between educational level as a proxy measure of CR and aspects of cognitive function in older people. These results have ranged from a strong correlation between education and measures of memory (e.g. Angel, Fay, Bouazzaoui, Baudouin, & Isingrini, 2010; Arbuckle, Gold, & Andres, 1986; Lee, Lee, &Yang, 2012) to a weak correlation between education and executive function (e.g. Jefferson et al., 2011; Lee et al., 2012; Mueller, Raymond, & Yochim, 2013); suggesting that the relationship of this proxy measure with cognitive function differs according to the cognitive domain assessed. Educational level itself has also been assessed using various methods in different studies; for example, indices include years of education (Albert & Teresi, 1999), levels of education categorised into multiple groups ranging from no formal education to greater than 12 years (Mathuranath et al., 2007), and categories yielded by dichotomising education into lower and higher levels (Van Exel et al.,

2001). The main difficulty with employing education as a proxy measure of CR is that the nature, intensity and content of education differ across nationalities and social groups. Indeed, it has been suggested that literacy may be a better indicator of educational attainment (e.g. Manly, Schupf, Tang, & Stern, 2005; Manly, Touradji, Tang, & Stern, 2003). However, assessing literacy is also not without complications; for instance, performance may be influenced by dyslexia and other learning difficulties. Due to the relative ease of obtaining details about the extent of education, educational level is still more commonly-used than literacy in assessing educational attainment, and therefore educational level was the proxy measure selected for consideration in this meta-analysis.

Similarly, studies evaluating the relationship between occupational status as a proxy measure of CR and cognitive function in later life have yielded findings ranging from a weak correlation with memory (e.g. Fritsch et al., 2007; Leung et al., 2010) to a moderate correlation with executive function (e.g. Foubert-Samier et al., 2012). These findings suggest that the relationship of this proxy measure with cognitive function also varies by domain.

Occupational status is also reported in a number of different ways; for example, Forstmeier and Maercker (2008) classified occupational status into motivational abilities and cognitive abilities, while Correa Ribeiro, Lopes, and Lourenco (2013) coded occupations according to their complexity with data, people, and things.

It has been noted that engagement in cognitively-stimulating leisure activities provides a strong contribution to CR, with physical and social activities playing a smaller role in relation to late life cognitive function (Marioni, van den Hout, Valenzuela, Brayne, & Matthews, 2012); hence cognitively-stimulating activities and their relationship to cognitive function are considered as a proxy measure of CR in this meta-analysis. Discrepancies between findings on the nature of this relationship can also be seen in relation to different domains of cognitive function, with small, non-significant correlations between engagement

in cognitively-stimulating leisure activities and memory (e.g. Lin, Friedman, Quinn, Chen, & Mapstone, 2012; Murphy & O'Leary, 2009) but moderate correlations between this proxy measure and executive function (e.g. Eskes et al., 2010; Lin et al., 2012; Newson & Kemps, 2005). A further issue arises in that a variety of measures to assess these activities, from details of the diversity and duration of current activities (Eskes et al., 2010) to scores on questionnaires about cognitive activities across the lifespan such as that developed by Wilson, Barnes, and Bennett (2003), have been employed.

It has been suggested that using only one proxy measure of CR does not provide a complete picture, as CR is a fluid construct resulting from a combination of experiences and activities over the course of an individual's life (Nucci, Mapelli, & Mondini, 2011; Richards & Deary, 2005; Richards & Sacker, 2003; Sánchez Rodríguez, Torrellas, Martin, & Fernandez, 2011; Stern, 2009; Tucker & Stern 2011; Whalley, Dick, & McNeill, 2006). It is doubtful whether one proxy alone constitutes a complete measure of CR, given that CR is derived from a combination of experiences and exposures across the lifespan. A number of measures combine these factors to give an index of an individual's overall CR, such as the Lifetime of Experiences Questionnaire (LEQ; Valenzuela & Sachdev, 2007) and the Cognitive Reserve Index Questionnaire (CRIq; Nucci et al., 2011), which may help in standardising the assessment of CR across studies. A fourth indicator of CR which has been considered by some is verbal IQ. However, this was not included as a proxy measure of CR in this meta-analysis as measures of verbal ability are frequently used as measures of cognition rather than as a proxy measure of CR (e.g. Anstey, Hofer, & Luszcz, 2003; Parisi, Stine-Morrow, Noh, & Morrow, 2009; Welsh-Bohmer et al., 2009).

The fluidity of CR suggests that it could be difficult to assess fully in younger people who have yet to obtain the effects of occupational status across their working lives. Hence it is more salient to focus on people over the age of 60 who have had the opportunity to build

their CR through education, occupation, and engagement in cognitively-stimulating activities over a number of years.

In summary, many cross-sectional studies assess proxy measures of CR, in particular educational level, occupational status, and/or participation in cognitively-stimulating leisure activities, and their relationship with cognitive function yet there is some discrepancy in the results and with regard to the patterns of association with different cognitive domains. Discrepancies in the way in which CR is indexed could account for some of the variance in findings and make synthesising the available information difficult; an indication of how each of the most commonly-used proxy measures of CR, and those measures which combine these proxies are related to cognitive function is needed. Furthermore, it is currently unclear how these proxy measures relate to different domains of cognition in a non-clinical population.

To date there is no meta-analysis or systematic review available that summarises the relationships between multiple proxy measures of CR and performance in different cognitive domains in healthy older people. Previous reviews of CR have tended to focus on the association between proxy measures of CR and incidence of dementia or take a narrative approach rather than a systematic review of the topic (e.g. La Rue, 2010; Richards & Deary, 2005; Scarmeas & Stern, 2003; Stern, 2002; 2006; 2009). Other reviews have focused only on a single proxy measure of CR and overall cognitive function (e.g. Bielak, 2010; Then et al., 2014). These reviews have generally reported that a reduction in the risk of dementia and better cognitive function are associated with greater educational level, occupational status and engagement in cognitively stimulating leisure activities. The present review aims to address the gap in the literature via meta-analytic methods which avoid the bias associated with narrative reviews (Lyman & Kuderer, 2005). While it is now widely accepted that life experiences such as educational level, occupational status and participation in cognitively-stimulating leisure activities are associated with cognitive function, this meta-analysis adds to

the literature by considering multiple proxy measures of CR and examining their association with cognitive function in different domains. It is becoming increasingly common for studies to consider the role of CR in healthy ageing, and yet no cohesive quantitative report on these studies is currently available. Specifically, this meta-analysis set out to assess how the different proxy measures of CR are employed by researchers, whether single proxy measures or combinations of these, and what the similarities and differences between these proxy measures and their associations with cognitive function in healthy older people are. The focus here is solely on cross-sectional studies assessing the relationship between proxy measures of CR and cognitive function, as previous reviews have considered the association between CR and both cognitive decline and incidence of dementia (Valenzuela & Sachdev, 2006a; 2006b). These reviews found a beneficial effect of the life experiences associated with CR, in that higher levels of these experiences resulted in less cognitive decline and reduced incidence of dementia. However, neither of these reviews considered cross-sectional studies of CR and cognitive function in different cognitive domains in healthy older people.

In this meta-analysis we set out to review and synthesise the information on the most common proxy measures of CR, namely educational level, occupational status, and engagement in cognitively-stimulating leisure activities, and their relationship with different domains of cognitive function, in generally healthy people aged over 60 years who do not have cognitive impairment or dementia. This age group was selected since individuals over 60 have had time to build CR across their life and the cognitive decline sometimes associated with ageing may begin to present itself, resulting in more variability in cognitive function within these individuals (Salthouse, 2009).

The specific aim of this meta-analysis was to collate the results of existing literature to answer the following research questions:

- 1. What are the similarities and differences in the relationships of each individual proxy measure of CR, specifically educational level, occupational status, engagement in cognitively-stimulating activities, and of indices which combine these proxies into a single measure, with cognitive function in healthy older people?
- 2. Do the nature and strength of these relationships differ across different domains of cognitive function?

#### Method

## Literature search strategy

In order to identify studies investigating the relationship between cognitive function and CR, assessed using one of the key proxy measures or a combination of CR proxy measures, a search was conducted of the electronic databases ScienceDirect, PubMed, PsycInfo, and CINAHL on 21/11/2014. Each database was searched for (a) 'cognitive OR cognition OR memory OR executive OR visuospatial OR language OR reserve OR lifetime' in the title. The results of this search were then cross-matched with (b) '"cognitive reserve" OR "brain reserve" OR education\* OR occupation\* OR activit\* OR leisure OR literacy' AND (c) 'old\* OR later life OR elder\* OR aged OR aging OR ageing OR nondemented' in the title, abstract, or keywords. The reference sections of included studies were searched for additional papers not identified in the initial search.

### Inclusion and exclusion criteria

Studies were included if (a) at least 80% of participants were aged over 60 or the information for those aged over 60 was reported separately, (b) a proxy measure of CR, specifically educational level, occupational status, cognitively-stimulating leisure activities,

or a combination of these was used, and (c) a cross-sectional outcome measure of cognitive function was reported.

Studies were excluded if (a) more than 20% of the sample consisted of people with a neurological disorder or a disorder which may affect cognitive functioning (e.g. dementia, multiple sclerosis, Parkinson's disease, HIV, or traumatic brain injury), (b) an outcome of dementia or mild cognitive impairment incidence was used, or participants were grouped into those with or without cognitive impairment, as this does not allow for assessment of cognitive function as a continuous variable in generally healthy people, or (c) the authors reported a biological or pathological proxy measure or outcome only.

### Procedure

A summary of the procedure for selecting studies for inclusion can be seen in Figure 1. The searches identified 15,742 titles of which 10,330 were unique. The titles were evaluated in relation to the inclusion criteria by the lead author and those clearly unrelated to later life (e.g. related to children, animals, autism, or dyslexia) were excluded. The remainder (>50%) were screened by a second reviewer. The two reviewers achieved 99% agreement on inclusion/exclusion and where there was disagreement the title was retained for abstract screening. At this point 9,710 articles were discarded as they did not meet the inclusion criteria; the primary reasons were that these studies focused solely on animals, children, or clinical populations. Six hundred and twenty abstracts were then evaluated by two reviewers working independently. The reviewers achieved 81% agreement on inclusion/exclusion with disagreements discussed and full text retrieved when agreement could not be reached. After abstract screening 275 articles were discarded as they did not meet inclusion criteria; the primary reason was that these studies used no measure of either the required CR proxy measures or cognitive function. The full texts of the remaining 345 articles were retrieved

and the method and results sections evaluated against the inclusion criteria. This process yielded 128 articles, including four PhD theses, which satisfied the inclusion criteria and provided statistical information that could be included in the meta-analysis. Authors of eight of these studies were contacted to request additional statistical information, but only three responded. As a result, conservative estimates of the p-values given in the studies were used to calculate an effect size for four of these studies; for instance where p < .05 was reported, the p value .049 was used (Brewster et. al., 2014; Le Carrett et al., 2003; Rexroth et al., 2014; Welsh-Bohmer et al., 2009). Morgan, Marsiske, and Whitfield (2007) provided a range of correlation values for the relationship between educational level and cognitive function, consequently the lowest value was taken to provide a conservative estimate of the effect size. Additionally, it was not possible to contact the authors of one article which reported only statistically significant correlation values (Denny & Thissen, 1983). In this instance a value of zero was used for the non-significant associations.

The 217 studies rejected at this stage were primarily excluded for the following reasons: they reported results for dementia/cognitive impairment outcomes or clinical samples (k = 19); they reported longitudinal research only (k = 50); more than 20% of the sample were aged under 60 (k = 54); the study did not include a required CR proxy measure, objective cognitive function outcome, or report specific results (k = 42); or it was not possible to retrieve the full text (three book chapters, one PhD thesis, and two journal articles). Multiple reports from the sample were dealt with in the following ways. Decisions on which study to include where based on the sample size, with those with a greater sample size reported, or on the number of cognitive domains assessed. For example the study by Ganguli and colleagues (2010) was included as they reported the association between education and five cognitive domains from the Monongahela-Youghiogheny Healthy Aging Team study for 1,413 participants while that by Snitz and colleagues (2009) was excluded as

they reported two cognitive domains for 1,866 participants from the same sample. When reports from the same sample provided separate analyses relating to different proxy measures all the relevant reports were included. For example, Hultsch, Hammer, and Small (1993) and Zahodne and colleagues (2011) both utilised data from the Victoria Longitudinal Study reporting engagement in cognitively-stimulating activities and education respectively and their association with cognitive function; therefore they were both included in the analyses for the separate proxy measures. The Supplementary Table includes information on the samples for each study reported by the authors of that study and gives a complete list of the included studies, the proxy measure of CR used, and the cognitive domains assessed.

Searching the reference sections of the included studies yielded seven additional studies which satisfied the inclusion criteria and provided appropriate statistical information

## (Figure 1 around here)

Effect sizes for the relationship between the relevant proxy measure of CR and the cognitive function domain calculated from the statistical information provided for each individual study are presented in the Supplementary Table. The r effect size was utilised in this meta-analysis to represent the strength of the associations and is interpreted in respect to Cohen (1992). Studies were grouped according to the proxy measure of CR used, whether this was educational level, occupational status, engagement in cognitively-stimulating activities, or a combination of these. When a study used more than one CR proxy measure, it was listed in all relevant groups.

Measures assessing cognitive function were grouped into different domains using criteria provided by Lezak (1995) and on descriptions given by the studies which had utilised the measure. The Supplementary Table provides details of the specific tests and cognitive

domains employed in each study. Cognitive screening measures commonly used with older people, including the Mini-Mental State Examination (MMSE; Folstein, Folstein, & McHugh, 1975) and the Telephone Inventory for Cognitive Status (TICS; Welsh, Breitner, & Magruder-Habib, 1993), were grouped together to give an indication of the relationship between proxy measures of CR and continuous scores on these measures. The memory domain included tests of episodic, logical, and semantic memory. Working memory was analysed separately as it has been considered as relating to both memory and executive function (Lezak, 1995). The executive function domain comprised specific tests measuring aspects of executive function including processing speed, attention and verbal fluency (Lezak, 1995; Martyr & Clare, 2012). Visuospatial ability encompassed tests relating to visual search, figure copying, and line orientation. While Raven's Progressive Matrices (Raven, 1960) were incorporated into composite scores for visuospatial ability by two studies (Aiken-Morgan, Sims, & Whitfield, 2010; Jefferson et al., 2011) it has more commonly been described as a measure of fluid intelligence or general cognitive ability (e.g. Aartsen et al., 2002; Luszcz, 1992; Staff, Murray, Deary, & Whalley, 2004). Therefore, this measure was included in overall cognitive function analyses only. While a number of studies used the Spot-the-Word test (Baddeley, Emslie, & Nimmo-Smith, 1993) as a measure of language ability this was not included in this analysis as it is commonly used to assess verbal intelligence and it is not sensitive to age-related cognitive decline. The National Adult Reading Test (NART; Nelson, 1982) was excluded for the same reasons. Where studies had used confirmatory factor analysis to combine tests into specific domains, these domains were accepted as employed in the original study (e.g. Kaplan et al., 2009; Zahodne et al., 2011). To assess the associations between the proxy measures of CR and general cognitive function all the tests of cognitive function were then grouped under each proxy measure to give an indication of these relationships. Forest Plot Viewer (Boyles, Harris, Rooney, & Thayer,

2011) was used to create a forest plot which provides a visual representation of the weight of each effect size and allows for a comparison between the effects of the individual CR proxy measures in relation to each included cognitive domain.

### **Statistical Analysis**

The Comprehensive Meta-Analysis 2 (Borenstein, Hedges, Higgins, & Rothstein, 2005) software package was used to convert the individual correlation coefficients presented in the included studies into combined r effect sizes. This software uses Fisher's Z transformations and also calculates average z-scores, p values, 95% confidence intervals for the collective effect sizes, indices of between-study heterogeneity, and Rosenthal's fail-safe N for each analysis with three or more included studies. Between-study heterogeneity was assessed using an index of inconsistency (I<sup>2</sup>; Higgins, Thompson, Deeks, & Altman, 2003). The  $I^2$  statistic gives a percentage indicating the degree of heterogeneity in relation to total variation in observed effects and is not sensitive to the effect size or the number of studies included (Borenstein, Hedges, Higgins, & Rothstein, 2009). The fail-safe N provides the number of missing studies with a mean effect of zero that if added to the analysis would yield a statistically non-significant overall effect (Boronstein et al., 2005). It has been suggested that a fail-safe N can give an indication of the stability of the analyses where stability is indicated when the fail-safe N = 5k + 10 (Carson, Schriesheim, & Kinicki, 1990). Where t or F statistics, mean scores, or p values were reported, the program converted these to the r effect size. The r effect size makes use of the correlation coefficient to allow for evaluations of the relationship between two continuous variables in a number of studies (Borenstein et al., 2009). Standardised betas were converted to r effect sizes using the formula reported by Peterson & Brown (2005). A random effects model was used to calculate the effect size as the included studies were heterogeneous in their methods of assessing CR and cognitive

function (DerSimonian & Laird, 1986). The random effects model allows for differences in the true effect size between studies (Borenstein et al., 2009). Holm-Bonferroni corrections were applied in the case of multiple analyses utilising each proxy of CR. These corrections were used to reduce the likelihood of making the errors associated with standard Bonferroni corrections, errors such as finding a significant association when one does not exist (Nakagawa, 2004).

Analyses were carried out to assess the relationship of each of the three most common proxy measures of CR, and combinations of these proxy measures, with the different domains of cognitive function, including cognitive screening measures, memory, executive function, visuospatial abilities, and language. Additional analyses assessed the relationship of all the measures of cognitive function employed in order to give an indication of the proxy measure's relationship with overall cognitive function. Studies reporting the relationship of cognitive function to more than one proxy measure of CR were included in the relevant analyses for each proxy. For those studies which included more than one outcome for a given cognitive domain or for multiple domains when they were analysed together, the Comprehensive Meta-Analysis 2 software program was instructed to average the withinstudy correlations to correct for violations of independence, so that all available data could be included in the analysis. Where more than 10 studies were included in the analysis a meta-regression was conducted to assess whether age was a moderator of the association between the CR proxy measure and cognition.

### **Results**

The search identified 135 studies with a total of 128,238 unique participants. Of these, 109 used a measure of education (n = 111,683), 19 used a measure of occupational status (n = 18,167), 31 used a measure of participation in cognitively-stimulating leisure activities (n = 18,167), 31 used a measure of participation in cognitively-stimulating leisure activities (n = 18,167), 31 used a measure of participation in cognitively-stimulating leisure activities (n = 18,167), 31 used a measure of participation in cognitively-stimulating leisure activities (n = 18,167), 31 used a measure of participation in cognitively-stimulating leisure activities (n = 18,167), 31 used a measure of participation in cognitively-stimulating leisure activities (n = 18,167), 31 used a measure of participation in cognitively-stimulating leisure activities (n = 18,167), 31 used a measure of participation in cognitively-stimulating leisure activities (n = 18,167), 31 used a measure of participation in cognitively-stimulating leisure activities (n = 18,167), 31 used a measure of participation in cognitively-stimulating leisure activities (n = 18,167), 31 used a measure of participation in cognitively-stimulating leisure activities (n = 18,167), 31 used a measure of participation in cognitive (n = 18,167), 31 used a measure of participation (n = 18,167), 31 used a measure of participation (n = 18,167), 31 used a measure of participation (n = 18,167), 31 used a measure of participation (n = 18,167), 31 used a measure of participation (n = 18,167), 31 used a measure of participation (n = 18,167), 31 used a measure of participation (n = 18,167), 31 used a measure of participation (n = 18,167), 31 used a measure of participation (n = 18,167), 31 used (n = 18,167

24,554), and six studies used composites of the key proxy measures of CR (n = 2,799). Of the studies evaluating educational level, 57 studies used years of education, 16 dichotomised educational levels into low and high, and 36 classified education into different levels. Of the studies evaluating occupational status, 15 used the individual's primary occupation, 3 the last occupation held, and 1 the participant's highest obtained occupation. A number of different classification systems were employed to grade the occupation for its complexity (see Supplementary Table). Of the studies evaluating engagement in cognitively-stimulating activities, 24 gave an indication of participation in the given activities currently or within the last year, five gave an indication of participation across the lifespan, and two assessed participation in cognitive activities earlier in life only (adolescence and mid-life). Of the studies evaluating composites of the proxy measures of CR, four combined the three proxy measures of CR considered in this meta-analysis and two combined education and occupation. The Supplementary Table gives further details of the various ways in which each proxy measure was operationalized in the studies.

As can be seen in Tables 1a-d, heterogeneity ranged from low to high for the analyses, and this is further discussed below in relation to each set of analyses. The levels of heterogeneity observed indicate that the included studies differed substantially in their variance, which supported the use of the random effects model.

# (Table 1a-1d around here)

Figure 2 shows the effect sizes and associated confidence intervals for the relationship between the individual and combined proxy measures of CR and the domains of cognitive function assessed. This forest plot demonstrates that the largest confidence intervals were found in relationships between education and language ability and engagement in

cognitively-stimulating activities and cognitive screening measures, visuospatial ability, and language. Overall, none of the confidence intervals passed below zero indicating generally consistent positive associations between the proxy measures of CR and performance across different cognitive domains.

(Figure 2 around here)

## Educational level and cognitive function

The relationship of educational level with cognition were assessed in relation to cognitive screening measures, memory, working memory, executive function, visuospatial ability, language, and a combination of all the tests of cognition employed (see Table 1a). Twelve studies combined a number of different tests into a measure of global cognitive function. These studies were included in the analysis of overall cognitive function and educational level but could not be analysed within any of the specific domains.

The random effects meta-analysis in Table 1a indicated that the estimated effect sizes for the relationship of education with all the cognitive domains were significant, though small to medium. All the results remained significant after Holm-Bonferroni corrections were applied. The fail-safe Ns indicate that a substantial number of additional studies would be required to reduce the estimated effect size to non-significant indicating good stability of the results. There was, however, a high level of heterogeneity in all of the domains, particularly for screening measures, language, and overall cognition. The high levels of heterogeneity could be due to the variation in the associations reported in the different studies, the differences in sample sizes (e.g. Unverzagt et al. (1996) report a strong association between the MMSE and education with a sample size of 83, while Schmand et al. (1997) report a weak association between the MMSE and education with a sample size of 4,051), and, the

vast number of different measures of cognitive function included in the analysis of the association between education and overall cognitive function. Age was found to be a significant moderator for the association between education and screening measures (z = -3.13, p = .002), working memory (z = -5.23, p < .001), executive function (z = -6.30, p < .001), language (z = -7.56, p < .001), and overall cognition (z = -3.32, p = .001) but not for memory or visuospatial ability. This indicates that age did not moderate the association between education and performance in these two cognitive domains.

## Occupational status and cognitive function

The relationships between occupational status and cognitive screening measures, two separate domains of cognitive function (memory and executive function) and overall cognitive function were assessed (see Table 1b). One study assessed the association between occupational status and working memory (Leung et al. 2010), reporting a small association between the two variables (r = .11). One study assessed the association between occupational status and visuospatial ability (Finkel, Andel, Gatz, & Pedersen, 2009), reporting a small association between the two variables (r = .20). Six studies gave a score for general cognitive function on the basis of several tests. These studies were only included in the analysis of the overall relationship of occupational status with all the tests of cognitive function. The strongest estimated effects were shown for the screening measures and overall cognitive function, with occupation having a close to moderate association with these outcomes. All other analyses, while significant, showed small associations between occupation and the cognitive domains. The fail-safe Ns indicate that a large number of additional studies would be required to make the association between screening measures and overall cognition and occupation non-significant. Smaller but still stable fail-safe Ns were found for memory and executive function, which is to be expected given the small estimated effect size for these two domains. All the analyses showed a high index of heterogeneity, indicating considerable variance between studies and supporting the use of the random effect model. Age was found to be a significant moderator for the association between occupation and overall cognition (z = -2.05, p = .041) which was the only occupational status analysis with more than 10 included studies.

### Cognitively-stimulating leisure activities and cognitive function

Engagement in cognitively-stimulating leisure activities was assessed in relation to screening measures, memory, working memory, executive function, visuospatial ability, and language and to overall cognitive functioning (see Table 1c). Seven studies which combined a number of different tests into a measure of global cognitive function were only included in the analyses assessing cognitive function in general. The estimated effect sizes for the relationships between engagement in cognitively-stimulating leisure activities and screening measures, executive function, and overall cognitive function were moderate while the other associations were small, especially for working memory. All the associations remained significant after Holm-Bonferroni corrections were applied. The association between engagement in cognitively-stimulating leisure activities and visuospatial ability should be viewed tentatively due to the small number of studies available for inclusion in this analysis. The fail-safe Ns indicated that a large number of studies would be required to bring the estimated effect size for memory, executive function, and general cognitive function below significance. However, the fail-safe N for the association between working memory and engagement in cognitively-stimulating activities indicates that the significance of this result is not stable; although, this is to be expected given the magnitude of the estimated effect size. Levels of heterogeneity were generally lower than those for education and occupation, although heterogeneity remained high for cognitively-stimulating leisure activities and

screening measures, memory, language, and overall cognition. This indicates a high level of variance between the studies, supporting the use of the random effects model. Age was found to be a significant moderator for the association between engagement in cognitively-stimulating activities and overall cognition (z = -3.47, p < .001) but not for memory or executive function. This indicates that age did not moderate the association between education and performance in these two cognitive domains.

## Composites of cognitive reserve proxy measures and cognitive function

Composites of CR proxy measures were assessed in relation to screening measures, executive function, and overall cognitive function (see Table 1d). Only one study assessed a composite measure of CR and memory (Opdebeeck, Nelis, Quinn, & Clare, 2014), reporting a moderate association between the two variables (r = .344). The estimated effect sizes for the associations of the two individual domains and overall cognitive function with the composite CR proxy measures were moderate and remained significant after Holm-Bonferroni corrections were applied. The fail-safe N for screening measures was small which is to be expected given that only three studies were included in this analysis, while for executive function and overall cognitive function it was adequate given the small number of studies included and both indicated stability in the results. Levels of heterogeneity were low for instruments which combined different proxy measures of CR and their association with screening measures but were high with overall cognitive function, supporting the use of the random effects model.

### **Discussion**

This random effects meta-analytic study aimed to investigate the relationship of the three most commonly-used proxy measures of CR - educational level, occupational status, and

engagement in cognitively-stimulating leisure activities - and measures which combine these proxy measures with a number of cognitive domains in later life. To the best of our knowledge this meta-analysis is the first to synthesise the available cross-sectional statistical information from studies investigating these relationships in a healthy population.

The first aim of this meta-analysis was to investigate the similarities and differences in the associations of educational level, occupational status, engagement in cognitivelystimulating activities, and measures which combine these proxy measures of CR with cognitive function in later life. The meta-analyses showed positive significant relationships between overall cognitive function and the three individual and combined proxy measures of CR. There were moderate associations between measures which combined the proxy measures of CR and education and cognitive function and small associations between engagement in cognitively-stimulating leisure activities and occupational status and cognition. Overall, the results are consistent with the findings of previous reviews and studies which showed a modest association of individual and combined CR proxy measures with reduced cognitive decline and incidence of dementia (Marioni et al., 2012; Valenzuela, Brayne, Sachdev, Wilcock, & Matthews, 2011; Valenzuela & Sachdev, 2006a; 2006b; 2007). Previous studies have shown large variations in the relationships between educational level, occupational status, and engagement in cognitively-stimulating leisure activities and cognitive function (e.g. Barnes, Tager, Satariano, & Yaffe, 2004; Ferreira, Owen, Mohan, Corbett, & Ballard, 2015; Fritsch et al., 2007; Smart, Gow, & Deary, 2014; Smits, van Rijsselt, Jonker, & Deeg, 1995). One explanation for this variability between studies may be due to the variations in the measures used to assess these proxy measures of CR, for example current versus past participation in cognitively-stimulating leisure activities (Fritsch et al., 2007; Smits et al., 1995). The results of this meta-analysis indicate that the three proxy

measures of CR and measures which combine these are positively associated with cognitive function in later life.

The second aim of this meta-analysis was to address whether the strength of these relationships differ across different domains of cognitive function. Measures which combined different proxy measures of CR and educational level showed the smallest variation in their relationships with different domains of cognitive function. All these relationships were positive, with moderate or marginally below moderate estimated effect sizes, and statistically significant. Both higher educational level alone and in combination with more complex occupational experience, and greater participation in cognitively-stimulating activities were related to better performance on cognitive tests in all the domains assessed. The relationships between the different cognitive domains and occupational status and engagement in cognitively-stimulating leisure activities had greater levels of variability with estimated effect sizes ranging from negligible to close to moderate. This could have been due to the greater variations in how these proxy measures were assessed, which meant that the studies included in the meta-analyses differed more widely in their results than the combined CR proxy measures and educational level studies. However, it could also suggest that these proxy measures differ in their association with cognitive function on the basis of the domain assessed. Until there is a standard method for classifying occupational status used across a number of studies, and agreement as to whether current activity levels or activity across the lifetime are crucial for building CR, it will be difficult to assess the true nature of these relationships. It should also be noted that each of the individual CR proxy measures assess experiences that are salient at different time points across the lifespan, with the majority of education primarily experienced early in life, occupational benefits in mid-life, and engagement in cognitively-stimulating activities predominantly experienced in late-life. It is probable that early life experiences are closely related to the quality of later experiences, for

example, it is probable that educational level is related to occupational status. Therefore, the individual proxy measures may not be fully orthogonal. Measures which combine the different CR proxy measures go some way to overcoming these issues. The similarities and differences in the patterns of association between the individual and combined proxy measures of CR and function across cognitive domains in later life is consistent with the suggestion that experiences across the lifespan affect cognitive function in combination as well as individually. Indeed, the findings suggest that a combination of experiences across the lifespan increases CR and may partly explain the differences in cognition observed (Nucci et al., 2011; Sánchez Rodríguez et al., 2011; Stern, 2009; Tucker & Stern, 2011).

The small to moderate effect sizes found in this meta-analysis should be considered a conservative estimate of the relationships between the different proxy measures of CR and the included domains of cognitive function. The findings may have been affected by the differences in the methods used for each proxy measure of CR and the different neuropsychological tests adopted. In a number of studies correlation coefficients were not provided and the available statistics had to be converted to correlation coefficients, with conservative estimates taken in certain studies (Brewster et al., 2014; Morgan et al., 2007; Le Carrett et al., 2003; Rexroth et al., 2014; Welsh-Bohmer et al., 2009); these should be viewed as estimates of the relevant effect sizes and may have reduced the size of the effects. This is especially true where the p-value and sample size had to be used as a gross estimate of the effect size as it is probable that the association was under-estimated in those studies with a large sample size due to the conservative effect size estimated by the meta-analysis software, two of these studies had a sample size of over 500 and two had a sample size of over 1,000. However, including these studies, even with conservative estimates, is less of a limitation than excluding them. There may also be some non-independence of the analyses for the different proxy measures in that 25 studies reported that given cognitive domains were

associated with more than one proxy measure of CR and cognition. However, this may add further weight to the argument that the different proxy measures of CR are differently associated with cognition (Wilson et al., 2003). Given that age was a significant moderator of a number of the associations between the CR proxy measures and cognitive function, it is possible that age plays a role in the associations. However, it should be noted that the associations with age are likely to be confounded by cohort effects. In addition, cohort effects may account for some of the variance in associations of the different CR proxy measures with cognitive function in that other confounders associated with different cohorts such as ethnicity, generational differences, or area of residence may account for differing levels of the variance in cognitive function explained by CR proxy measures; however, it was not possible to control for this potential confound.

This meta-analysis was limited to published articles and PhD theses. Consequently there may be a bias toward studies which found a relationship between the proxy measures of CR and cognitive function. However, it should be noted that a number of studies provided statistically non-significant findings which were included in the analyses (e.g. Diehl et al., 1995; Eskes et al., 2010; Jefferson et al., 2011; van Hooren et al., 2007). Additionally, the fail-safe Ns suggest that for the majority of analyses a large number of non-significant, unpublished studies would be required to reduce the estimated effect size to non-significance. A common criticism of meta-analytic studies is that they ignore differences across the included studies (Boronstein et al., 2009). This may be an issue here, in that the proxy measures of CR are assessed in a variety of ways; however, combining studies makes it possible to address broader questions and with larger samples than can usually be obtained by individual studies. Additionally, there were large differences between the sample sizes in the included studies, but the random effects meta-analysis accounts for these differences;

therefore studies with large effect sizes but small samples are unlikely to have biased the results (e.g. Angel et al., 2010; Foubert-Samier et al., 2012; Unverzagt et al., 1996).

It should be noted that while all the estimated effect sizes of the associations were significant, the relationships between engagement in cognitively-stimulating activities and working memory was very small and those of occupational status and all the individual domains assessed except for screening measures were small. This indicates that these proxy measures may show a weaker relationship with certain domains than educational level or measures which combine these proxies, although not with cognitive function overall; however, the number of studies included in these analyses were small so this conclusion may change as more studies investigate this relationship. One of the major limitations with assessing these relationships relates to the varying ways in which CR is indexed in different studies for occupational status and engagement in stimulating leisure activities. This can be noted in the high levels of heterogeneity generally seen in these analyses and could partly explain the variability seen between individual studies. Additionally, activities other than those usually included in measures of leisure activities may be classed as cognitivelystimulating, such as those undertaken in a work environment, and this may confound the associations between cognitively-stimulating leisure activities and cognitive function when this CR proxy measure is taken alone. Little can be done to rectify this until a general consensus on how to assess CR is reached. Until then, studies that use a single proxy measure to indicate CR may be better described simply as focusing on the relationship between that proxy measure, for example educational level, and cognitive function, rather than reflecting CR per se.

When considering the idea that CR is associated with better cognitive functioning in later life, it is important to note that we cannot be certain about the causal direction of this relationship. As Salthouse (2006) argues, the associations may be due to preserved

differentiation, with the observed variations in cognitive function reflecting innate abilities rather than lifetime experiences. However there are no known reasons not to engage in experiences and activities that are stimulating and enjoyable (Salthouse, 2006). Indeed, engaging in the cognitively-stimulating life experiences thought to increase CR has been shown to enhance levels of cognitive functioning in later life and slow cognitive ageing (Hertzog, Kramer, Wilson, & Lindenberger, 2008). Other researchers have also noted that exposure to stimulating life experiences may enhance cognitive ability throughout the lifespan (Rutter, 1985; Richards & Sacker, 2003; Schaie, 1996).

The similarities and differences in the associations between the proxy measures considered here and cognitive function across different domains supports the theory that CR is based on a lifetime of exposures (Nucci et al., 2011; Richards & Deary, 2005; Richards & Sacker, 2003; Sánchez Rodríguez et al., 2011; Stern, 2009; Tucker & Stern 2011; Whalley et al., 2006). As such, when assessing CR without measures of pathology multiple life experiences should be taken into account. Measures specifically designed to assess the experiences associated with CR, which give an overall score taking account of different life periods and experiences, could help standardise the assessment of the relationship between CR and cognitive function. For example, the LEQ (Valenzuela & Sachdev, 2007; Valenzuela et al., 2013) uses a weighting system to give equal importance to education, occupational status and participation in cognitively-stimulating leisure activities in building CR across the lifespan and provides a score which combines these experiences in different periods of life. The CRIq (Nucci et al., 2011) is another measure specifically designed to assess the experiences associated with CR. The CRIq also attempts to incorporate the influence of educational level, occupational status, and engagement in cognitively-stimulating, social, and physical leisure activities. While the CRIq incorporates three distinct sections which can be combined to give an overall score, the sections are not weighted to allow for an even

contribution of these experiences to CR as is the case with the LEQ. As these proxy measures have similar relationships with cognitive function there is likely to be significant overlap between them; it would seem prudent to give them equal weighting in their contribution to an overall score indexing CR. The results from the construction of the CRIq indicate that the three most commonly-used proxy measures are only moderately linked (Nucci et al., 2011). Indeed, Wilson and colleagues (2003) noted that there may be different patterns of association between cognitive function and educational level and engagement in cognitively-stimulating activities. These findings all support the view that the commonly-used proxy measures of CR – educational level, occupational status, and engagement in cognitively-stimulating activities - share an underlying process but that each additionally provides a unique contribution to an individual's CR.

This meta-analytic study of the relationship between the three most commonly-used proxy measures of CR and cognitive function supports the supposition that indices of CR are related to cognitive function in a number of different domains, although the associations found were modest. The results are consistent with the recent suggestion that a standardised index of CR which encompasses multiple proxy measures is required to more comprehensively investigate the relationship between this concept and cognitive function in healthy and clinical populations. Future research should employ measures such as the LEQ or the CRIq which gives an indication of CR based on a lifetime of exposures in order to more accurately assess the relationship between CR and cognitive function. A further understanding of this relationship would aid in establishing which lifestyle changes could help delay cognitive decline and the onset of dementia.

#### References

A full reference list of studies included in the meta-analysis is available in online supplementary material.

- Aartsen, M. J., Smits, C. H., van Tilburg, T., Knipscheer, K. C., & Deeg, D. J. (2002).
  Activity in older adults: cause or consequence of cognitive functioning? A longitudinal study on everyday activities and cognitive performance in older adults. *The Journals of Gerontology. Series B, Psychological Sciences and Social Sciences*, 57, 153-62. doi: 10.1093/geronb/57.2.P153
- Aiken Morgan, A. T., Sims, R. C., & Whitfield, K. E. (2010). Cardiovascular health and education as sources of individual variability in cognitive aging among African

  Americans. *Journal of Aging and Health*, 22, 477-503. doi: 10.1177/0898264310361627
- Albert, S. M., & Teresi, J. A. (1999). Reading ability, education, and cognitive status assessment among older adults in Harlem, New York city. *American Journal of Public Health*, 89, 95-2. doi: 10.2105/AJPH.89.1.95
- Angel, L., Fay, S., Bouazzaoui, B., Baudouin, A., & Isingrini, M. (2010). Protective role of educational level on episodic memory aging: An event-related potential study. *Brain and Cognition*, 74, 312-323. doi: 10.1016/j.bandc.2010.08.012
- Anstey, K. J., Hofer, S. M., & Luszcz, M. A. (2003). A latent growth curve analysis of latelife sensory and cognitive function over 8 years: evidence for specific and common factors underlying change. *Psychology and Aging, 18,* 714-726. doi: 10.1037/0882-7974.18.4.714
- Arbuckle, T. Y., Gold, D., & Andres, D. (1986). Cognitive functioning of older people in relation to social and personality variables. *Psychology and Aging, 1,* 55-62. doi: 10.1037/0882-7974.1.1.55

- Baddeley, A., Emslie, H., & Nimmo-Smith, I. (1993). The spot-the-word test: a robust estimate of verbal intelligence based on lexical decision. *British Journal of Clinical Psychology*, *32*, 55-65. doi: 10.1111/j.2044-8260.1993.tb01027.x
- Barnes, D. E., Tager, I. B., Satariano, W. A., & Yaffe, K. (2004). The relationship between literacy and cognition in well-educated elders. *The Journals of Gerontology. Series A, Biological Sciences and Medical Sciences*, *59*, 390-395. doi: 10.1093/gerona/59.4.M390
- Bielak, A. A. (2010). How can we 'lose it' if we still don't understand how to 'use it'?

  Unanswered questions about the influence of activity participation on cognitive performance in older age a mini-review. *Gerontology*, *56*, 507-519. doi: 10.1159/000264918
- Borenstein, M., Hedges, L. V., Higgins, J. P. T., & Rothstein, H. R. (2005). *Comprehensive Meta-Analysis, Version 2*. Englewood, Biostat.
- Borenstein, M., Hedges, L. V., Higgins, J. P. T., & Rothstein, H. R. (2009). *Introduction to Meta-Analysis*. Chichester, John Wiley & Sons, Ltd.
- Boyles, A. L., Harris, S. F., Rooney, A. A., & Thayer, K. A. (2011). Forest Plot Viewer: a new graphing tool. *Epidemiology and Community Health*, 22, 746-747. doi: 10.1097/EDE.0b013e318225ba48
- Brewster, P. W., Melrose, R. J., Marquine, M. J., Johnson, J. K., Napoles, A., MacKay-Brandt, A., . . . Mungas, D. (2014). Life experience and demographic influences on cognitive function in older adults. *Neuropsychology*, *28*, 846-858. doi: 10.1037/neu0000098
- Carson, K. P., Schriesheim, C. A., & Kinicki, A. J. (1990). The usefulness of the" fail-safe" statistic in meta-analysis. *Educational and Psychological Measurement*, *50*, 233-243. doi: 10.1177/0013164490502001

- Cohen, J. (1992). A power primer. Psychological Bulletin, 112, 155-159. doi: 10.1037.0033-2909.112.1.155
- Correa Ribeiro, P. C., Lopes, C. S., & Lourenco, R. A. (2013). Complexity of lifetime occupation and cognitive performance in old age. *Occupational Medicine (Oxford, England)*, 63, 556-562. doi: 10.1093/occmed/kqt115
- Denny, N. W., & Thissen, D. M. (1983). Determinants of cognitive abilities in the elderly. *The International Journal of Aging & Human Development, 16*, 29-41. doi:

  10.2190/KBVP-A13Q-433A-T8VY
- Diehl, M., Willis, S. L., & Schaie, K. W. (1995). Everyday problem solving in older adults: observational assessment and cognitive correlates. *Psychology and Aging, 10*, 478-491. doi: 10.1037/0882-7974.10.3.478
- DerSimonian, R., & Laird, N. (1986). Meta-analysis in clinical trials. *Controlled Clinical Trials*, 7, 177-188. doi: 10.1016/0197-2456(86)90046-2
- Eskes, G. A., Longman, S., Brown, A. D., McMorris, C. A., Langdon, K. D., Hogan, D. B., & Poulin, M. (2010). Contribution of physical fitness, cerebrovascular reserve and cognitive stimulation to cognitive function in post-menopausal women. *Frontiers in Aging Neuroscience*, *2*, 137. doi: 10.3389/fnagi.2010.00137
- Ferreira, N., Owen, A., Mohan, A., Corbett, A., & Ballard, C. (2015). Associations between cognitively stimulating leisure activities, cognitive function and age-related cognitive decline. *International Journal of Geriatric Psychiatry 30*, 422-430,. doi: 10.1002/gps.4155
- Finkel, D., Andel, R., Gatz, M., & Pedersen, N. L. (2009). The role of occupational complexity in trajectories of cognitive aging before and after retirement. *Psychology and Aging*, 24, 563-573. doi: 10.1037/a0015511

- Folstein, M. F., Folstein, S. E, & McHugh, P. R. (1975) Mini-Mental State: a practical method for grading the cognitive state of patients for the clinician. *Journal of Psychiatric Research*, *12*, 189-198. doi: 10.1016/0022-3956(75)90026-6
- Forstmeier, S. & Maercker, A. (2008). Motivational reserve: Lifetime motivational abilities contribute to cognitive and emotional health in old age. *Psychology and Aging, 23*, 886-899. doi: 10.1037/a0013602
- Foubert-Samier, A., Catheline, G., Amieva, H., Dilharreguy, B., Helmer, C., Allard, M., & Dartigues, J. (2012). Education, occupation, leisure activities, and brain reserve: A population-based study. *Neurobiology of Aging*, *33*, 423.e15–423.e25. doi:10.1016/j.neurobiologing.2010.09.023
- Fritsch, T., McClendon, M. J., Smyth, K. A., Lerner, A. J., Friedland, R. P., & Larsen, J. D. (2007). Cognitive functioning in healthy aging: the role of reserve and lifestyle factors early in life. *The Gerontologist*, 47, 307-322. doi: 10.1093/geront/47.3.307
- Ganguli, M., Snitz, B. E., Lee, C., Vanderbilt, J., Saxton, J. A., & Chang, C. H. (2010). Age and education effects and norms on a cognitive test battery from a population-based cohort: the Monongahela–Youghiogheny healthy aging team. *Aging & Mental Health*, 14, 100-107. doi: 10.1080/13607860903071014
- Hertzog, C., Kramer, A. F., Wilson, R. S., & Lindenberger, U. (2008). Enrichment effects on adult cognitive development can the functional capacity of older adults be preserved and enhanced? *Psychological Science in the Public Interest*, *9*, 1-65. doi: 10.1111/j.1539-6053.2009.01034.x
- Higgins, J.P.T., Thompson, S.G., Deeks, J.J., & Altman, D.G. (2003). Measuring inconsistency in meta-analyses. *British Medical Journal*, 327, 557-560. doi: 10.1136/bmj.327.7414.557

- Hultsch, D. F., Hammer, M., & Small, B. J. (1993). Age differences in cognitive performance in later life: Relationships to self-reported health and activity life style. *Journal of Gerontology*, 48, 1-11. doi: 10.1093/geronj/48.1.P1
- Jefferson, A. L., Gibbons, L. E., Rentz, D. M., Carvalho, J. O., Manly, J., Bennett, D. A., & Jones, R. N. (2011). A life course model of cognitive activities, socioeconomic status, education, reading ability, and cognition. *Journal of the American Geriatrics Society*, 59, 1403-1411. doi: 10.1111/j.1532-5415.2011.03499.x
- Kaplan, R. F., Cohen, R. A., Moscufo, N., Guttmann, C., Chasman, J., Buttaro, M., . . .
  Wolfson, L. (2009). Demographic and biological influences on cognitive reserve.
  Journal of Clinical and Experimental Neuropsychology, 31, 868-876. doi: 10.1080/13803390802635174
- Katzman, R., Terry, R., DeTeresa, R., Brown, T., Davies, P., Fuld, P., Renbing, X, & Peck,
  A. (1988). Clinical, pathological, and neurochemical changes in dementia: a subgroup with preserved mental status and numerous neocortical plaques. *Annals of Neurology*,
  23, 138-144. doi: 10.1002/ana.410230206
- La Rue, A. (2010). Healthy brain aging: role of cognitive reserve, cognitive stimulation, and cognitive exercises. *Clinics in geriatric medicine*, *26*, 99-111. doi: 10.1016/j.cger.2009.11.003
- Le Carret, N., Lafont, S., Letenneur, L., Dartigues, J., Mayo, W., & Fabrigoule, C. (2003).

  The effect of education on cognitive performances and its implication for the constitution of the cognitive reserve. *Developmental Neuropsychology*, 23, 317-337. doi: 10.1207/S15326942DN2303\_1
- Lee, Y. S., Lee, C. L., & Yang, H. T. (2012). Effects of aging and education on false memory. *International Journal of Aging & Human Development*, 74, 287-298. doi: 10.2190/AG.74.4.b

- Lezak, M. D. (1995). *Neuropsychological Assessment 3<sup>rd</sup> Ed.* Oxford, Oxford University Press.
- Lin, F., Friedman, E., Quinn, J., Chen, D., & Mapstone, M. (2012). Effect of leisure activities on inflammation and cognitive function in an aging sample. *Archives of Gerontology* and *Geriatrics*, *54*, 398-404. doi: 10.1016/j.archger.2012.02.002
- Luszcz, M. A. (1992). Predictors of memory in young-old and old-old adults. *International Journal of Behavioral Development*, 15, 147-166. doi: 10.1177/016502549201500108
- Lyman, G. H., & Kuderer, N. M. (2005). The strengths and limitations of meta-analyses based on aggregate data. *BMC medical research methodology*, *5*, 14-21. doi: 10.1186/1471-2288-5-14
- Manly, J. J., Schupf, N., Tang, M-X., & Stern, Y. (2005). Cognitive decline and literacy among ethnically diverse elders. *Journal of Geriatric Psychiatry and Neurology*, *18*, 213-217. doi: 10.1177/0891988705281868
- Manly, J. J., Touradji, P., Tang, M-X., & Stern, Y. (2003). Literacy and memory decline among ethnically diverse elders. *Journal of Clinical and Experimental*Neuropsychology, 5, 680-690. doi: 10.1076/jcen.25.5.680.14579
- Marioni, R. E., van den Hout, A., Valenzuela, M. J., Brayne, C., Matthews, F. E., & MRC Cognitive Function and Ageing Study. (2012). Active cognitive lifestyle associates with cognitive recovery and a reduced risk of cognitive decline. *Journal of Alzheimer's Disease*, 28, 223-230. doi:10.3233/JAD-2011-110377
- Martyr, A., & Clare, L. (2012). Executive function and activities of daily living in Alzheimer's disease: a correlational meta-analysis. *Dementia and Geriatric Cognitive Disorders*, *33*, 189-203. doi: 10.1159/000338233
- Mathuranath, P. S., Cherian, J. P., Mathew, R., George, A., Alexander, A., & Sarma, S. P. (2007). Mini Mental State Examination and the Addenbrooke's Cognitive Examination:

- effect of education and norms for a multicultural population. *Neurology India*, *55*, 106-110. doi: 10.4103/0028-3886.32779
- Morgan, A. A. Marsiske, M., Whitfield, K. E. (2007). Characterizing and explaining differences in cognitive test performance between African American and European American older adults. *Experimental Aging Research*, *34*, 80-100. doi: 10.1080/03610730701776427
- Mortimer, J. A., Snowdon, D. A., & Markesbery, W. R. (2003). Head circumference, education and risk of dementia: Findings from the nun study. *Journal of Clinical and Experimental Neuropsychology*, *25*, 671-679. doi: 10.1076/jcen.25.5.671.14584
- Mousavi-Nasab, S. M., Kormi-Nouri, R., & Nilsson, L. G. (2014). Examination of the bidirectional influences of leisure activity and memory in old people: a dissociative effect on episodic memory. *British Journal of Psychology*, *105*(3), 382-398. doi: 10.1111/bjop.12044
- Mueller, A. E., Raymond, N., & Yochim, B. P. (2013). Cognitive activity engagement predicts future memory and executive functioning in older adults. *Activities, Adaptation & Aging*, *37*, 251-264. doi: 10.1080/01924788.2013.816833
- Murphy, M. & O'Leary, E. (2010). Depression, cognitive reserve and memory performance in older adults. *International Journal of Geriatric Psychiatry*, *25*, 665-671. doi: 10.1002/gps.2404
- Nakagawa, S. (2004). A farewell to Bonferroni: the problems of low statistical power and publication bias. *Behavioral Ecology*, *15*, 1044-1045. doi; 10.1093/beheco/arh107
- Nelson, H. E. (1982). National Adult Reading Test. Windsor, NFER-Nelson.
- Newson, R. S. & Kemps, E. B. (2005). General lifestyle activities as a predictor of current cognition and cognitive change in older adults: a cross-sectional and longitudinal

- examination. *The Journals of Gerontology. Series B, Psychological Sciences and Social Sciences*, 60, 113-120. doi:10.1093/geronb/60.3.P113
- Nucci, M., Mapelli, D., & Mondini, S. (2011). The cognitive reserve questionnaire (CRIq): A new instrument for measuring the cognitive reserve. *Aging Clinical and Experimental Research*, 23, 218-226. doi: 10.3275/7800
- Opdebeeck, C., Nelis, S. M., Quinn, C., & Clare, L. (2014). How does cognitive reserve impact on the relationships between mood, rumination, and cognitive function in later life? *Aging & Mental Health*. Advance online publication. doi: 10.1080/13607863.2014.962005
- Parisi, J. M., Stine-Morrow, E. A. L., Noh, S. R., & Morrow, D. G. (2009). Predispositional engagement, activity engagement, and cognition among older adults. *Aging*, *Neuropsychology, and Cognition*, *16*, 485-504. doi: 10.1080/13825580902866653
- Peterson, R. A. & Brown, S. P. (2005). On the use of beta coefficients in meta-analysis. *Journal of Applied Psychology*, 90, 175-181. doi: 10.1037/0021-9010.90.1.175
- Raven, J. C. (1960). Guide to the standard progressive matrices. London: H. K. Lewis.
- Rexroth, D. F., Tennstedt, S. L., Jones, R. N., Guey, L. T., Rebok, G. W., Marsiske, M. M., . .

  . Unverzagt, F. W. (2013). Relationship of demographic and health factors to cognition in older adults in the ACTIVE study. *Journal of Aging and Health*, *25*, 128S-146S. doi: 10.1177/0898264313498415
- Richards, M., & Deary, I. J. (2005). A life course approach to cognitive reserve: a model for cognitive aging and development? *Annals of Neurology*, *58*, 617-622. doi: 10.1002/ana.20637
- Richards, M. & Sacker, A. (2003). Lifetime antecedents of cognitive reserve. *Journal of Clinical and Experimental Neuropsychology*, 25, 614-624. doi: 10.1076/jcen.25.5.614.14581

- Rutter, M. (1985). Family and school influences on cognitive development. *Journal of Child Psychology and Psychiatry*, *26*, 683-704. doi: 10.1111/j.1469-7610.1985.tb00584.x
- Salthouse, T. A. (2006). Mental exercise and mental aging evaluating the validity of the "use it or lose it" hypothesis. *Perspectives on Psychological Science, 1,* 68-87. doi: 10.1111/j.1745-6916.2006.00005.x
- Salthouse, T. A. (2009). When does age-related cognitive decline begin? *Neurobiology of Aging*, 30, 507-514. doi: 10.1016/j.neurobiologing.2008.09.023
- Sánchez Rodríguez, J. L., Torrellas, C., Martín, J., & Fernandez, M. J. (2011). Cognitive reserve and lifestyle in Spanish individuals with sporadic Alzheimer's disease.

  \*American Journal of Alzheimer's Disease & Other Dementias, 26, 542-554. doi: 10.1177/15333175114288150
- Scarmeas, N., & Stern, Y. (2003). Cognitive reserve and lifestyle. *Journal of Clinical and Experimental Neuropsychology*, 25, 625-633. doi: 10.1076/jcen.25.5.625.14576
- Schaie, K. W. (1996). Intellectual development in adulthood. In Birren, J.E. & Schaie, K.W. (Eds.) *Handbook of the psychology of aging, 4th ed.*, (266-286). San Diego, CA. Academic Press
- Schmand, B., Smit, J., Lindeboom, J., Smits, C., Hooijer, C., Jonker, C., & Deelman, B. (1997). Low education is a genuine risk factor for accelerated memory decline and dementia. *Journal of Clinical Epidemiology*, *50*, 1025-1033. doi: S0895-4356(97)00121-2
- Smart, E. L., Gow, A. J., & Deary, I. J. (2014). Occupational complexity and lifetime cognitive abilities. *Neurology*, 83, 2285-2291 doi: 10.1212/WNL.000000000001075
- Smits, C. H. M., van Rijsselt, R. J. T., Jonker, C., & Deeg, D. J. H. (1995). Social participation and cognitive functioning in older adults. *International Journal of Geriatric Psychiatry*, 10, 325-331. doi: 10.1002/gps.930100409

- Staff, R. T., Murray, A. D., Deary, I. J., & Whalley, L. J. (2004). What provides cerebral reserve? *Brain: A Journal of Neurology*, 127, 1191-1199. doi:10.1093/brain/awh144
- Stern, Y. (2002). What is cognitive reserve? Theory and research application of the reserve concept. *Journal of the International Neuropsychological Society, 8,* 448-460. doi: 10.1017/S1355617702813248
- Stern, Y. (2006). Cognitive reserve and Alzheimer disease. *Alzheimer Disease and Associated Disorders*, 20, 112-117. doi: 10.1097/01.wad.0000213815.20177.19
- Stern, Y. (2009). Cognitive reserve. *Neuropsychologia*, 47, 2015-2028. doi: 10.1016/j.neuropsychologia.2009.03.004
- Then, F. S., Luck, T., Luppa, M., Thinschmidt, M., Deckert, S., Nieuwenhuijsen, K., ... & Riedel-Heller, S. G. (2014). Systematic review of the effect of the psychosocial working environment on cognition and dementia. *Occupational and environmental medicine*, 71(5), 358-365. doi: 10.1136/oemed-2013-101760
- Tucker A. M. & Stern, Y. (2011). Cognitive reserve in aging. *Current Alzheimer Research*, 8, 354-360. doi: 10.2174/156720511795745320
- Unverzagt, F. W., Hall, K. S., Torke, A. M., Rediger, J. D., Mercado, N., Gureje, O., . . . Hendrie, H. C. (1996). Effects of age, education, and gender on CERAD neuropsychological test performance in an African American sample. *The Clinical Neuropsychologist*, 10, 180-190. doi: 10.1080/13854049608406679
- Valenzuela, M., Brayne, C., Sachdev, P., Wilcock, G., & Matthews, F. on Behalf of the Medical Research Council Cognitive Function and Ageing. (2011). Cognitive lifestyle and long-term risk of dementia and survival after diagnosis in a multicenter population-based cohort. *American Journal of Epidemiology, 173*, 1004-1012. doi: 10.1093/aje/kwq476

- Valenzuela, M. J., Leon, I., Suo, C., Piamba, D. M., Kochan, N., Brodaty, H., & Sachdev, P. (2013). Cognitive lifestyle in older persons: the population-based Sydney Memory and Ageing Study. *Journal of Alzheimer's Disease*, 36, 87-97. doi: 10.3233/JAD-130143
- Valenzuela, M. J., & Sachdev, P. (2006a). Brain reserve and cognitive decline: a non-parametric systematic review. *Psychological Medicine*, *36*, 1065-1074. doi: 10.1017/S0033291706007744
- Valenzuela, M. J. & Sachdev, P. (2006b). Brain reserve and dementia: a systematic review. *Psychological Medicine*, *36*, 441-454. doi: 10.1017/S003329170500626
- Valenzuela, M. J., & Sachdev, P. (2007). Assessment of complex mental activity across the lifespan: Development of the lifetime of experiences questionnaire (LEQ).
  Psychological Medicine, 37, 1015-1025. doi: 10.1017/S003329170600938X
- Van Exel, E., Gussekloo, J., de Craen, A. J. M., Bootsma-van der Wiel, A., Houx, P., Knook,
  D. L., & Westendorp, R. G. J. (2001). Cognitive function in the oldest old: women
  perform better than men. *Journal of Neurology, Neurosurgery & Psychiatry*, 71, 2932. doi:10.1136/jnnp.71.1.29
- van Hooren, S. A. H., Valentijn, A. M., Bosma, H., Ponds, R. W. H. M., van Boxtel, M. P. J., & Jolles, J. (2007). Cognitive functioning in healthy older adults aged 64-81: a cohort study into the effects of age, sex, and education. *Aging, Neuropsychology, and Cognition*, 14, 40-54. doi: 10.1080/138255890969483
- Welsh, K. A., Breitner, J. C., & Magruder-Habib, K. M. (1993). Detection of dementia in the elderly using telephone screening of cognitive status. *Cognitive and Behavioral*Neurology, 6, 103-110.
- Welsh-Bohmer, K. A., Østbye, T., Sanders, L., Pieper, C. F., Hayden, K. M., Tschanz, J. T., & Norton, M. C. (2009). Neuropsychological performance in advanced age: influences

- of demographic factors and apolipoprotein E: Findings from the cache county memory study. *The Clinical Neuropsychologist*, *23*, 77-99. doi: 10.1080/13854040801894730
- Whalley, L. J., Dick, F. D., & McNeill, G. (2006). A life-course approach to the aetiology of late-onset dementias. *The Lancet Neurology*, *5*, 87-96. doi: 10.1016/S1474-4422(05)70286-6
- Wilson, R. S., Barnes, L. A., & Bennett, D. A. (2003). Assessment of lifetime participation in cognitively stimulating activities. *Journal of Clinical and Experimental*Neuropsychology, 25, 634-642. doi:10.1076/jcen.25.5.634.14572
- Wilson, R. S., Bennett, D. A., Beckett, L. A, Morris, M. C., Gilley, D. W., Bienias, J. L.,
  Scherr, P. A., & Evans, D. A. (1999). Cognitive activity in older persons from a geographically defined population. *Journal of Gerontology. Series B, Psychological Sciences and Social Sciences*, 54, 155-160. doi: 10.1093/geronb/54B.3.P155
- Zahodne, L. B., Glymour, M. M., Sparks, C., Bontempo, D., Dixon, R. A., MacDonald, S.
  W., & Manly, J. J. (2011). Education does not slow cognitive decline with aging: 12-year evidence from the Victoria longitudinal study. *Journal of the International Neuropsychological Society*, 17, 1039-1046. doi: 10.1017/S1355617711001044

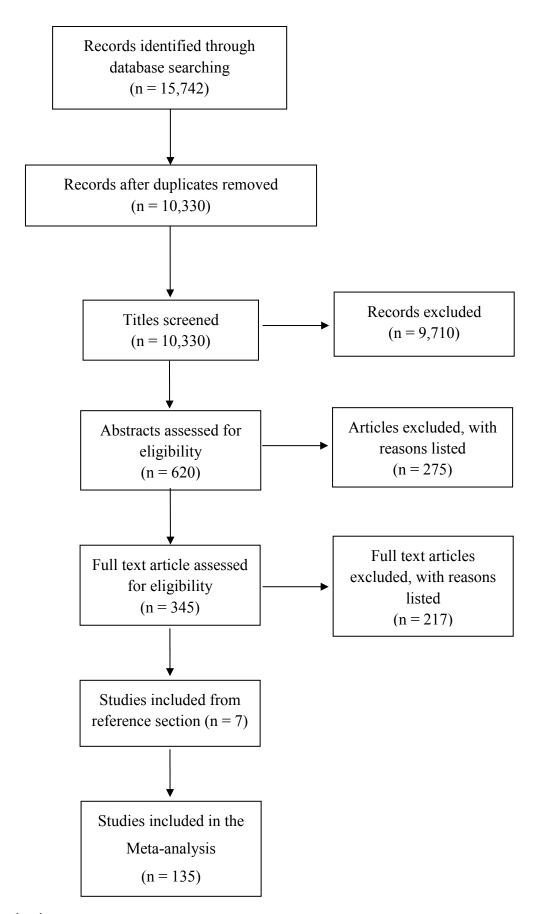


Figure 1. Study selection process

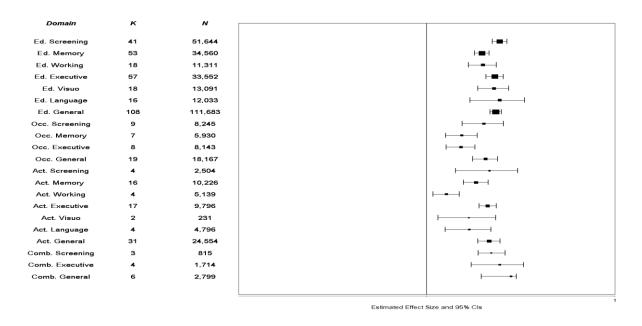


Figure 2. Forest plot of the effect sizes for each cognitive reserve proxy measure and each cognitive domain.

Figure 2 Note: Ed., educational level; Occ., occupational status; Act., cognitively-stimulating leisure activities; comb., combined cognitive reserve proxy measures; screening, cognitive status screening measures; Executive, executive function; Visuo., visuospatial abilities; General, overall cognitive function.

Table 1. Results of the meta-analyses

Table 1a. Results for the meta-analyses of the associations between educational level and cognitive function

Note: screening, cognitive status screening measures; Executive, executive function; visuospatial abilities; General, overall cognitive function. P

								Heterog	geneity		
Cognitive	Studies	n	Effect	95% CIs	Z	p	Q	Df(Q)	p	I-squared	Fail safe
domain			size								N
Screening	41	51,644	.314	.278349	16.10	<.001	1091.88	60	<.001	94.51	13,640
Memory	53	34,560	.230	.196263	13.12	<.001	466.89	55	<.001	88.22	6,640
Working	18	11,311	.235	.169298	6.84	<.001	191.63	18	<.001	90.61	1,996
Executive	57	33,552	.291	.249331	13.15	<.001	838.41	60	<.001	92.84	9,839
Visuospatial	18	13,091	.287	.212358	7.26	<.001	333.06	18	<.001	94.60	4,735
Language	16	12,033	.314	.177440	4.35	<.001	832.14	15	<.001	98.20	4,265
General	108	111,683	.295	.268322	20.25	<.001	2835.12	133	<.001	95.31	18,415
1 : 1 11				II I D C			1: 1				

values in bold are significant at the 5% level after Holm-Bonferroni corrections were applied.

Table 1b. Results for the meta-analyses of the associations between occupational status and cognitive function

								Hetero	geneity		
Cognitive	Studies	n	Effect	95% CIs	Z	p	Q	Df(Q)	p	I-squared	Fail safe
domain			size								N
Screening	9	8,245	.239	.142332	4.72	<.001	144.40	8	< .001	94.46	991
Memory	7	5,930	.141	.073208	4.05	<.001	35.15	6	<.001	82.93	163
Executive	8	8,143	.138	.076199	4.35	<.001	41.95	6	<.001	85.70	215
General	19	18,167	.247	.187304	7.90	<.001	284.18	18	<.001	93.66	4,371

Note: screening, cognitive status screening measures; Executive, executive function; visuospatial abilities; General, overall cognitive function. p values in bold are significant at the 5% level after Holm-Bonferroni corrections were applied.

Table 1c. Results for the meta-analyses of the associations between engagement in cognitively-stimulating leisure activities and cognitive function

								Heterog	geneity		
Cognitive	Studies	n	Effect	95% CIs	Z	p	Q	Df(Q)	p	I-squared	Fail
domain			size								safe N
Screening	4	2,504	.265	.115403	3.41	.001	44.91	3	<.000	93.32	167
Memory	16	10,226	.204	.148259	6.96	<.001	98.37	15	<.000	84.75	1,131
Working	4	5,139	.077	.024130	2.85	.004	6.87	3	.076	56.30	18
Executive	17	9,796	.257	.217297	12.16	<.001	61.61	17	<.001	72.41	2,542
Visuospatial	2	231	.172	.043295	2.61	.009	0.09	1	.762	0	N/A
Language	4	4,796	.174	.072272	3.34	.001	19.11	3	<.001	84.30	73
General	31	24,554	.264	.212315	9.51	<.001	496.33	31	<.001	93.75	10,151

Note: screening, cognitive status screening measures; Executive, executive function; visuospatial abilities; General, overall cognitive function. p values in bold are significant at the 5% level after Holm-Bonferroni corrections were applied.

Table 1d. Results for the meta-analyses of the associations between measures which combined proxy measures of cognitive reserve and cognitive function

							Heterog	geneity		
Studies	n	Effect	95% CIs	Z	p	Q	Df(Q)	p	I-squared	Fail
		size								safe N
3	815	.274	.213340	8.09	<.001	1.17	2	.557	0	41
4	1,714	.314	.182435	4.51	<.001	7.58	3	.059	60.40	85
6	2,799	.315	.227398	6.70	<.001	17.32	5	.006	71.13	335
	3 4	3 815 4 1,714	size  3 815 .274  4 1,714 .314	size  3 815 .274 .213340  4 1,714 .314 .182435	size  3 815 .274 .213340 8.09  4 1,714 .314 .182435 4.51	size  3 815 .274 .213340 8.09 <.001  4 1,714 .314 .182435 4.51 <.001	size  3 815 .274 .213340 8.09 <.001 1.17 4 1,714 .314 .182435 4.51 <.001 7.58	Studies         n         Effect         95% CIs         Z         p         Q         Df(Q)           3         815         .274         .213340         8.09         <.001	size  3 815 .274 .213340 8.09 <.001 1.17 2 .557 4 1,714 .314 .182435 4.51 <.001 7.58 3 .059	Studies         n         Effect         95% CIs         Z         p         Q         Df(Q)         p         I-squared           3         815         .274         .213340         8.09         <.001

Note: screening, cognitive status screening measures; Executive, executive function; visuospatial abilities; General, overall cognitive function. p values in bold are significant at the 5% level after Holm-Bonferroni corrections were applied.

Supplementary material: Supplementary Table and references for studies included in the meta-analyses

## Supplementary Table: Studies included in the meta-analysis with demographic, proxy measure, and cognitive outcome details

Authors	Participants and	Proxy measure of cognitive	Cognitive outcomes and correlations
	demographic details	reserve	
Educational level			
Aartsen et al. (2002)	3,107 (mean age = 68.7)	Education in years	Screening measure (MMSE, $r = .30$ ), memory
	from the Longitudinal		(immediate recall, $r = .220$ ), executive function
	Aging Study Amsterdam		(Coding Task – processing speed, $r = .40$ ), and general
	(LASA)		cognition (RPM, $r = .34$ )
Acevedo et al. (2007)	89 (mean age = 74.56, SD =	Education categorised as 3-8	Memory (Logical memory and visual reproduction
	4.7)	years, 9-12 years, and 13-23	immediate and delayed, $r = .445$ ), working memory
		years	(DS forward, $r = .330$ ), executive function (Trails B,
			Similarities, category fluency, phonemic fluency
			(FAS), $r = .401$ ), language (BNT), $r = .33$ ), and
			visuospatial ability (copying a figure, $r = .196$ )

Aiken-Morgan et al.	449 (mean age = $67.31$ )	Education in years	Screening measure (MMSE, $r = .36$ ), memory (CVLT),
(2010)	from the Baltimore Study of		r = .249), working memory (DS Forward, $r = .24$ ),
	Black Aging		executive function (DS Backward, $r = .26$ ), and
			visuospatial ability which was included in overall
			cognition only (RPM and Card Rotation Test, $r = .24$ )
Al Hazzouri et al. (2011)	7,042  (mean age = 70.6)	Education in years	General cognition (short-term verbal recall, $r = .09$
	from the Sacramento Area		
	Latino Study (SALSA) and		
	Mexican Health and Aging		
	Study (MHAS)		
Albert & Teresi (1999)	161 participants (mean age	Education in years	Screening measure (MMSE, $r = .21$ )
	= 75.4, SD $= 7.3$ )		
Alvarado et al. (2002)	557 (aged 65-89) from the	Education categorised as literate	General cognition (time orientation, space orientation,
	Aging in Leganes Study	(no formal education), 1-3 years formal education, primary or more	personal information, naming test, immediate &

			delayed recall (6 objects), and logical memory (short
			story recall), $r = .148$ )
Andel et al. (2015)	810  (mean age = 83)  from	Education in years	Screening measure (MMSE, $r = .08$ )
	the Swedish Level of Living		
	Survey and Swedish Panel		
	Study of Living Condition		
	of the Oldest Old		
	(SWEOLD)		
Angel et al. (2010)	28 (mean age = 66.5, SD =	Education dichotomised into	Memory (word recall completion, $r = .531$ and
	6.44)	lower (< 10 yrs.) and higher (> 10	accuracy, $r = .419$ )
		yrs.)	
Angtox et al. (2002)	1 922 (maan aga = 77 7 SD	Education in voors	Mamanu (ayumbal niatura and ward recall = 226)
Anstey et al. (2003)	1,823 (mean age = 77.7, SD	Education in years	Memory (symbol, picture, and word recall, $r = .226$ )
	= 6.56) participants from the		and executive function (DSST, $r = .331$ )

Australian 1	Longitudinal
1 Iustiuliuli	Dongraamar

Study of Aging (ALSA)

Arbuckle et al. (1986) 285 (median age = 71.6)

Education in years

Memory (index comprising free recall (of 9 words),

DS forward, and correct factual and inferential answers

(10 multiple choice Qs. based on short story), r = .46)

Ardila et al. (2000) 250 aged 66-85

Education categorised as 1-4

years, 5-9 years, and 10+ years

Memory (recall of words and semi-complex figure,

cueing, and recognition, r = .195), executive function

(DS backward, visual detection, 20 minus 3,

similarities, calculation, and sequences, and semantic

and phonemic fluency, r = .331) visuospatial ability

(copy of a figure, r = .287), and language (naming,

repetition, and comprehension, r = .121). All subtests

of NEUROPSI

Ashley (2008)	63 (mean age = $77.3$ )	Education in years	Executive function (choice reaction time, $r = .07$ ) and
(PhD thesis)			general cognition (word recall, letter series, and DSST,
			r = .28)
Barnes et al. (2004)	664 (mean age = 76) from	Education in years	Screening measure (MMSE, $r = .34$ ), memory (CVLT,
	Sonoma, California		r = .245), and executive function (TMT-B, Stroop, and
			DSST, $r = .3036$ )
Barnes et al. (2006)	108 (mean age = 72.6)	Education in years	General cognition (includes MMSE, memory (East
			Boston Story), perceptual speed (SDMT) and working
			memory (DS Backward), $r = .580$ )
Barnes et al. (2011)	6,158 65+ from the Chicago	Education in years	General cognition (includes MMSE, memory (East
	Health and Aging Project		Boston Story), perceptual speed (SDMT) and working
	(CHAP)		memory (DS Backward), r = .117)
Beatty et al. (2003)	634 aged 64-94 from the	Education categorised as 8 <sup>th</sup>	Memory (immediate and delayed, $r = .208$ ), executive
	Oklahoma Longitudinal	grade or less, some high school,	function (attention, $r = .293$ ), language ( $r = .206$ ),

	Assessment of Health	GED, high school graduate, some	visuospatial ability ( $r = .205$ ), and general cognition
	Outcomes of Mature Adults	college, or postgraduate	(all the subtests of the RBANS used, $r = .295$ )
	(OAKLAHOMA)		
Capitani et al. (1996)	220 aged 56-85	Education dichotomised into low	Memory (SRT and Block Tapping Learning, 56-70
		(mean years = $4.78-5.41$ ) and high	year olds, $r = .21$ and 71-85 year olds, $r = .21$ ),
		education (mean years = 13.07-	executive function (semantic verbal fluency, 56-70
		13.62)	year olds, $r = .18$ and 71-85 year olds, $r = .18$ ), and
			general cognition (RPM, 56-70 year olds, $r = .18$ and
			71-85 year olds, $r = .19$ )
Carmelli et al. (1995)	522 (mean age = 64)	Education in years	Screening measure (Iowa Screening Battery, $r = .29$
			and MMSE, $r = .30$ )
Christensen et.al (1996)	703-852 participants aged	Education in years	Screening measure (MMSE, $r = .35$ , $n = 852$ ) and
	70-89 from Canberra and		memory (word and address recall, $r = .21$ , $n = 703$ )
	Quanbeyan		

Christensen et al. (2009)	472 aged 60-64 (mean age =	Education categorised as 0-12	Memory (immediate and delayed recall, $r = .21$ ) and
	62.6, SD = $1.4$ ) from	years, 13 years, 14-15 years, 16+	executive function (SLMT, $r = .25$ )
	Personality and Total Health	years	
	(PATH) Through Life study		
Christofoletti et al.	116 (mean age = 73.6)	Education categorised as 0, 1-4,	Memory (incidental, immediate and delayed recall, and
(2007)		5-8, 9-11, >11	recognition, $r = .301$ ), executive function (verbal
			fluency and clock drawing, $r = .695733$ ), and
			language (naming, $r =564$ )
Constantinidou et al.	359 (mean age = 74.64, SD	Education categorised as 0-4	Executive function (Trials-B, SDMT, and animal
(2012)	= 3.97)	years, 5-9 years, and >/= to 10	fluency, $r = .312483$ ), visuospatial ability (Trails-A
		years	and word finding, $r = .333$ ), and language (Peabody
			Picture Vocabulary Test and BNT, $r = .365$ )
Correa-Ribeiro et al. (2013)	624 aged 65+	Education categorised as illiterate, 1-4 years, 5-8 years, 9-12 years, and >/=13 years	Screening measure (MMSE, $r = .264402$ )

Davey et al. (2013)	244 aged 98-108	Education in years	Screening measure (MMSE, $r = .36$ ), memory (FOME
			recall and recognition, $r = .09$ ), and executive function
			(COWAT, Similarities, and the Behavioural
			Dyscontrol Test, $r = .26$ )
de Araújo Carvalho et al.	333 (mean age = 68)	Education in years	Language (oral comprehension, $r = .74$ )
(2009)			
de Oliveira-Wachholz et	67 aged 60-75	Education categorised as 1-4	Screening measure (MMSE, $r = .37$ ), memory
al. (2011)		years, 5-8 years, and 9 or more	(incidental memory and immediate and delayed recall,
		years	r = .15), working memory (DS forward, $r = .05$ ),
			executive function (clock drawing, DS backward,
			verbal fluency, $r = .2535$ ), and language (naming, $r =$
			0, all at ceiling)
de Souza-Talarico et al.	40  (mean age = 72)	Education in years	Working memory (DS forward, $r = .28$ ) and executive
de Bouza-Talarico et al.	To (mean age = 12)	Education in years	working memory (D5 forward, 7 – .26) and executive
(2007)			function (DS backward, $r = .41$ )

Denny & Thissen (1983)	115 men (mean age = $71.16$ ,	Education in years	Executive function (Block Design and Twenty
	SD = 7.97)		Questions Task, $r = .14$ ), language (vocabulary, $r =$
			.42), and general cognition (Twenty Questions Task,
			classification, and vocabulary, $r = .33$ )
Diehl et al. (1995)	62 (Mean age = 76.4)	Education in years	Working memory (DS forward, $r = .05$ ), executive
			function (processing speed, $r =04$ ), and general
			cognition (Rey figure type test and recognising
			synonyms, $r = .1730$
Dorbath et al. (2013)	64 (mean age = 68.05)	Education dichotomised into	Executive function (focus switching task, cost $r = .19$ ,
		lower (< 14 years) and higher (>	accuracy $r = .31$ )
		18 years)	
Duff et al. (2013)	576 (mean age = 68.1)	Education in years	Screening measure (TICS, $r = .21$ )

Elias et al. (1997)	1,002 aged 65-88 from the	Education categorised as 5-8	Memory (logical memory and paired associates, $r =$
	Framingham Heart Study	years, 9-11 years, 12 years, and	.31), working memory (DS forward, $r = .27$ ), executive
		>12 years	function (DS backward, $r = .30$ ), and visuospatial
			ability (reproduction, $r = .28$ )
Ferreira et al. (2015)	3,515 aged 65+	Education categorised as none, primary school (to age 11), secondary school, (to age 16) further education: A levels (to age 18 years), technical/vocational, university degree, postgraduate or professional qualification	Memory (Paired Associate Learning, $r$ = .02), working memory (DS forward and spatial search task, $r$ = .07), and language (grammatical reasoning, $r$ = .15)
Fillenbaum et al. (1988)	1,637 aged 60+	Education in years	Screening measure (MMSE, $r = .45$ )
Fisk et al. (1995)	361 (mean age = 73.8) From	Education in years	Screening measure (Halifax Mental Status Scale, $r =$
	Canadian Sample of Health		.35)
	and Aging (Nova Scotia		
	sample)		

Foubert-Samier et al.	331 (mean age = 76.1, SD =	Education level categorised as 5	Verbal fluency (IST, $r = .235$ )
(2012)	3.9) from the Three Cities	levels from primary school	
	Cohort (3C)	without a diploma to university	
		level	
Fournet et al. (2012)	445 aged 55-85	Education categorised as < 8	Memory (recall of words, locations, and patterns, $r =$
		years, 8-12 years, and 13 years	.282) and working memory (word and location span, $r$
			= .337)
Fritsch et al. (2007)	349 (mean age = 74.8, SD =	Education in years	Screening measure (TICS-M, $r = .23$ ), memory (WMS-
	1)		R Logical Memory test, $r = .24$ ) and executive function
			(timed months of the year backwards and verbal
			fluency, $r = .17$ )
Ganguli et al. (2010)	1413 (mean = 77.6)	Education categorised as less	Memory (WMS-R Logical Memory (immediate and
	from the Monongahela-	than high school, high school	delayed recall), WMS-R Visual Reproduction
	Youghiogheny Healthy		(immediate and delayed recall), and 3-trial FOME with
			Semantic Interference, $r = .17$ ), executive function

	Aging Team (MYHAT)	graduate, and more than high	(TMT-B, clock drawing, and phonemic verbal fluency,
	study	school	r = .12), language (BNT, verbal fluency categories, and
			Indiana State Token Test, $r = .20$ ), and visuospatial
			ability $(r = .20)$
Giogkaraki et al. (2013)	383 (mean age = 73.33)	Education in years	Memory (HVLT and WMS-R Logical Memory Story
			A immediate and delayed recall, $r = .32$ ), executive
			function (TMT-B, SDMT, category fluency, phonemic
			fluency, $r = .3656$ ), and visuospatial ability (TMT-A,
			r = .35)
Giordano et al. (2012)	288 (mean age = 73.5)	Education in years	Screening measure (MMSE, $r =01$ ), memory
			(immediate and delayed prose memory and memory
			with interference at 10 and 30 seconds, $r = .33$ ),
			working memory (DS forward, $r = .06$ ), executive
			function (TMT-B and clock drawing, $r = .2128$ ), and

			visuospatial ability (copying overlapping figure and TMT-A, $r = .24$ )
Glymour et al. (2005)	5,726 aged 70+ from the AHEAD study	Education categorised as <12 years, 12 years, or >12 years	General cognition (composite of TICS and delayed recall, $r = .29$ )
Gonzalez et al. (2013)	8,833 (mean age = 73.9) from the Health and Retirement Study (HRS)	Education in years	Screening measure (abbreviated TICS, $r = .44$ )
Hashimoto et al. (2006)	155 aged 70 +	Education categorised as 6 years, 8 years and >/= 10 years	Executive function (TMT-B, $r$ = .23) and visuospatial ability (TMT-A, $r$ = .25)
Hassing et al. (1998)	80 aged 90+	Education in years	Screening measure (MMSE, $r = .32$ ) and memory (word and object recall immediate and delayed, $r = .21$ )
Hill, Whalin et al. (1995)	253 (mean age = 84.1, SD = 5.06)	Education in years	Memory (recall, $r = .25$ )

Ho & Chan (2005)	204 (mean age = 68.33, SD	Education in years	General cognition (Chinese version of the Mattis
	= 7.41)		Dementia Rating Scale, $r = .52$ )
Inouye et al. (1993)	1,182 aged 70-79 from the	Education categorised as 0-7	Memory (delayed recall and recognition, $r = .11$ ),
	MacArthur Foundation	years, 8-12 years, and >12 years	executive function (abstraction, $r = .55$ ), language
	Research Network on		(naming, $r = .34$ , and visuospatial ability (copying, $r =$
	Successful Aging		.36)
Inzelberg et al. (2007)	260 (mean age = 72.4)	Education categorised as 0-4	Screening measure (MMSE, $r = .56$ )
		years, 5-8 years, and >8 years	
Jefferson et al. (2011)	951 participants aged 54-	Education scored from 0 (no	Memory (WMS-R Logical Memory Story A, East
	100	formal education) to 30 (multiple	Boston Story, word list learning, BNT and verbal
		advanced degrees)	fluency, $r = .15$ ), working memory (WMS-R Digit
			Span, Digit Ordering, r = .14), executive function
			(SDMT, number comparison, Stroop Color-Word, r =
			.08), visuospatial ability which was included in overall
			cognition only (line orientation and RPM, $r = .27$ ), and

			global cognition (z-score average from all domains, $r = .19$ )
Kaplan et al. (2009)	95 participants (aged 75-90)	Education in years	Memory (RBANS List Recall, List Learning, and
			Semantic Fluency, $r = .21$ ), executive function
			(CalCAP sequential RT, RBANS Coding, and Stroop
			Color-Word, $r = .29$ ), and visuospatial skills (RBANS
			Figure Copy, Line Orientation, Trail Making Test B,
			Picture Naming, $r = .31$ )
Kempler et al. (1998)	317 aged 54 -99	Education dichotomised as 0-8	Executive function (Category fluency, $r = .20$ )
		years and 9+ years	
Kesse-Guyot et al.	3083 participants (mean age	Education categorised as primary,	Global cognition(word recall, verbal fluency, forward
(2013)	= 65.4, SD = $4.6$ ) from the	secondary, or university	and backward digit span, and alternate trail-making test
	Supplementation with		scores were converted into T scores and combined, $r =$
	Vitamins and Mineral		.37)

	Antioxidants (SU.VI.MAX)		
	study		
Kilander et al. (1997)	504 men aged 69-74 from	Education categorised as low	General cognition ( mean z score of 13 tests to assess
	Uppsala Health Survey	(elementary school/6-7 years),	audio-verbal and visuospatial short term memory,
		medium (secondary school), and	learning and retention, processing speed and set-
		high (university studies)	shifting capacity, $r = .40$ )
Kim et al. (2011)	3157 (mean age = 72.3) from the Korean Longitudinal Study of	Education in years	Screening measure (Korean MMSE, $r = .48$ )
	Aging (KLoSA)		
Lang et al. (2008)	2,397 aged 70+ from	Education categorised as age at	General cognition (mean z score of 6 tests assessing
	English Longitudinal Study	which left school ( =14, 15, 16,</td <td>orientation, immediate and delayed memory,</td>	orientation, immediate and delayed memory,
	of Ageing (ELSA)	17,18, >/=19)	prospective memory, verbal fluency, and attention and
			processing speed, $r = .27$ )

Le Carrett et al. (2003)	1,022 (mean age =72.97) from Personnes Agées Quid study (PAQUID)	Education categorised as 0-5 years, 6-9 years, 10-12 years, and 12+ years	Screening measure (MMSE, $r = .10$ )
Lee, Lee, & Yang (2012)	50 aged 60+	Education dichotomised as low	Memory (recall and recognition, $r = .53$ )and executive
		(mean = 8.52 years) and high	function (DS backward, $r = .17$ )
		(mean = 13.32 years)	
Leggett et al. (2013)	489 (mean age = 69)	Education categorised as none,	Screening measure (MMSE, $r = .39$ )
		primary school, lower secondary	
		school, upper secondary or	
		vocational, college or higher	
Leung et al. (2010)	512 (mean age = 74.5, SD =	Education in years	Screening measure (Chinese MMSE and ADAS-Cog, r
	7.1)		= .44 and .45), memory (word learning and delayed
			recall, $r = .34$ ), working memory (DS forward, $r = .26$ ,

			and executive function (DS backward and category
			fluency, $r = .2347$ )
Li et al. (2013)	52 aged 60+	Education dichotomised into low (mean = 9.71 years) and high (mean = 15.79 years)	Working memory (DS forward, $r = .30$ ) and executive function (DSST, Stroop, Plus-Minus Shifting Task, and information updating (memory paradigm), $r = .34$ )
Lin et al. (2007)	58 aged 60+	Education in years	Executive function (HSCT Part A, Monotone Counting
			Test, word fluency, category score and perseveration
			errors in a modified WCST, Stroop interference, HSCT
			Part B, raw score, profile score, and number of rule-
			breaks in a modified version of the Six Elements Test
			(SET), $r = .50$ )
Linderberger & Baltes	516 (mean age = 84.9, SD =	Education in years	General cognition (perceptual speed (Digit Letter,
(1997)	8.7) from the Berlin Aging		DSST, and Identical Pictured); reasoning (Figural
	Study (BASE)		Analogies, Letter Series, and Practical Problems);
			memory (Activity Recall, Memory for Text, and Paired

Associates); knowledge (Practical Knowledge, Spot-a-
Word, and Vocabulary); and verbal fluency (Animals
and Letter S), $r = .39$ )

Luszcz (1992) 119 (mean age = 71.6) Education in years

Screening measure (MMSE, r = .34), memory (prose recall immediate and delayed, symbol recall, r = .21), executive function (DSST completion time and correct at 90 seconds, r = .29, and general cognition (RPM, r = .14)

Mangione et al. (1993) 472 aged 65+ Education categorised as <8<sup>th</sup>

Education categorised as  $<8^{th}$  Screening measure (TICS, r = .58) grade, some high school, high

college graduate, some postgraduate, and postgraduate

degree.

school graduate, some college,

Mathuranath et al.	488  (mean age = 68.5)	Education categorised as no	Screening measure (Malayalam ACE and MMSE, $r =$
(2007)		formal education, 1-4 years, 5-8	.35)
		years, 9-12 years, and > 12 years	
Matioli et al. (2008)	83 (mean age of 71.4)	Education categorised as 1-4	Screening measure (MMSE, $r = .26$ ), memory (delayed
		years, 5-8 years, and > 8 years	recall, $r = .07$ ), and executive function (clock drawing
			and animal fluency, $r = .2741$ )
Maurer (2011)	3,069 aged 60+ from SABE	Education in years	Screening measure (MMSE, $r = .1950$ )
McCarty et al. (1982)	172 aged 63-97 from Duke	Education in years	Memory (logical memory immediate and delayed and
	longitudinal study of aging		Associate Learning, $r = .45$ ) and visuospatial ability
			(copying, $r = .50$ )
Mejia et al. (1998)	60  (mean age = 69.66)	Education in years	Memory (WMS Associative Learning and Logical
			Memory and AMSET, $r = .15$ ) and executive function
			(WCST and phonemic and semantic verbal fluency, $r =$
			.1115)

Milan et al. (2004)	226  (mean age = 70.1)	Education categorised as none, 1-	Screening measure (MMSE, $r = .47$ )
		5 years, 6-10 years, >10 years	
Mitrushina et al. (1989)	156 (mean = 70.7 years)	Education in years	Language (Vocabulary scaled score from WAIS, <i>r</i> =
			.29)
Morgan et al. (2007)	162  (mean age = 73.7)	Education in years	Screening measure (MMSE, $r = .24$ ), memory (Rey
			AVLT, Hopkins VLT-R, RBMT I short story recall, r
			= .24), executive function (DSST, finding A's,
			identical pictures, $r = .24$ ).
Mousavi-Nasab et al.	794 (mean age = 74.12, SD	Education in years	Memory (recall and recognition, $r = .29$ )
(2014)	= 7.1) form baseline of the		
	Betula project		
Mueller et al. (2013)	44 (mean age = 75.3)	Education in years	Memory (CVLT, $r = .35$ ) and executive function
			(TMT-B and D-KEFS 20 Question Subtest, $r = .17$ )

Murayama et al. (2013)

Mulgrew et al. (1999)	1360 aged 60+ from San	Education in years
	Luis Valley Health and	
	Aging Study	
Mungas et al. (2005)  (Al Hazzouri et al.  (2011) included for general cognition for the same dataset)	497 (mean age = 70.9, SD = 7.5) from SALSA and Woodland	Education in years

118 (mean age = 69)

Education in years

Screening measure (MMSE, r = .18)

Memory (word list and spatial configuration learning, r = .34), working memory (verbal attention span, r = .53), executive function (conceptual thinking, r = .59), language (object naming, picture association, comprehension, and verbal expression, r = .65), and visuospatial ability (pattern recognition and spatial localization, r = .50)

Memory (verbal and visual immediate and delayed recall, r = .19)

Murphy & O'Leary	99 aged 60-83	Education dichotomised into	Memory (Immediate and delayed recall of the CERAD,
(2009)		lower (less than 12 yrs.) and	r = .1627)
		higher (greater than 12 yrs.)	
Murden et al. (1991)	94 of 358 included aged 70-	Education dichotomised into high	Screening measure (MMSE, $r =1543$ )
	99	(9th grade or higher) and low (8th	
		grade or lower)	
O'Connor et al. (1989)	1,822 aged 75+ from	Education dichotomised into low	Screening measure (MMSE, $r = .06$ )
	Cambridge 75+ study	(left school before 15) and high	
		(left school at 15 or older)	
O'Shea et al. (2014)	3,484 (mean age = $76.07$ ,	Education in years	Memory (SRT and BVRT, $r = .31$ ), executive function
	SD = 6.4) from Washington		(Similarities from WAIS-R, nonverbal reasoning,
	Heights/Hamilton Heights		verbal fluency (COWAT), and category fluency, $r =$
	Inwood Columbia Aging		.40), language (BNT, repetition, and auditory
	Project (WHICAP)		comprehension, $r = .57$ ), and visuospatial ability

			(Rosen Drawing Test and multiple choice matching of figures from the BVRT, $r = .50$ )
Parisi et al. (2009)	189 (mean age = 72.9, SD = 8.2)	Education in years	Working memory (letter-number sequencing, $r = .14$ ), executive function (Letter and Pattern Comparison, Finding As, Identical Pictures, Letter Sets, Figure Classification, Everyday Problem Solving, Substitutes Uses, Ornamentation, and Opposites Test, Alternate Uses, Word Associations, and FAS, $r = .21$ ), and general cognition (composite of tests, $r = .21$ )
Paula et al. (2013)	60 (mean age = 74.08, SD = 6.51)	Education in years	Executive function (verbal fluency, $r = .51$ )
Pedersen et al. (1996)	580 (mean = 66.3, SD = 7.6) from the Swedish Adoption/Twin Study of Aging (STATSA)	Education categorised as elementary school, secondary	Screening measure (MMSE, $r$ = .1621) and general cognition (Synonyms, Figure Logic, Block Design, and Figure Identification, $r$ = .3041

		school, junior college, and	
		university	
Petersen et al. (1992)	161 with mean age = 79.8	Education in years	Memory (SRT and Rey AVLT immediate and delayed
	(SD = 7.6)		recall and WMS-R, $r = .188$ ) and executive function
			(DS backward, $r = .03$ )
Plassman et al. (1995)	930 (mean age = 66.63)	Education in years	Screening measure (TICS-M, $r = .41$ )
Plumet et al. (2005)	49 aged 60-69, 44 aged 70+	Education dichotomised into 7-11	Executive function (Card Sorting Task and semantic
		years and =/>12 years	verbal fluency, $r = .2237$ )
Portin et al. (1995)	389 aged 62	Education dichotomised into	Memory (object memory and Paired Word Associates,
		primary schooling or (up to 6	r = .0607), working memory (DS forward, $r = .29$ ),
		years) less and more than primary	executive function (Digit Symbol, Block Design,
		schooling	Similarities, and months backward, $r = .3036$ ), and
			visuospatial ability (TMT-A, $r = .1532$ )

Puccioni & Vallesi (2012a)	17 (mean age = 73)	Education in years	Executive function (Stroop, $r = .33$ )
Puccioni &Vallesi 2 (2012b)	23 (mean age = 71)	Education in years	Executive function (Stroop, $r = .63$ )
Rexroth et al. (2014)	2,782 (mean = 73.6, SD = 5.9) from baseline of the Advanced Cognitive Training for Independent and Vital Elderly (ACTIVE) study	Education categorised as <12 years, 12 years, 13-15 years, and >15 years	Memory (RVLT, HVLT, and RBMT short story recall, $r = .10$ ) and executive function (Letter Sets, Letter Series Sets, Word Series Test, and Useful Field of View Tasks 2-4, $r = .07$ )
Ritchie et al. (2013)	1628 aged 70 and 80 from the Lothian 1921 and 1936 Birth Cohorts	Education in years	Executive function (processing speed, $r = .1117$ )

Scherr et al. (1988)	3,564 – 3603 (varies by analysis) aged 65+ from the East Boston Study	Education categorised as some elementary, some high school, and some college	Memory (short story immediate recall, $r = .06$ ) and executive function (DS backward, $r = .07$ )
Schmand et al. (1997)	4,051 (mean age = 75.4, SD	Education dichotomised into low	Screening measure (MMSE, $r = .20$ )
	= 5.7) from the Amsterdam	(incomplete primary – general	
	Study of the Elderly	intermediate education) and high	
	(AMSTEL)	(intermediate vocational to	
		university education)	
Senanarong et al. (2001)	3,177 aged 60+	Education in years	Screening measure (Thai MMSE, $r = .47$ )
Smits et al. (1995)	115 aged 55-89	Education in years	Memory (Twelve Words Test immediate and delayed
			recall and Everyday Memory Test, $r = .25$ ), executive
			function (Coding Task, $r = .39$ ), and general cognition
			(RPM, r = .36)

Then et al. (2014)	422 (mean age = 71) from  Leipzig Research Centre for  Civilization Diseases	Education categorised as high (third level), medium (secondary), and low (primary)	Screening measure (MMSE, $r = .08$ )
Unverzagt et al. (1996)	83 (mean age = 74.6, SD =	Education in years	Screening measure (MMSE, $r = .65$ ), memory (word
	7.1)		list learning, delayed recall, and recognition, $r = .53$ ),
			executive function (Constructional Praxis and category
			fluency, $r = .4763$ ), and language (BNT, $r = .65$ )
Van der Linden et al.	48 aged 60 - 80	Education dichotomised as low	Memory (free and cued recall, $r = .5159$ )
(1997)		(maximum 12 years) and high	
		(minimum 12 years)	
van Exel et al. (2001)	446 aged 85+ from the	Education dichotomised as low	Memory (word list immediate and delayed, $r = 0$ ) and
	Leiden 85-plus Study	(primary or <6 years) and high	executive function (Stroop, $r = .30$ )
		(more than primary or >6 years)	

van Hooren et al. (2007)	576 aged 65-81 from the	Education categorised as low	Memory (VVLT, $r = .08$ ) and executive function
	Maastricht Aging Study	(elementary and lower	(Stroop, Concept Shifting Task, and verbal fluency, $r =$
	(MAAS)	vocational), medium (intermediate	.1920)
		secondary or vocational), high	
		(higher secondary, vocational,	
		university, and scientific)	
Vaughan et al. (2014)	393 (mean age = 81.21, SD	Education in years	General cognition (combination of TICS, category
	= 4.26) from the Women's		verbal fluency, TMT-B, and DS Backward, $r = .16$ )
	Health Initiative Study		
Welsh-Bohmer et al.	507 age 66+ from the Cache	Education in years	Memory (word list learning and delayed, WMS
(2009)	study		Logical Memory and BVRT immediate and delayed, $r$
			= .09), executive function (TMT-B, category fluency,
			Constructional Praxis, COWAT, and SDMT, $r = .18$ -
			.29), language (BNT, $r = .09$ ), and visuospatial ability
			(TMT-A, r = .09)

figures of speech, r = .41). All standardised to z scores

Wiederholt et al. (1993)	1,692 aged 55-94 from the	Education dichotomised into less	Screening measure (MMSE, $r = .34$ ), memory (Bushke
	Rancho Bernardo study	than college or college	SRT and visual reproduction immediate and delayed, $r$
			= .22), executive function (TMT-B and category
			fluency, $r = .26$ ), visuospatial ability (copying, $r = .21$ ),
			and general cognition (2 items from the Blessed
			Information-Memory-Concentration Test, $r = .36$ )
Yao et al. (2009)	1,000 (mean = 71.34 years, SD = 7.10) from Changsha City Study	Education in years	Screening measure (MMSE, $r = .17$ )
Zahodne et al. (2011)	1,014 participants aged 54-	Education in years	Memory (sentence construction and span test, and
	95 (mean age = 68.8, SD =		immediate recall of 2 word lists and 2 short stories, $r =$
	6.8)		.2431), executive function (lexical decision and
			sentence verification, $r = .15$ and verbal fluency - 3
			written tests from the Kit of Factor Referenced
			Cognitive Tests – controlled associates, opposites and

Aging in Leganes Study

Zahodne et al. (2014)	487 (mean age = 69.6, SD =	Education in years	Memory (Picture Sequence Memory, $r = .11$ ), working
	8.8) from the National		memory (List Sorting, $r = .33$ ), and executive function
	Institute of Health (NIH)		(Flanker Inhibitory Control, Dimensional Change Card
	Toolbox norming study		Sort and speed of Pattern Comparison, $r = .38$ )
Zhou et al. (2014)	172 (mean age = 67.17 – 67.66)	Education dichotomised as lower (<6 years) and higher (7-12 years)	Screening measure (MoCA and MMSE, $r = .51$ )
Zimmerman et al. (2012)	549 (mean age =79.7, SD =	Education dichotomised as lower	Memory (SRT, $r = .04$ ), working memory (DS
	5.0) from the Einstein	(=/>12 years) and higher (=/>13	forward, $r = .07$ ), executive function (TMT-B, DS
	Aging Study (EAS)	years)	backward, and phonemic and category fluency, $r = .15$ -
			.20), and visuospatial ability (TMT-A, $r = .04$ )
Occupational Status			
Alvarado et al. (2002)	557 aged 65-89 from the	Main occupation categorised into	General cognition (time orientation, space orientation,

to white-collar workers

nine categories from farm workers personal information, naming test, immediate and

			delayed recall (6 objects), and logical memory (short
			story recall), $r = .27$ )
Andel et al. (2015)	810 (mean age = 83) from	Complexity of work with data and	Screening measure (MMSE, $r = .2633$ )
	the Swedish Level of Living	people in main occupation as	
	Survey and Swedish Panel	classified by 1970 US census.	
	Study of Living Condition		
	of the Oldest Old		
	(SWEOLD)		
Correa-Ribeiro et al.	624 aged 65+	Complexity of work with data and	Screening measure (MMSE, $r = .08$ )
(2013)		people in main occupation as	
		classified by 1970 US census.	
Finkel et al. (2009)	565  (mean age = 64.3)	Complexity of work with data and	Memory (DS, Picture Memory, and Names & Faces, r
		people in main occupation as	= .1925), executive function (Symbol Digit and
		classified by 1970 US census	Figure Identification, $r = .19$ ), and visuospatial ability

			(Figure Logic, Block Design, and Card Rotation, $r = \frac{28}{3}$
			.2832)
Forstmeier & Maercker	147 aged 60-94	Main Occupation as classified by	Global cognition score (comprised of memory (WAIS-
(2008)		O*Net to indicate motivational	III DS Forward and Backward), verbal fluency (animal
		and cognitive abilities	naming), and executive function (Stroop Color-Word
			Test and WAIS-III Digit-Symbol Substitution Test),
			r = .1320
Foubert-Samier et al.	331 (mean age = 76.1, SD =	Main occupation level as	Verbal fluency (IST of verbal semantic fluency, $r =$
(2012)	3.9)	classified into 10 levels according	.30)
		to the International Classification	
		of Occupations (1988)	
Frisoni et al. (1993)	524 aged over 70	Main occupation classified into 6	Screening measure (MMSE, $r = .49$ )
		categories from white collar	
		workers to housewives	
		workers to housewives	

Fritsch et al. (2007)	349 (mean age = 74.8, SD =	Main occupation mental demands	Screening measure (TICS-M, $r = .04$ ), memory (WMS-
	1)	assessed using the US department	R Logical Memory test, $r = .09$ ), and executive
		of Labour's Dictionary of	function (timed months of the year backwards and
		Occupations (DOT)	verbal fluency (animal naming), $r = .1011$ )
Gow, Avlund &	425 at age 60 from Glostrup	Intellectual challenge of current or	General cognition (comprising Digit Symbol, Block
Mortensen (2012)	1914 Cohort	last held occupation assessed at	Design, DS, and Picture Completion from the WAIS, r
		age 60 based on questionnaire	= .33)
		responses.	
Kesse-Guyot et al.	3083 (mean age = 65.4, SD	responses.  Main occupation categorised as	Global cognition(word recall, verbal fluency, forward
Kesse-Guyot et al. (2013)	3083 (mean age = 65.4, SD = 4.6) from the	•	Global cognition(word recall, verbal fluency, forward and backward digit span, and alternate trail-making test
•		Main occupation categorised as	
•	= 4.6) from the	Main occupation categorised as homemaker, manual worker, or	and backward digit span, and alternate trail-making test
•	= 4.6) from the Supplementation with	Main occupation categorised as homemaker, manual worker, or	and backward digit span, and alternate trail-making test scores were converted into T scores and combined, $r =$
•	= 4.6) from the Supplementation with Vitamins and Mineral	Main occupation categorised as homemaker, manual worker, or	and backward digit span, and alternate trail-making test scores were converted into T scores and combined, $r =$

Le Carrett et al. (2003)	1,022 (mean age =72.97) from Personnes Agées Quid study (PAQUID)	Main occupation categorised into seven categories from farm/domestic workers to intellectual professions	Screening measure (MMSE, $r = .06$ ), memory (BVRT and Paired Associates, $r = .0508$ ), executive function (Similarities, DSST, and verbal fluency (IST), $r = 006$ )
Leung et al. (2010)	512 (mean age = 74.5, SD = 7.1)	Main Occupation categorised into five categories from unskilled labourer to professional/company director	Screening measure (Chinese MMSE and ADAS-Cog, $r$ = .1926 and ), memory (word learning and delayed recall, $r$ = .14), working memory (DS forward, $r$ = .11), and executive function (DS backward and category fluency, $r$ = .0823)
Linderberger & Baltes	516 (mean age = 84.9, SD =	Occupational prestige of last job	General cognition (perceptual speed (Digit Letter,
(1997)	8.7) from Berlin Aging	held based on German	DSST, and Identical Pictured); reasoning (Figural
	Study (BASE)	occupational prestige rating	Analogies, Letter Series, and Practical Problems);
			memory (Activity Recall, Memory for Text, and Paired
			Associates); knowledge (Practical Knowledge, Spot-a-

Word, a	nd Vocabulary); and verbal fluency (Animals
and Lett	er S), $r = .41$ )

Mangione et al. (1993)	472 aged 65+	Main occupation categorised as	Screening measure (TICS, $r = .39$ )	
		service, skilled, and farm workers		
		to management or professionals		
Potter et al. (2006)	3,880 (mean age = $65.83$ ,	Main occupation characterised	Screening measure (TICS-M, $r = .31$ )	
	SD = 2.74) from Duke	using factor analysis of DOT		
	Twins Study of Aging	work characteristics to assess		
		complexity, their factor of general		
		intellect which included positive		
		loading for complexity with data		
		and people, reasoning, language,		
		mathematics aptitude, and greater		
		time spent		

Scherr et al. (1988)	3,564 – 3603 varies by analysis (aged 65+) from East Boston Study	Main occupation rated according to Duncan's socioeconomic index score	Memory (short story immediate recall, $r = .06$ 08) and executive function (DS backward, $r = .06$ )
Smart et al. (2014)	1,066 (mean age = 69.6, SD	Complexity of work with data and	Memory (WMS-III – Logical Memory (immediate and
	= 0.8) from 1936 Lothian	people in main occupation as	delayed), Spatial Span (forward and backward), and
	Birth Cohort	classified by 1970 US census	Verbal Paired Associated (immediate and delayed
			recall), $r = .2228$ ), executive function (Symbol
			Search, Digit Symbol, inspection time, and simple and
			choice reaction time, $r = .2527$ ), and general
			cognition (WAIS-III - Letter-Number Sequencing,
			Matrix Reasoning, Block Design, Digit Symbol, DS
			Backward, & Symbol Search, $r = .3236$ )
Staff et al. (2004)	99 aged 79	Occupation (highest obtained) as	Memory (AVLT, $r = .15$ ) and general cognition (RPM,
		classified by the UK's Office of	r = .28)
		Population Statistics (1990)	

Then et al. (2014)	1,468 aged 60 -79 from the	Occupational mental demands	Screening measure (MMSE, $r = .21$ ), executive
	Leipzig Research Centre for	before retirement classed as high,	function (TMT-B, verbal fluency, $r = .1415$ )
	Civilization Diseases	medium or low determined using	
		O*NET descriptor variables of	
		"Cognitive Activities" at work	
Cognitively-stimulating l	leisure activities		
Andel et al. (2015)	810 (mean age = 83) from the	Cognitive activities in mid-life	Screening measure (MMSE, $r = .28$ )
	Swedish Level of Living	(e.g. how often they read books or went to the theatre)	
	Survey and Swedish Panel	went to the theatre)	
	Study of Living Condition of		
	the Oldest Old (SWEOLD)		
Arbuckle et al. (1986)	285 (median age = 71.6)	Current cognitive activity (rated	Memory (index comprising free recall (of 9 words),
		for degree of intellectual effort by	forward digit span, and correct factual and inferential
		10 graduate students)	

			answers (10 multiple choice Qs. based on short story), $r = .49$ )
Ashley (2008)	63 (mean age = 77.3)	Current cognitive activity assessed by Activity Questionnaire (Hultsch et al., 1999)	Executive function (choice reaction time, $r = .25$ ) and general cognition (word recall, letter series, and DSST, $r = .28$ )
Barnes et al. (2006)	108 (mean age = 72.6)	Participation in cognitively demanding activities at age 6 (3 items), age 12 (6 items), 18 (6 items), age 40 (5 items) and currently (5 items) from daily to once a year or less.	General cognition (includes MMSE, memory (East Boston Story), perceptual speed (SDMT) and working memory (DS Backward), $r = .21$ )
Brand (2003) Dissertation	94 (mean age = 72.17)	Current cognitive activity - Frequency of crossword puzzles, reading frequency, and amount	Memory (CVLT, <i>r</i> = .0432)

read. Assessed with a mental	
exercise survey	

		exercise survey	
Brewster et al. (2014)	333 aged 60+ from UC Davis	Current cognitive activity and at	Memory (word list learning, $r = .0514$ ) and
	Aging Diversity Cohort	age 40 assessed by the Life	executive function (category and phonemic fluency,
		Experiences and Activities Form	DS backward, visual-span backward, and list sorting,
		(LEAF)	r = .0515
Eskes et al. (2010)	42 (mean age = 65.1) All	Current cognitive activity	Memory (Bushke SRT, Medical Complex of Georgia
	female	questionnaire calculated total no	Complex Figures Test, $r =0239$ ), executive
		of activities (diversity) and total	function (DSMT and D-KEFS Color-Word
		time spent in activities (duration)	Interference Test, Auditory Consonant Trigrams
			Test, D-KEFS Card Sorting Test, and verbal fluency,
			r = 046), language (D-KEFS verbal fluency C-
			Score and WASI vocabulary, $r =0149$ ),
			visuospatial ability (WASI Matrix Reasoning and
			Benton Line Orientation, $r = .0530$ ), , and global

			cognition score which comprised all tests ( $r = .01$ 49).
Ferreira et al. (2015)	3,515 aged 65+	Current cognitive activity – participation in four different activities (e.g. crosswords)	Memory (paired associate learning, $r = .0511$ ), working memory (DS forward and spatial search task, $r = .0115$ ), and language (grammatical reasoning, $r = .0311$ )
Foubert-Samier et al.	331 (mean age = 76.1, SD =	A self-administered questionnaire	Verbal fluency (IST, $r = .40$ )
(2012)	3.9)	to assess participation in leisure activities in mid-life and currently.  The measure comprised 30 activities, 17 of which related to cognitively stimulating activities.  Only the analyses of these 17 are included here.	

Fritsch et al. (2007)	349 (mean age = 74.8, SD =	Participation in mental, physical	Screening measure (TICS-M, $r = .18$ ), memory
	1)	and social activities in high	(WMS-R Logical Memory test, $r = .13$ ), and
		school. Only mental activities	executive function (timed months of the year
		included.	backwards and animal verbal fluency, $r = .1127$ )
Gallucci et al. (2009)	668 aged 70+ from the	Current reading activity (none vs	Screening measure (MMSE, $r = .46$ )
	Treviso Longeva Study	reading newspapers or novels)	
Gilhooly et al. (2007)	145 (mean = 78.19)	Cognitive activities in the last	Executive function (DSST, $r = .26$ )
		year, e.g. reading, playing chess or	
		cards	
Gow, Avlund, &	576 aged 75 from Glostrup	Current cognitive activity in 17	Executive function (Digit Symbol and DS backward,
Mortensen (2014)	1914 Cohort	activities (e.g. going to theatre,	r = .1628)
		travel, adult education)	

Gow, Corley et al.	778 (mean age = $69.5$ ) from	Current cognitive activity –	Memory (Logical Memory immediate and delayed
(2012)	the 1936 Lothian Birth	questionnaire combined both	recall, Spatial Span, Verbal Paired Associates
	Cohort	social and leisure (e.g. reading	immediate and delayed recall, $r = .21$ ) and executive
		and visits to friends/family)	function (Symbol Search, Digit Symbol, choice
			reaction time, inspection time, simple reaction time, $r$
			= .19)
Hill, Whalin et al. (1995)	253 aged 75-96 (mean age =	Current cognitive activity –	Memory (immediate, organised, and cued recall, $r =$
	84.1, SD = 5.06)	frequency of activities (e.g.	.2133)
		attending concerts and adult	
		education classes	
Ho & Chan (2005)	204 (mean age = 68.33, SD =	Current cognitive activity	General cognition (Chinese version of the Mattis
	7.41)	measured on a 9 point scale from	Dementia Rating Scale, $r = .59$ )
		never to everyday (e.g. reading,	
		attending classes)	

Hultsch et al. (1993) 484 (mean age = 69.2) fromVictoria Longitudinal Study Jefferson et al. (2011) 951 aged 54-100

Current cognitive activity with 16 items pertaining to integrative information processing, 25 to novel information processing, and 4 regarding physical activity

Cognitive activity - early-, mid-, and late-life cognitive activities were measured using the CAS, a structured questionnaire assessing the frequency of participation in specific cognitive activities (Wilson et al. 2007).

Memory (immediate word list and prose recall, r = .18-.26), working memory (word span, r = .14), executive function (semantic processing speed and verbal fluency, r = .22-.27), and language (naming, r = .21)

Memory (WMS-R Logical Memory Story A, East Boston Story, word list learning, BNT and verbal fluency, r = ..08-.17) working memory (WMS-R Digit Span, Digit Ordering, r = .08-.17), executive function (SDMT, number comparison, Stroop Color-Word, r = .14-.38), visuospatial ability which was included in overall cognition only (line orientation and RPM, r = .08-.17), and global cognition (z-score average from all domains, r = .11-.27)

Lin et al. (2012)	342 aged 60-84 from	Current cognitive activity –	Memory (word list immediate and delayed, $r = .13$ )
	MINDUS	frequency of participation in	and executive function (DS backward, category
		activities (e.g. reading, playing	fluency, Number Series, and Backward Counting, $r =$
		games)	.35)
Mueller et al. (2013)	44 (mean age = 75.3)	Current cognitive activity	Memory (CVLT, $r = .2837$ ) and executive function
		assessed as frequent activity (FA),	(D-KEFS 20 Question Subtest, $r = .2231$ )
		higher cognitive load activity	
		(HC), and activity maintenance	
		(AM, decrease during the past	
		year)	
Murphy & O'Leary	99 aged 60-83	Current cognitive activity as	Memory (immediate and delayed recall from the
(2009)		measured by the number of hours	CERAD, $r = .0110$ )
		spent in activities daily.	

general cognition (combines tests, r = -.11-.33)

Newson & Kemps	755 (Mean age at time 1 =	Current cognitive activity as	Memory (incidental recall, $r = .24$ ), executive
(2005)	77.4) from the Australian	measured by the Adelaide	function (WAIS-R DSST and verbal fluency, $r = .24$ -
	Longitudinal Study of Aging	Activities Profile	.28), and language (picture naming, $r = .22$ ),
	(ALSA)		
Parisi et al. (2009)	189 (mean age = 72.9, SD =	Current cognitive activity assessed	Working memory (Letter-Number Sequencing, $r =$
	8.2)	as literacy, competitive leisure,	.0725), executive function (Letter and Pattern
		travel, and mathematical/	Comparison, Finding As, Identical Pictures, Letter
		accounting activities	Sets, Figure Classification, Everyday Problem
			Solving, Substitutes Uses, Ornamentation, and
			Opposites Test, Alternate Uses, Word Associations,
			and FAS, $r =0933$ ), visuospatial ability (Card
			Rotation and Hidden Patterns, $r =0137$ ), and

Parslow et al. (2006)	2,522 aged 60-64 from the	Cognitive activity undertaken in	Executive function (SDMT, $r = .1926$ )
	Personality and Total Health	past 6 months assessed by	
	(PATH) Through Life study	RIASEC activity questionnaire	
Saczynski et al. (2008)	1,787  (mean age = 75.7)  from	Current cognitive activity assessed	Memory (CVLT, $r = .25$ ) and executive function (DS
	the Age, Gene/Environment	by participation in 10 activities	backward, Cantab Spatial Working Memory Test,
	Susceptibility Study (AGES-	(e.g. playing games, attending a	and Stroop – Word-Color Interference, $r = .2842$ )
	Reykjavik)	performance)	
(2.00a)		Commant on quiting activity	Comment or mities (Dlank Design and Matrix
Sheres (2002)	77 (mean = $77.8$ , SD = $4.7$ )	Current cognitive activity –	General cognition (Block Design and Matrix
Sheres (2002)	77 (mean = $77.8$ , SD = $4.7$ )	Current cognitive activity – frequency of activity (e.g. reading.	General cognition (Block Design and Matrix Reasoning from WASI, $r = .26$ )
Sheres (2002) Thesis	77 (mean = $77.8$ , SD = $4.7$ )	frequency of activity (e.g. reading,	Reasoning from WASI, $r = .26$ )
, ,	77 (mean = 77.8, SD = 4.7)		· · · · · · · · · · · · · · · · · · ·
, ,	77 (mean = 77.8, SD = 4.7) 115 aged 55-89	frequency of activity (e.g. reading,	· · · · · · · · · · · · · · · · · · ·
Thesis		frequency of activity (e.g. reading, playing bridge or chess)	Reasoning from WASI, $r = .26$ )
Thesis		frequency of activity (e.g. reading, playing bridge or chess)  Current cognitive activity –	Reasoning from WASI, $r = .26$ )  Memory (Twelve Words Test immediate and delayed
Thesis		frequency of activity (e.g. reading, playing bridge or chess)  Current cognitive activity –  frequency of socio-cultural	Reasoning from WASI, $r$ = .26)  Memory (Twelve Words Test immediate and delayed recall and Everyday Memory Test, $r$ = .2139),

Vaughan et al. (2014)	393 (mean age = 81.21, SD = 4.26) from the Women's Health Initiative Study	Cognitive activities over the prior 12 months measured using the CAS, a structured questionnaire assessing the frequency of	General cognition (combination of TICS, category verbal fluency, TMT-B, and DS Backward, $r = .30$ )
		participation in specific cognitive activities (Wilson et al. 1999).	
Vemuri et al. (2014)	1,995 (mean age = $78.9$ ) from	Mid- and late life cognitive	General cognition (average of z-transformation from
	the Mayo Clinic Study of	activity (participation in 10 items)	4 domains – executive function (TMT-B, DSST,
	Aging (MCSA)		category fluency), language (BNT), memory
			(WMS_R Logical Memory-II, Visual Reproduction-
			II, and AVLT – all delayed recall), $r = .22$ )
Wilson et al. (1999)	6,162 participants (mean age	Current cognitive activity –	Memory (immediate and delayed recall of orally
	= $75$ , SD = $7.2$ ) from baseline	frequency of participation in 7	presented story), executive function (SDMT) and
	of Chicago Health and Aging	areas, e.g. listening to radio,	global cognition (summary measure using z scores
	Project (CHAP)	reading, or playing games, rated	from each of the 4 tests, $r = .0454$ )
		for cognitive intensity involved.	

Wirth et al. (2014)	92 aged 60-90 from the	Participation in cognitively	Global cognition (comprises episodic memory –
	Berkley Aging Cohort (BAC)	demanding activities at age 6 (3	CVLT, Logical Memory recall of story A and B, and
		items), age 12 (6 items), 18 (6	Visual Reproduction delayed recall and recognition,
		items), age 40 (5 items) and	and executive function - Stroop Test, COWAT,
		currently (5 items) from daily to	TMT-B, and Digit Symbol Coding Test, $r =0921$ )
		once a year or less	
Combined Measures			
Comotted Medsures			
Gonzales (2013)	90 participants (mean age =	Lifetime of Experiences	Screening measure (MMSE, $r = .19$ )
	75.98, SD = $7.05$ )	Questionnaire (Valenzuela &	
		Sachdev, 2007)	
Opdebeeck et al. (2014)	236 (mean age = 70.86, SD =	Lifetime of Experiences	Screening measure (MoCA, $r = .32$ ), memory
	7.66)	Questionnaire	(RBMT short story recall immediate and delayed, $r =$
			.3336), and executive function (verbal fluency
			.55 .50), and encount of famour (vertail maching

Puccioni & Vallesi	17 (mean age = $73$ )	Cognitive Reserve Index	Executive function (Stroop, $r = .42$ )
(2012a)		questionnaire (CRIq)	
Puccioni &Vallesi 2	23 (mean age = 71)	Cognitive Reserve Index	Executive function (Stroop, $r = .45$ )
(2012b)		questionnaire (CRIq)	
Then et al. (2014)	1,438 aged 60 -79 from the	Education/occupation combined	Screening measure (MMSE, $r = .27$ ) and executive
	Leipzig Research Centre for		function (TMT-B, verbal fluency, $r = .2123$ )
	Civilization Diseases		
Vemuri et al. (2014)	1,995 (mean age = 78.9) from	Education/occupation combined	General cognition (average of z-transformation from
	Mayo Clinic Study of Aging		4 domains – executive function (TMT-B, DSST,
	(MCSA)		category fluency), language (BNT), memory (WMS-
			R Logical Memory-II, Visual Reproduction-II, and
			AVLT – all delayed recall), $r = .38$ )

Note: MMSE, Mini Mental State Exam; RPM, Raven's Progressive Matrices; DS, digit span; BNT, Boston Naming Test; CVLT, California Verbal Learning Test; DSST, digit symbol substitution test; TMT, Trail Making Test; SDMT, symbol digit modalities test; RBANS, Repeatable Battery for the Assessment of Neuropsychological Status; SRT, Selective Reminding Test; SLMT, symbol letter modalities test; FOME, Fuld Object Memory Evaluation; COWAT,

Controlled Oral Word Association Test; TICS-M, Telephone Inventory for Cognitive Status - Modified; IST, Isaac's Set Test of verbal fluency; WMS-R, Wechsler Memory Scale - Revised; HVLT, Hopkin's Verbal Learning Test; CalCAP, California Computerised Assessment Battery; ADAS-Cog, Alzheimer's Disease Assessment Scale cognitive subtest; HSCT, Hayling Sentence Completion Test; WCST, Wisconsin Card Sorting Task; ACE, Addenbrooke's Cognitive Examination; AMSET, Associative Memory with Semantic Enhancement; VVLT, visual verbal learning test; AVLT, auditory verbal learning test; VLT-R, Verbal Learning Test- Revised; RBMT, Rivermead Behavioural Memory Test; CERAD, Consortium to Establish a Registry for Alzheimer's disease Neuropsychological Battery; D-KEFS, Delis-Kaplan Executive Function System; WASI, Wechsler Abbreviated Scale of Intelligence; BVRT, Benton Visual Retention Test

## References for studies included in the meta-analyses

- Aartsen, M. J., Smits, C. H., van Tilburg, T., Knipscheer, K. C., & Deeg, D. J. (2002).

  Activity in older adults: cause or consequence of cognitive functioning? A longitudinal study on everyday activities and cognitive performance in older adults.

  The Journals of Gerontology. Series B, Psychological Sciences and Social Sciences, 57, 153-62. doi: 10.1093/geronb/57.2.P153
- Acevedo, A., Loewenstein, D. A., Agrón, J., & Duara, R. (2007). Influence of sociodemographic variables on neuropsychological test performance in Spanish-speaking older adults. *Journal of Clinical and Experimental Neuropsychology*, 29, 530-544. doi: 10.1080/13803390600814740
- Aiken Morgan, A. T., Sims, R. C., & Whitfield, K. E. (2010). Cardiovascular health and education as sources of individual variability in cognitive aging among African Americans. *Journal of Aging and Health, 22*, 477-503. doi: 10.1177/0898264310361627
- Al Hazzouri, A. Z., Haan, M. N., Galea, S., & Aiello, A. E. (2011). Life-course exposure to early socioeconomic environment, education in relation to late-life cognitive function among older Mexicans and Mexican Americans. *Journal of Aging and Health, 23*, 1027-1049. doi: 10.1177/0898264311421524
- Albert, S. M., & Teresi, J. A. (1999). Reading ability, education, and cognitive status assessment among older adults in Harlem, New York city. *American Journal of Public Health*, 89, 95-2. doi:10.2105/AJPH.89.1.95
- Andel, R., Silverstein, M., & Kareholt, I. (2015). The role of midlife occupational complexity and leisure activity in late-life cognition. *The Journals of Gerontology*. *Series B, Psychological Sciences and Social Sciences*, 70, 314-321 doi: 10.1093/geronb/gbu110

- Angel, L., Fay, S., Bouazzaoui, B., Baudouin, A., & Isingrini, M. (2010). Protective role of educational level on episodic memory aging: An event-related potential study. *Brain and Cognition*, 74, 312-323. doi:10.1016/j.bandc.2010.08.012
- Anstey, K. J., Hofer, S. M., & Luszcz, M. A. (2003). A latent growth curve analysis of latelife sensory and cognitive function over 8 years: evidence for specific and common factors underlying change. *Psychology and Aging, 18,* 714-726. doi: 10.1037/0882-7974.18.4.714
- Arbuckle, T. Y., Gold, D., & Andres, D. (1986). Cognitive functioning of older people in relation to social and personality variables. *Psychology and Aging, 1,* 55-62. doi: 10.1037/0882-7974.1.1.55
- Ardila, A., Ostrosky-Solis, F., Rosselli, M., & Gómez, C. (2000). Age-related cognitive decline during normal aging: the complex effect of education. *Archives of Clinical Neuropsychology*, *15*, 495-513. doi: 10.1016/S0887-6177(99)00040-2
- Ashley, J. G. (2008). *The relation between different forms of activity and cognition in older adults*. (Doctoral dissertation) Southern Illinois University Carbondale. Retrieved from http://search.proquest.com/docview/21069568?accountid=14874
- Barnes, D. E., Tager, I. B., Satariano, W. A., & Yaffe, K. (2004). The relationship between literacy and cognition in well-educated elders. *The Journals of Gerontology. Series A, Biological Sciences and Medical Sciences*, *59*, 390-395. doi: 10.1093/gerona/59.4.M390
- Barnes, L. L., Wilson, R. S., de Leon, C. F., & Bennett, D. A. (2006). The relation of lifetime cognitive activity and lifetime access to resources to late-life cognitive function in older African Americans. *Aging, Neuropsychology and Cognition, 13*, 516-528. doi: K8005180774554M6

- Barnes, L. L., Wilson, R. S., Hebert, L. E., Scherr, P. A., Evans, D. A., & Mendes de Leon,
  C. F. (2011). Racial differences in the association of education with physical and
  cognitive function in older blacks and whites. *The Journals of Gerontology. Series B,*Psychological Sciences and Social Sciences, 66, 354-363. doi:
  10.1093/geronb/gbr016
- Beatty, W. W., Mold, J. W., & Gontkovsky, S. T. (2003). RBANS performance: influences of sex and education. *Journal of Clinical and Experimental Neuropsychology*, 25, 1065-1069. doi:10.1076/jcen.25.8.1065.16732
- Brand, H. L. S. (Oct 2002). The relationship between social-cognitive factors and physical health on memory function in older adults. (Doctoral dissertation) Saint Louis University. Retrieved from http://search.proquest.com/docview/619951287?accountid=14874
- Brewster, P. W., Melrose, R. J., Marquine, M. J., Johnson, J. K., Napoles, A., MacKay-Brandt, A., . . . Mungas, D. (2014). Life experience and demographic influences on cognitive function in older adults. *Neuropsychology*, *28*, 846-858. doi: 10.1037/neu0000098
- Capitani, E., Barbarotto, R., & Laiacona, M. (1996). Does education influence the agerelated cognitive decline? A further inquiry. *Developmental Neuropsychology*, 12, 231-240. doi: 10.1080/87565649609540648
- Carmelli, D., Swan, G. E., & Cardon, L. R. (1995). Genetic mediation in the relationship of education to cognitive function in older people. *Psychology and Aging, 10*, 48-53. doi: 10.1037/0882-7974.10.1.48
- Christensen, H., Batterham, P. J., Mackinnon, A. J., Anstey, K. J., Wen, W., & Sachdev, P. S. (2009). Education, atrophy, and cognitive change in an epidemiological sample in

- early old age. *The American Journal of Geriatric Psychiatry, 17*, 218-226. doi: 10.1097/JGP.0b013e3181961a84
- Christensen, H., Korten, A., Jorm, A. F., Henderson, A. S., Scott, R., & Mackinnon, A. J. (1996). Activity levels and cognitive functioning in an elderly community sample.

  \*Age and Ageing, 25, 72-80. doi: 10.1093/ageing/25.1.72
- Christofoletti, G., Oliani, M. M., Stella, F., Gobbi, S., & Bucken Gobbi, L. T. (2007). The influence of schooling on cognitive screening test in the elderly. *Dementia & Neuropsychologia*, 1, 46-51.
- Constantinidou, F., Christodoulou, M., & Prokopiou, J. (2012). The effects of age and education on executive functioning and oral naming performance in Greek Cypriot adults: the neurocognitive study for the aging. *Folia Phoniatrica Et Logopaedica*, *64*, 187-198. doi: 10.1159/000340015
- Correa Ribeiro, P. C., Lopes, C. S., & Lourenco, R. A. (2013). Complexity of lifetime occupation and cognitive performance in old age. *Occupational Medicine*, *63*, 556-562. doi: 10.1093/occmed/kgt115
- Davey, A., Dai, T., Woodard, J. L., Miller, L. S., Gondo, Y., Johnson, M. A., . . . Georgia Centenarian. (2013). Profiles of cognitive functioning in a population-based sample of centenarians using factor mixture analysis. *Experimental Aging Research*, *39*, 125-144. doi: 10.1080/0361073X.2013.761869
- de Araújo Carvalho, S., Barreto, S. M., Guerra, H. L., & Gama, A. C. C. (2009). Oral language comprehension assessment among elderly: a population based study in Brazil. *Preventive Medicine*, 49, 541-545. doi: 10.1016/j.ypmed.2009.09.017
- de Oliveira Wachholz, T. B., & Yassuda, M. S. (2011). The interpretation of proverbs by elderly with high, medium and low educational level: Abstract reasoning as an aspect of executive functions. *Dementia & Neuropsychologia*, *5*, 31-37.

- de Souza-Talarico, J. N., Caramelli, P., Nitrini, R., & Chaves, E. C. (2007). The influence of schooling on working memory performance in elderly individuals without cognitive decline. *Dementia & Neuropsychologia*, *1*, 276-281.
- Denny, N. W., & Thissen, D. M. (1983). Determinants of cognitive abilities in the elderly.

  The International Journal of Aging & Human Development, 16, 29-41.

  doi:10.2190/KBVP-A13Q-433A-T8VY
- Diehl, M., Willis, S. L., & Schaie, K. W. (1995). Everyday problem solving in older adults: observational assessment and cognitive correlates. *Psychology and Aging, 10*, 478-491. doi: 10.1037/0882-7974.10.3.478
- Dorbath, L., Hasselhorn, M., & Titz, C. (2013). Effects of education on executive functioning and its trainability. *Educational Gerontology*, *39*, 314-325. doi: 10.1080/03601277.2012.700820
- Duff, K., Shprecher, D., Litvan, I., Gerstenecker, A., Mast, B., & ENGENE investigators.
  (2013). Correcting for demographic variables on the modified telephone interview for cognitive status. *The American Journal of Geriatric Psychiatry*, 22, 1438-1443 doi: 10.1016/j.jagp.2013.08.007
- Elias, M. F., Elias, P. K., D'Agostino, R. B., Silbershatz, H., & Wolf, P. A. (1997). Role of age, education, and gender on cognitive performance in the Framingham heart study: community-based norms. *Experimental Aging Research*, *23*, 201-235. doi: 10.1080/03610739708254281
- Eskes, G. A., Longman, S., Brown, A. D., McMorris, C. A., Langdon, K. D., Hogan, D. B., & Poulin, M. (2010). Contribution of physical fitness, cerebrovascular reserve and cognitive stimulation to cognitive function in post-menopausal women. *Frontiers in Aging Neuroscience*, *2*, 137. doi: 10.3389/fnagi.2010.00137

- Ferreira, N., Owen, A., Mohan, A., Corbett, A., & Ballard, C. (2015). Associations between cognitively stimulating leisure activities, cognitive function and age-related cognitive decline. *International Journal of Geriatric Psychiatry*, *30*, 422-430 doi: 10.1002/gps.4155
- Fillenbaum, G. G., Hughes, D. C., Heyman, A., George, L. K., & Blazer, D. G. (1988).

  Relationship of health and demographic characteristics to mini-mental state examination score among community residents. *Psychological Medicine*, *18*, 719-726. doi: 10.1017/S0033291700008412
- Finkel, D., Andel, R., Gatz, M., & Pedersen, N. L. (2009). The role of occupational complexity in trajectories of cognitive aging before and after retirement. *Psychology and Aging*, 24, 563-573. doi: 10.1037/a0015511
- Fisk, J. D., Rockwood, K., Hondas, B., Tripp, D. A., Stadnyk, K., & Doble, S. E. (1995).

  Cognitive screening in a population-based sample of community-living elderly:

  effects of age and education on the construct of cognitive status. *International Journal of Geriatric Psychiatry*, 10, 687-694. doi: 10.1002/gps.930100809
- Forstmeier, S. & Maercker, A. (2008). Motivational reserve: Lifetime motivational abilities contribute to cognitive and emotional health in old age. *Psychology and Aging, 23*, 886-899. doi: 10.1037/a0013602
- Foubert-Samier, A., Catheline, G., Amieva, H., Dilharreguy, B., Helmer, C., Allard, M., & Dartigues, J. (2012). Education, occupation, leisure activities, and brain reserve: A population-based study. *Neurobiology of Aging*, *33*, 423.e15–423.e25. doi:10.1016/j.neurobiologing.2010.09.023
- Fournet, N., Roulin, J. L., Vallet, F., Beaudoin, M., Agrigoroaei, S., Paignon, A., . . . Desrichard, O. (2012). Evaluating short-term and working memory in older adults:

- French normative data. *Aging & Mental Health, 16*, 922-930. doi: 10.1080/13607863.2012.674487
- Frisoni, G. B., Rozzini, R., Bianchetti, A., & Trabucchi, M. (1993). Principal lifetime occupation and MMSE score in elderly persons. *Journal of Gerontology*, 48, S310-S314. doi: 10.1093/geronj/48.6.S310
- Fritsch, T., McClendon, M. J., Smyth, K. A., Lerner, A. J., Friedland, R. P., & Larsen, J. D. (2007). Cognitive functioning in healthy aging: the role of reserve and lifestyle factors early in life. *The Gerontologist*, 47, 307-322. doi: 10.1093/geront/47.3.307
- Gallucci, M., Antuono, P., Ongaro, F., Forloni, P. L., Albani, D., Amici, G. P., & Regini, C. (2009). Physical activity, socialization and reading in the elderly over the age of seventy: what is the relation with cognitive decline? Evidence from the Treviso Longeva (TRELONG) study. *Archives of Gerontology and Geriatrics*, 48, 284-286. doi: 10.1016/j.archger.2008.02.006
- Ganguli, M., Snitz, B. E., Lee, C., Vanderbilt, J., Saxton, J. A., & Chang, C. H. (2010). Age and education effects and norms on a cognitive test battery from a population-based cohort: the Monongahela–Youghiogheny healthy aging team. *Aging & Mental Health*, *14*, 100-107. doi: 10.1080/13607860903071014
- Gilhooly, K. J., Gilhooly, M. L., Phillips, L. H., Harvey, D., Murray, A., & Hanlon, P.
   (2007). Cognitive aging: activity patterns and maintenance intentions. *The International Journal of Aging & Human Development*, 65, 259-280. doi: 10.2190/AG.65.3.d
- Giogkaraki, E., Michaelides, M. P., & Constantinidou, F. (2013). The role of cognitive reserve in cognitive aging: results from the neurocognitive study on aging. *Journal of Clinical and Experimental Neuropsychology*, *35*, 1024-1035. doi: 10.1080/13803395.2013.847906

- Giordano, N., Tikhonoff, V., Palatini, P., Bascelli, A., Boschetti, G., De Lazzari, F., . . .

  Casiglia, E. (2012). Cognitive functions and cognitive reserve in relation to blood pressure components in a population-based cohort aged 53 to 94 years. *International Journal of Hypertension*, Article ID: 274851. doi:10.1155/2012/274851
- Glymour, M. M., Weuve, J., Berkman, L. F., Kawachi, I., & Robins, J. M. (2005). When is baseline adjustment useful in analyses of change? An example with education and cognitive change. *American Journal of Epidemiology, 162*, 267-278. doi: 10.1093/aje/kwi187
- Gonzales, C. (2012). The psychometric properties of the lifetime experience questionnaire (LEQ) in older American adults. (Doctoral dissertation) University of North Carolina, Greensboro. Retrieved from http://libres.uncg.edu/ir/uncg/listing.aspx?id=8629
- Gonzalez, H. M., Tarraf, W., Bowen, M. E., Johnson-Jennings, M. D., & Fisher, G. G. (2013). What do parents have to do with my cognitive reserve? Life course perspectives on twelve-year cognitive decline. *Neuroepidemiology*, *41*, 101-109. doi: 10.1159/000350723
- Gow, A. J., Avlund, K., & Mortensen, E. L. (2012). Occupational characteristics and cognitive aging in the Glostrup 1914 cohort. *The Journals of Gerontology, Series B, Psychological Sciences and Social Sciences, 69*, 228-236. doi: 10.1093/geronb/gbs115
- Gow, A. J., Avlund, K., & Mortensen, E. L. (2014). Leisure activity associated with cognitive ability level, but not cognitive change. *Frontiers in Psychology, 5*, 1176. doi: 10.3389/fpsyg.2014.01176

- Gow, A. J., Corley, J., Starr, J. M., & Deary, I. J. (2012). Reverse causation in activity-cognitive ability associations: The Lothian Birth Cohort 1936. *Psychology and Aging*, *27*, 250-255. doi: 10.1037/a0024144
- Hashimoto, R., Meguro, K., Lee, E., Kasai, M., Ishii, H., & Yamaguchi, S. (2006). Effect of age and education on the trail making test and determination of normative data for Japanese elderly people: The Tajiri project. *Psychiatry and Clinical Neurosciences*, 60, 422-428. doi: 10.1111/j.1440-1819.2006.01526.x
- Hassing, L., Wahlin, Å., & Bäckman, L. (1998). Minimal influence of age, education, and gender on episodic memory functioning in very old age: a population-based study of nonagenarians. *Archives of Gerontology and Geriatrics*, 27, 75-57. doi: 10.1016/S0167-4943(98)00101-0
- Hill, R. D., Wahlin, Å., Winblad, B., & Bäckman, L. (1995). The role of demographic and life style variables in utilizing cognitive support for episodic remembering among very old adults. *The Journals of Gerontology. Series B, Psychological Sciences and Social Sciences*, 50B, 219-227. doi: 10.1093/geronb/50B.4.P219
- Ho, Y., & Chan, A. S. (2005). Comparing the effects of mahjong playing and reading on cognitive reserve of the elderly. *Journal of Psychology in Chinese Societies*, 6, 5-26.
- Hultsch, D. F., Hammer, M., & Small, B. J. (1993). Age differences in cognitive performance in later life: Relationships to self-reported health and activity life style.

  \*Journal of Gerontology, 48, 1-11. doi: 10.1093/geronj/48.1.P1
- Inouye, S. K., Albert, M. S., Mohs, R., Sun, K., & Berkman, L. F. (1993). Cognitive performance in a high-functioning community-dwelling elderly population. *Journal of Gerontology*, 48, M146-M151. doi: 10.1093/geronj/48.4.M146
- Inzelberg, R., Schechtman, E., Abuful, A., Masarwa, M., Mazarib, A., Strugatsky, R., . . . Friedland, R. P. (2007). Education effects on cognitive function in a healthy aged

- Arab population. *International Psychogeriatrics*, *19*, 593-603. doi: 10.1017/S1041610206004327
- Jefferson, A. L., Gibbons, L. E., Rentz, D. M., Carvalho, J. O., Manly, J., Bennett, D. A., & Jones, R. N. (2011). A life course model of cognitive activities, socioeconomic status, education, reading ability, and cognition. *Journal of the American Geriatrics Society*, *59*, 1403-1411. doi:10.1111/j.1532-5415.2011.03499.x
- Kaplan, R. F., Cohen, R. A., Moscufo, N., Guttmann, C., Chasman, J., Buttaro, M., . . .
   Wolfson, L. (2009). Demographic and biological influences on cognitive reserve.
   Journal of Clinical and Experimental Neuropsychology, 31, 868-876. doi: 10.1080/13803390802635174
- Kempler, D., Teng, E. L., Dick, M., Taussig, I. M., & Davis, D. S. (1998). The effects of age, education, and ethnicity on verbal fluency. *Journal of the International Neuropsychological Society*, 4, 531-538. doi: 10.1017/S1355617798466013
- Kesse-Guyot, E., Andreeva, V. A., Lassale, C., Ferry, M., Jeandel, C., Hercberg, S., . . . SU.VI.MAX 2 Research Group. (2013). Mediterranean diet and cognitive function:

  A French study. *The American Journal of Clinical Nutrition*, *97*, 369-376.

  doi:10.3945/ajcn.112.047993
- Kilander, L., Nyman, H., Boberg, M., & Lithell, H. (1997). Cognitive function, vascular risk factors and education. A cross-sectional study based on a cohort of 70-year-old men. *Journal of Internal Medicine*, 242, 313-321. doi: 10.1046/j.1365-2796.1997.00196.x
- Kim, H. C., Lee, K. S., Cheong, H. K., Lee, Y. H., Lim, K. Y., Chung, Y. K., . . . Hong, C.
  H. (2011). Application of health concern and activity model on cognition in the elderly. *Archives of Gerontology and Geriatrics*, 53, 187-91. doi: 10.1016/j.archger.2010.09.001

- Lang, I. A., Llewellyn, D. J., Langa, K. M., Wallace, R. B., Huppert, F. A., & Melzer, D. (2008). Neighborhood deprivation, individual socioeconomic status, and cognitive function in older people: analyses from the English Longitudinal Study of Ageing. *Journal of the American Geriatrics Society*, 56, 191-198. doi: 10.1111/j.1532-5415.2007.01557.x
- Le Carret, N., Lafont, S., Letenneur, L., Dartigues, J., Mayo, W., & Fabrigoule, C. (2003).

  The effect of education on cognitive performances and its implication for the constitution of the cognitive reserve. *Developmental Neuropsychology*, 23, 317-337. doi: 10.1207/S15326942DN2303 1
- Lee, Y. S., Lee, C. L., & Yang, H. T. (2012). Effects of aging and education on false memory. *International Journal of Aging & Human Development*, 74, 287-298.
- Leggett, A., Zarit, S. H., Hoang, C. N., & Nguyen, H. T. (2013). Correlates of cognitive impairment in older Vietnamese. *Aging & Mental Health*, *17*, 915-923. doi: 10.1080/13607863.2013.799116
- Leung, G. T. Y., Fung, A. W. T., Tam, C. W. C., Lui, V. W. C., Chiu, H. F. K., Chan, W. M., & Lam, L. C. W. (2010). Examining the association between participation in late-life leisure activities and cognitive function in community-dwelling elderly
  Chinese in Hong Kong. *International Psychogeriatrics*, 22, 2-13. doi: 10.1017/S1041610209991025
- Li, X., Wang, K., Wang, F., Tao, Q., Xie, Y., & Cheng, Q. (2013). Aging of theory of mind: the influence of educational level and cognitive processing. *International Journal of Psychology*, 48, 715-727. doi: 10.1080/00207594.2012.673724
- Lin, F., Friedman, E., Quinn, J., Chen, D., & Mapstone, M. (2012). Effect of leisure activities on inflammation and cognitive function in an aging sample. *Archives of Gerontology and Geriatrics*, *54*, 398-404. doi: 10.1016/j.archger.2012.02.002

- Lin, H., Chan, R. C. K., Zheng, L., Yang, T., & Wang, Y. (2007). Executive functioning in healthy elderly Chinese people. Archives of Clinical Neuropsychology, 22, 501-511. doi: 10.1016/j.acn.2007.01.028
- Linderberger, U., & Baltes, P. B. (1997). Intellectual functioning in old and very old age: cross-sectional results from the Berlin aging study. *Psychology and Aging, 12*, 410-432. doi: 10.1037/0882-7974.12.3.410
- Luszcz, M. A. (1992). Predictors of memory in young-old and old-old adults. *International Journal of Behavioral Development*, *15*, 147-166. doi: 10.1177/016502549201500108
- Lyman, G. H., & Kuderer, N. M. (2005). The strengths and limitations of meta-analyses based on aggregate data. *BMC medical research methodology*, *5*, 14-21. doi: 10.1186/1471-2288-5-14
- Mangione, C. M., Seddon, J. M., Cook, E. F., Krug, J. H., Sahagian, C. R., Campion, E. W.,
  & Glynn, R. J. (1993). Correlates of cognitive function scores in elderly outpatients.
  Journal of the American Geriatrics Society, 41, 491-497.
- Mathuranath, P. S., Cherian, J. P., Mathew, R., George, A., Alexander, A., & Sarma, S. P. (2007). Mini mental state examination and the addenbrooke's cognitive examination: Effect of education and norms for a multicultural population. *Neurology India*, *55*, 106-110. doi: 10.4103/0028-3886.32779
- Matioli, M. N. P. S., Caramelli, P., Marques, B. D., da Rocha, F. D., de Castro, M. C. C., Yamashita, S. R., & de M. Soares, A. (2008). EXIT25—Executive interview applied to a cognitively healthy elderly population with heterogeneous educational background. *Dementia & Neuropsychologia*, 2, 305-309.

- Maurer, J. (2011). Education and male-female differences in later-life cognition:

  International evidence from Latin America and the Caribbean. *Demography*, 48, 915-930. doi: 10.1007/s13524-011-0048-x
- McCarty, S. M., Siegler, I. C., & Logue, P. E. (1982). Cross-sectional and longitudinal patterns of three Wechsler memory scale subtests. *Journal of Gerontology*, *37*, 169-175. doi:10.1093/geronj/37.2.169
- Mejia, S., Pineda, D., Alvarez, L. M., & Ardila, A. (1998). Individual differences in memory and executive function abilities during normal aging. *International Journal of Neuroscience*, 95, 271-284. doi: 10.3109/00207459809003345
- Milan, G., Iavarone, A., Vargas, N. F., Vargas, N. M., Fiorillo, F., Galeone, F., . . . Postiglione, A. (2004). Effects of demographic and environmental variables on cognitive performance in a rural community sample of elderly people living in southern Italy. *Aging Clinical and Experimental Research*, *16*, 398-402. doi: 10.1007/BF03324570
- Mitrushina, M., Patel, P. G., Satz, P., D'Elia, L., & McConnell, M. J. (1989). Changes in semantic memory processing in normal and at-risk aging adults. *Developmental Neuropsychology*, *5*, 321-333. doi: 10.1080/87565648909540442
- Morgan, A. A. Marsiske, M., Whitfield, K. E. (2007). Characterizing and explaining differences in cognitive test performance between African American and European American older adults. *Experimental Aging Research*, *34*, 80-100. doi: 10.1080/03610730701776427
- Mousavi-Nasab, S. M., Kormi-Nouri, R., & Nilsson, L. G. (2014). Examination of the bidirectional influences of leisure activity and memory in old people: a dissociative effect on episodic memory. *British Journal of Psychology*, *105*(3), 382-398. doi: 10.1111/bjop.12044

- Mueller, A. E., Raymond, N., & Yochim, B. P. (2013). Cognitive activity engagement predicts future memory and executive functioning in older adults. *Activities*, *Adaptation & Aging*, *37*, 251-264. doi: 10.1080/01924788.2013.816833
- Mulgrew, C. L., Morgenstern, N., Shetterly, S. M., Baxter, J., Barón, A. E., & Hamman, R.
   F. (1999). Cognitive functioning and impairment among rural elderly Hispanic and non-Hispanics whites as assessed by the mini-mental state examination. *The Journals of Gerontology. Series B, Psychological Sciences and Social Sciences*, *54B*, 223-230. doi: 10.1093/geronb/54B.4.P223
- Mungas, D., Reed, B. R., Haan, M. N., & González, H. (2005). Spanish and English neuropsychological assessment scales: relationship to demographics, language, cognition, and independent function. *Neuropsychology*, 19, 466-475. doi: 10.1037/0894-4105.19.4.466
- Murayama, N., Iseki, E., Tagaya, H., Ota, K., Kasanuki, K., Fujishiro, H., . . . Sato, K. (2013). Intelligence or years of education: Which is better correlated with memory function in normal elderly Japanese subjects? *Psychogeriatrics*, *13*, 9-16. doi: 10.1111/j.1479-8301.2012.00408.x
- Murphy, M. & O'Leary, E. (2010). Depression, cognitive reserve and memory performance in older adults. *International Journal of Geriatric Psychiatry*, *25*, 665-671. doi: 10.1002/gps.2404
- Newson, R. S. & Kemps, E. B. (2005). General lifestyle activities as a predictor of current cognition and cognitive change in older adults: a cross-sectional and longitudinal examination. *The Journals of Gerontology. Series B, Psychological Sciences and Social Sciences*, 60, 113-120. doi:10.1093/geronb/60.3.P113

- O'Connor, D. W., Pollitt, P. A., Treasure, F. P., Brook, C. P. B., & Reiss, B. B. (1989). The influence of education, social class and sex on mini-mental state scores.

  \*Psychological Medicine\*, 19, 771-776. doi: 10.1017/S0033291700024375
- Opdebeeck, C., Nelis, S. M., Quinn, C., & Clare, L. (2014). How does cognitive reserve impact on the relationships between mood, rumination, and cognitive function in later life? *Aging & Mental Health*. Advance online publication. doi: 10.1080/13607863.2014.962005
- O'Shea, D. M., Fieo, R. A., Hamilton, J. L., Zahodne, L. B., Manly, J. J., & Stern, Y. (2014). Examining the association between late-life depressive symptoms, cognitive function, and brain volumes in the context of cognitive reserve. *International Journal of Geriatric Psychiatry*, Advance online publication. doi: 10.1002/gps.4192
- Parisi, J. M., Stine-Morrow, E. A. L., Noh, S. R., & Morrow, D. G. (2009). Predispositional engagement, activity engagement, and cognition among older adults. *Aging, Neuropsychology, and Cognition, 16*, 485-504. doi: 10.1080/13825580902866653
- Parslow, R. A., Jorm, A. F., Christensen, H., & Mackinnon, A. (2006). An instrument to measure engagement in life: Factor analysis and associations with sociodemographic, health and cognition measures. *Gerontology*, *52*, 188-198. doi: 10.1159/000091829
- Paula, J. J., Costa Dde, S., Bertola, L., Miranda, D., & Malloy-Diniz, L. F. (2013). Verbal fluency in older adults with low educational level: what is the role of executive functions and processing speed? *Revista Brasileira De Psiquiatria*, *35*, 440-442. doi: 10.1590/1516-4446-2013-1118
- Pedersen, N. L., Reynolds, C. A., & Gatz, M. (1996). Sources of covariation among minimental state examination scores, education, and cognitive abilities. *The Journals of Gerontology. Series B, Psychological Sciences and Social Sciences*, *51B*, 55-63. doi: 10.1093/geronb/51B.2.P55

- Petersen, R. C., Smith, G., Kokmen, E., Ivnik, R. J., & Tangalos, E. G. (1992). Memory function in normal aging. *Neurology*, 42, 396-401. doi: 10.1212/WNL.42.2.396
- Plassman, B. L., Welsh, K. A., Helms, M., Brandt, J., Page, W. F., & Breitner, J. C. S. (1995). Intelligence and education as predictors of cognitive state in late life: A 50-year follow-up. *Neurology*, *45*, 1446-1450. doi:10.1212/WNL.45.8.1446
- Plumet, J., Gil, R., & Gaonac'h, D. (2005). Neuropsychological assessment of executive functions in women: Effects of age and education. *Neuropsychology*, *19*, 566-577. doi: 10.1037/0894-4105.19.5.566
- Portin, R., Saarijärvi, S., Joukamaa, M., & Salokangas, R. K. R. (1995). Education, gender and cognitive performance in a 62-year-old normal population: results from the Turva project. *Psychological Medicine*, *25*, 1295-1298. doi: 10.1017/S0033291700033262
- Potter, G. G., Plassman, B. L., Helms, M. J., Foster, S. M., & Edwards, N. W. (2006).

  Occupational characteristics and cognitive performance among elderly male twins.

  Neurology, 67, 1377-1382. doi: 10.1212/01.wnl.0000240061.51215.ed
- Puccioni, O., & Vallesi, A. (2012a). High cognitive reserve is associated with a reduced agerelated deficit in spatial conflict resolution. *Frontiers in Human Neuroscience*, 6, 327. doi: 10.3389/fnhum.2012.00327
- Puccioni, O., & Vallesi, A. (2012b). Conflict resolution and adaptation in normal aging: the role of verbal intelligence and cognitive reserve. *Psychology and Aging, 27*, 1018-1026. doi: 10.1037/a0029106
- Rexroth, D. F., Tennstedt, S. L., Jones, R. N., Guey, L. T., Rebok, G. W., Marsiske, M. M., .

  . Unverzagt, F. W. (2013). Relationship of demographic and health factors to cognition in older adults in the ACTIVE study. *Journal of Aging and Health*, *25*, 128S-146S. doi: 10.1177/0898264313498415

- Ritchie, S. J., Bates, T. C., Der, G., Starr, J. M., & Deary, I. J. (2013). Education is associated with higher later life IQ scores, but not with faster cognitive processing speed. *Psychology and Aging*, *28*, 515-521. doi: 10.1037/a0030820
- Saczynski, J. S., Jonsdottir, M. K., Sigurdsson, S., Eiriksdottir, G., Jonsson, P. V., Garcia, M. E., . . . Launer, L. J. (2008). White matter lesions and cognitive performance: the role of cognitively complex leisure activity. *The Journals of Gerontology. Series A, Biological Sciences and Medical Sciences, 63A*, 848-854. doi: 10.1093/gerona/63.8.848
- Scherr, P. A., Albert, M. S., Funkenstein, H. H., Cook, N. R., Hennekens, C. H., Branch, L. G., . . . Evans, D. A. (1988). Correlates of cognitive function in an elderly community population. *American Journal of Epidemiology*, *128*, 1084-1101.
- Schmand, B., Smit, J., Lindeboom, J., Smits, C., Hooijer, C., Jonker, C., & Deelman, B.
  (1997). Low education is a genuine risk factor for accelerated memory decline and dementia. *Journal of Clinical Epidemiology*, 50, 1025-1033. doi: S0895-4356(97)00121-2
- Senanarong, V., Poungvarin, N., Sukhatunga, K., Prayoonwiwat, N., Chaisewikul, R., Petchurai, R., . . . Viriyavejakul, A. (2001). Cognitive status in the community dwelling Thai elderly. *Journal of the Medical Association of Thailand*, 84, 408-416.
- Sheres, D. K. (Apr 2002). *The relationship of lifestyle variables to cognitive functioning and aging. (Doctoral dissertation)* California School of Professional Psychology, San Diego. Retrieved from http://search.proquest.com/docview/619966231?accountid=14874
- Smart, E. L., Gow, A. J., & Deary, I. J. (2014). Occupational complexity and lifetime cognitive abilities. *Neurology*, 83, 2285-2291 doi: 10.1212/WNL.000000000001075

- Smits, C. H. M., van Rijsselt, R. J. T., Jonker, C., & Deeg, D. J. H. (1995). Social participation and cognitive functioning in older adults. *International Journal of Geriatric Psychiatry*, 10, 325-331. doi: 10.1002/gps.930100409
- Snitz, B. E., Unverzagt, F. W., Chang, C. H., Bilt, J. V., Gao, S., Saxton, J., . . . Ganguli, M. (2009). Effects of age, gender, education and race on two tests of language ability in community-based older adults. *International Psychogeriatrics*, 21, 1051-1062. doi: 10.1017/S1041610209990214
- Then, F. S., Luck, T., Luppa, M., Arelin, K., Schroeter, M. L., Engel, C., . . . Riedel-Heller,
  S. G. (2014). Association between mental demands at work and cognitive functioning in the general population results of the health study of the Leipzig research center for civilization diseases (LIFE). *Journal of Occupational Medicine and Toxicology*,
  9, 23-6673-9-23. doi: 10.1186/1745-6673-9-23
- Unverzagt, F. W., Hall, K. S., Torke, A. M., Rediger, J. D., Mercado, N., Gureje, O., . . . Hendrie, H. C. (1996). Effects of age, education, and gender on CERAD neuropsychological test performance in an African American sample. *The Clinical Neuropsychologist*, 10, 180-190. doi: 10.1080/13854049608406679
- Van der Linden, M., Philippot, P., & Heinen, P. (1997). Effect of age, education and verbal efficiency on memory performance and memory self-assessment. *Archives De Psychologie*, 65, 171-185.
- Van Exel, E., Gussekloo, J., de Craen, A. J. M., Bootsma-van der Wiel, A., Houx, P., Knook,
  D. L., & Westendorp, R. G. J. (2001). Cognitive function in the oldest old: women
  perform better than men. *Journal of Neurology, Neurosurgery & Psychiatry*, 71, 2932. doi:10.1136/jnnp.71.1.29
- van Hooren, S. A. H., Valentijn, A. M., Bosma, H., Ponds, R. W. H. M., van Boxtel, M. P. J., & Jolles, J. (2007). Cognitive functioning in healthy older adults aged 64-81: a

- cohort study into the effects of age, sex, and education. *Aging, Neuropsychology, and Cognition*, 14, 40-54. doi: 10.1080/138255890969483
- Vaughan, L., Erickson, K. I., Espeland, M. A., Smith, J. C., Tindle, H. A., & Rapp, S. R. (2014). Concurrent and longitudinal relationships between cognitive activity, cognitive performance, and brain volume in older adult women. *The Journals of Gerontology. Series B, Psychological Sciences and Social Sciences*, 69, 826-836. doi: 10.1093/geronb/gbu109
- Vemuri, P., Lesnick, T. G., Przybelski, S. A., Machulda, M., Knopman, D. S., Mielke, M. M., . . . Jack, C. R., Jr. (2014). Association of lifetime intellectual enrichment with cognitive decline in the older population. *JAMA Neurology*, 71, 1017-1024. doi: 10.1001/jamaneurol.2014.963
- Welsh-Bohmer, K. A., Østbye, T., Sanders, L., Pieper, C. F., Hayden, K. M., Tschanz, J. T., & Norton, M. C. (2009). Neuropsychological performance in advanced age: influences of demographic factors and apolipoprotein E: Findings from the cache county memory study. *The Clinical Neuropsychologist*, 23, 77-99. doi: 10.1080/13854040801894730
- Wiederholt, W. C., Cahn, D., Butters, N. M., Salmon, D. P., Kritz-Silverstein, D., & Barrett-Connor, E. (1993). Effects of age, gender and education on selected neuropsychological tests in an elderly community cohort. *Journal of the American Geriatrics Society*, 41, 639-647
- Wilson, R. S., Bennett, D. A., Beckett, L. A, Morris, M. C., Gilley, D. W., Bienias, J. L.,
  Scherr, P. A., & Evans, D. A. (1999). Cognitive activity in older persons from a geographically defined population. *Journal of Gerontology. Series B, Psychological Sciences and Social Sciences*, 54, 155-160. doi: 10.1093/geronb/54B.3.P155

- Wirth, M., Haase, C. M., Villeneuve, S., Vogel, J., & Jagust, W. J. (2014). Neuroprotective pathways: lifestyle activity, brain pathology, and cognition in cognitively normal older adults. *Neurobiology of Aging*, *35*, 1873-1882. doi: 0.1016/j.neurobiologing.2014.02.015
- Yao, S., Zeng, H., & Sun, S. (2009). Investigation on status and influential factors of cognitive function of the community-dwelling elderly in Changsha city. *Archives of Gerontology and Geriatrics*, 49, 329-334. doi: 10.1016/j.archger.2008.11.007
- Zahodne, L. B., Glymour, M. M., Sparks, C., Bontempo, D., Dixon, R. A., MacDonald, S. W., & Manly, J. J. (2011). Education does not slow cognitive decline with aging: 12-year evidence from the Victoria longitudinal study. *Journal of the International Neuropsychological Society*, 17, 1039-1046. doi: 10.1017/S1355617711001044
- Zahodne, L. B., Nowinski, C. J., Gershon, R. C., & Manly, J. J. (2014). Which psychosocial factors best predict cognitive performance in older adults? *Journal of the International Neuropsychological Society*, 20, 487-495. doi: 10.1017/S1355617714000186
- Zhou, S., Zhu, J., Zhang, N., Wang, B., Li, T., Lv, X., . . . Wang, H. (2014). The influence of education on Chinese version of Montreal cognitive assessment in detecting amnesic mild cognitive impairment among older people in a Beijing rural community. *The Scientific World Journal*, Article ID: 689456. doi: 10.1155/2014/689456
- Zimmerman, M. E., Bigal, M. E., Katz, M. J., Brickman, A. M., & Lipton, R. B. (2012).

  Sleep onset/maintenance difficulties and cognitive function in nondemented older adults: The role of cognitive reserve. *Journal of the International*Neuropsychological Society, 18, 461-470. doi:10.1017/S1355617711001901