

Unique life challenges occur across life phases, including later life. Life story research suggests that the way challenges are narrated has consequences for multiple domains of well-being. Two factors for positively reframing challenges are one's sense of purpose in life (Windsor et al., 2015) and redemption (McAdams et al., 2001). This study used moderated-mediation analyses to investigate whether: 1) challenge relates to psychosocial and cognitive well-being, differentially by age, and 2) narrating with greater purpose and redemption ameliorates effects of challenges on well-being, by age. Participants (N = 99 young, 88 older adults) rated self-disruption of challenging events from their lives (IV1) and reported number of recent life challenges experienced (IV2). Eudaimonic well-being (DV1) and cognitive well-being (DV2) were assessed. Purpose (M1) and redemption (M2) were reliably content-analyzed from participants' narratives of autobiographical challenges (e.g., illness, loss of other). For Aim 1, young and older adults who experienced more challenges showed lower eudaimonic well-being but higher cognitive well-being. Perceived self-disruption was unrelated to well-being. For Aim 2, results showed that how individuals narrate (i.e., with purpose, with redemption) the challenges that have occurred in their lives mediates effects of challenge. Specifically, exhibiting a sense of purpose mediated the relation between perceived self-disruption and cognitive well-being. Redemption buffered negative effects of both self-disruption and number of challenges on eudaimonic well-being. Mediation results held regardless of age. Findings suggest purpose and redemption are two narrative mechanisms that act as psychological resources to support well-being in the face of life's inevitable challenges.

RESILIENCE AMONG OLDER ADULTS WITH TYPE 2 DIABETES FROM THE LOOK AHEAD TRIAL

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There is growing interest in identifying factors protecting against aging-related decline. This cross-sectional study evaluated associations of self-reported resilience (ability to bounce back) with factors linked to aging-related decline among older adults with Type 2 diabetes (T2DM). Participants were 3,199 adults (72.2±6.2 years, 61% female, 61% white, BMI 34.2±8.2 kg/m²) enrolled in Look AHEAD (a multi-site RCT comparing weight loss to diabetes education among individuals with T2DM), who were followed observationally after the 10-year intervention was discontinued. The following items were assessed approximately 14.4yrs post-randomization: Brief Resilience Scale;

overnight hospitalizations in past year; physical functioning measured objectively (gait speed, grip strength) and via self-report (Pepper Assessment Tool for Disability; Physical quality of life (QOL; SF-36)); a composite measure of phenotypic frailty based on having ≥3 of unintentional weight loss, low energy, slow gait, reduced grip strength, physical activity. Depressive symptoms (PHQ-9) and mental QOL (SF-36) were also measured. Logistic/linear regression was used to evaluate the association of these variables with resilience adjusted for age, race, and gender. Greater resilience was associated with lower BMI (p=.01), fewer hospitalizations (p=.02), better physical functioning (i.e., lower self-reported disability, better self-reported physical QOL, faster gait speed, greater grip strength and lower likelihood of meeting criteria for frailty; all p<.001), fewer depressive symptoms and greater mental QOL. Resilience is associated with better performance on indicators of overall functioning and risk for decline among older adults. Findings correspond with efforts to shift narrative on aging beyond 'loss and decline' to highlight opportunities to facilitate healthy aging.

THE EFFECT OF BEHAVIORAL ACTIVATION ON OLDER ADULTS' ENGAGEMENT AND WELLBEING: A RANDOMIZED CONTROL TRIAL PROTOCOL

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Meaningful activity engagement in later life is widely recognized as crucial for ageing well, but age-related changes and transitions can impede such participation. A behavioral activation framework can provide a person-centred, value-consistent therapeutic approach to increasing activity engagement that is both easy to administer, cost effective and accessible to a broad audience. Although there is evidence supporting the utility of behavioral activation as a treatment for depression in older adults, this study will be the first to examine whether a behavioral activation is more effective in increasing activity engagement and psychological wellbeing among a non-clinical sample of older adults, compared to a multi component positive psychology intervention. This randomized controlled trial will examine the impact of two therapeutic approaches on activity engagement and wellbeing among older adults. One hundred and fifty adults aged 65+ who have relatively lower scores on a measure of engagement with life will be randomized to either a behavioral activation-based intervention, or a multi-component positive psychology intervention. The interventions will involve six individual weekly sessions conducted via telephone or video conference. Participants will be assessed pre-, post-intervention, and at three months follow-up. Outcome measures will include activity engagement, positive affect, and psychological wellbeing. Intra-individual variability will also be assessed via micro-longitudinal data in the behavioral activation condition. This study will be the first to provide evidence to the effectiveness of behavioral activation as an intervention to increase activity engagement and wellbeing among older adults, compared to other therapeutic approaches to increase psychological wellbeing.