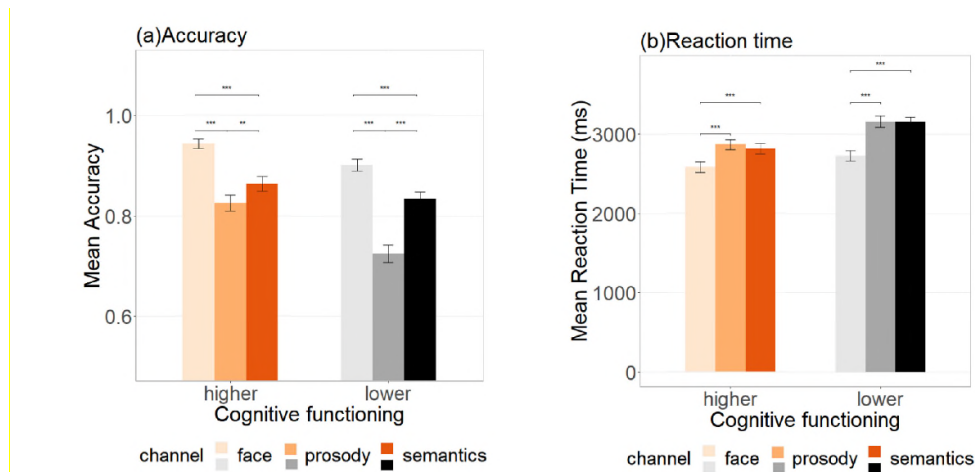


Supplemental Material S6. Channel dominance patterns of older adults with higher and lower cognitive functioning in (a) accuracy and (b) reaction time measures.



Notes. In some cases, the cut-off score for being clinically normal in cognition in MoCA assessment is 26. Thus, we divided our older participants into two groups according to their MoCA scores. Those with MoCA scores at and over 26 were participants with higher cognitive functioning, whereas those with MoCA scores below 26 were participants with lower cognitive functioning (26 was also close to our median/mean score). Generalized linear mixed-effects models were employed to examine whether and how older adults with higher and lower cognitive capacities differed in the channel dominance effects. The model settings remained the same as in the analyses between younger and older adults except for the fixed factors being channel (i.e., facial, prosodic and semantic), and cognition (i.e. higher vs. lower cognitive functioning). Results showed that while older adults with higher cognitive functioning generally outperformed those with lower cognitive abilities, the two groups exhibited similar channel dominance patterns in accuracy and reaction time measures. Asterisks marks (** $p < .01$; *** $p < .001$) were labeled based on the pairwise contrasts of Channel \times Cognition interactions in the two measures using the emmeans function. It is possible that categorizing MoCA scores may obscure certain effects related to cognitive changes within a single group. Thus, we retained the original MoCA scores as a continuous variable to capture more nuanced differences in cognitive functioning.