

study also found that the views of the reality-show participants highlight the capability of older people with dementia to communicate effectively and live with the condition, their personal goals of sustaining a happy, meaningful and sociable life, as well as their actions to positively influence personal circumstances. The results of this study indicate that this reality show might help reduce the stigma of dementia and empower older people living with dementia, while it also tends to stress the responsibility for care on family carers and shift the responsibility of managing the dementia-related challenges to older people living with dementia.

### THE SOCIAL EFFECTS OF AN INTERGENERATIONAL E-MAIL PAL PROGRAM

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Ageist attitudes and loneliness negatively impact both younger and older adults (e.g., Sun et al., 2019). This study utilized a randomized waitlist-control design to investigate the effects of a six-week intergenerational e-mail pen pal program on loneliness in younger and older adults and ageism in younger adults. Thirty-three younger adults (18-30 years) and 28 older adults (over age 65) completed an online survey assessing ageist attitudes, loneliness, well-being, and other individual differences. One week after completing a baseline survey, 17 email pen pal pairs began the six-week e-mail intervention. Participants repeated the survey one week after the completion of the intervention (which was eight weeks after the baseline for the control participants). Analyses showed that at baseline, younger adults ( $M=2.41$ ,  $SD=.76$ ) reported higher levels of loneliness compared to older adults ( $M=1.65$ ,  $SD=.77$ ),  $t(59) = 3.85$ ,  $p < .001$ . Repeated measures ANOVAs showed that the intervention did not have a significant effect on ageism or loneliness in either younger or older adults. However, the effect size of the intervention for loneliness among older adults was moderate to large ( $\eta^2 = .07$ ). Descriptive statistics indicated that older adults in both the intervention and control groups experienced an increase of loneliness during the post-test. However, the older adults in the intervention group experienced less of an increase compared to older adults in the control group. This suggests that the intervention may have buffered the increase in loneliness that older adults may experience during the winter months and during the onset of the COVID-19 pandemic.

## Session 2175 (Symposium)

### AGING STRONG: PROMOTING RESILIENCE THROUGH OPTIMISM, PURPOSE, AND SOCIAL CONNECTIONS

Chair: Ellen Wicker

Co-Chair: James Schaeffer

Resilience is defined as the ability to adapt and cope with circumstances in a way that empowers one to emerge stronger, thrive, and incorporate lessons learned. Resilience as a trait can be learned and modified and have a significant impact on healthy aging. UnitedHealthcare (UHC) and AARP Services, Inc. (ASI) are committed to the health and well-being of participants in UHC's Medicare Supplement

insurance plans, recognizing that health and wellness need to be promoted on a holistic level to ensure successful aging. In this effort, an initiative titled Aging Strong 2020 was developed to promote health, well-being, and increase resilience by focusing on the key individual pillars of enhanced purpose in life, social connectedness, and optimism. To accomplish this goal, a series of eight interventions over three years were created and delivered, with a focus on the key pillars in order to improve clinical and psychological health outcomes and participants' satisfaction with health care. This symposium will specifically discuss efforts related to the Aging Strong 2020 program. First, we will describe the prevalence and outcomes of the pillars in a large national survey. Next, key challenges and successes in recruitment and retention for the various interventions will be highlighted, followed by overall findings from the eight interventions targeting the pillars. Finally, qualitative findings on participant experience as a result of participation will be discussed. Results from these initiatives demonstrate that interventions designed to improve well-being among older adults contribute to the holistic model of health.

### RESILIENCE, PURPOSE IN LIFE, LONELINESS, AND ASSOCIATED MEDICAL COSTS IN OLDER ADULTS

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Resilience, purpose in life (PIL), and loneliness have been linked, and used to characterize the health and well-being of older adults. Studies demonstrate that higher resilience, PIL, and minimal loneliness are associated with better late-life outcomes. However, research on how these constructs negatively impact medical costs is limited. Using survey and claims data from a large sample of older adults age 65+ ( $N=4,496$ ), resilience, PIL, and loneliness were examined to determine associations with medical costs. Among study participants, 11% exhibited low resilience, 19% severe loneliness, and 35% low PIL. Low resilience was associated with 24% higher medical costs compared to participants with high resilience, severe loneliness with 20% higher costs compared to participants with no loneliness, and low PIL marginally associated with 12% higher costs compared to participants with high PIL. Interventions targeting resilience, PIL, and loneliness could be beneficial to promoting successful aging and lowering medical costs.

### RECRUITING OLDER ADULTS IN A MEDICARE SUPPLEMENT POPULATION FOR WELLNESS INTERVENTION PILOT STUDIES

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Older adults are often underrepresented in the health promotion literature, in part due to challenges in recruiting older adults for such studies. Aging Strong 2020 was specifically designed to address the health needs of older adults. A subset of adults aged 65 and older with an AARP Medicare Supplement plan insured by UnitedHealthcare were recruited for participation in one of eight interventions. Recruitment lists for each program were drawn from a pool previously screened for loneliness, purpose in life, optimism, and resilience, administered by an interactive voice response (IVR) telephone survey. Recruitment efforts were multifaceted and included emails, direct mailers, and phone calls. Incentives ranging from \$25-\$100 for completing surveys did not correspond with higher recruitment rates. Overall, recruitment phone calls reached 28,058 (32%) individuals on the recruitment lists; a total of 1,766 participated, demonstrating that targeted efforts to recruit older adults for research opportunities can be successful.

#### IMPROVING RESILIENCE, OPTIMISM, PURPOSE, AND LONELINESS AMONG OLDER ADULTS

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Aging Strong 2020 was developed to promote health and well-being and increase resilience by focusing on the pillars of enhanced purpose in life, social connectedness, and optimism. A series of eight interventions over three years tested the feasibility of enhancing these pillars. Interventions included: 1) An expressive writing program, 2) Animatronic pets, 3) A telephonic reminiscent program, 4) An online self-compassion mindfulness program, 5) A technology-based behavior change tool, 6) An online and workbook tool for purpose, 7) An online happiness program, and 8) A peer-to-peer support program. Each program demonstrated efficacy dependent on the pillar targeted and the population sampled. Overall, some improvement was found among participants in resilience (47%), purpose (49%), optimism (44%), and loneliness (48%). Further, participant satisfaction improved in each program with Net Promoter Scores increasing between 7-19 points. Results demonstrate that Aging Strong 2020 was successful, contributing to a holistic model of healthy aging.

#### OLDER ADULTS' EXPERIENCES PARTICIPATING IN AGING STRONG 2020 PROGRAMS

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User satisfaction assessments are integral to demonstrating intervention efficacy. Towards that end, older participants across the Aging Strong 2020 suite of offerings participated in semi-structured interviews (n = 248) to provide feedback about their experiences in the program and resulting satisfaction. Overall, most participants were satisfied with the Aging Strong 2020 interventions and reported gaining new skills, tools, or coping strategies. Participants endorsed program features that facilitated social interaction, community building, and social support. Program content specifically adapted for older adults and appropriate life stage concerns and/or areas of interest were considered especially helpful. Results demonstrate that the current test and learn model offers an opportunity for participant feedback to refine and improve future iterations of project offerings. Participant feedback led to key improvements in subsequent versions of the Aging Strong 2020 programs and their contributions to successful aging among older adults.

### Session 2180 (Paper)

#### Alzheimer's Disease I (HS Paper)

##### IMPROVING USEFULNESS OF COGNITIVE DECLINE POPULATION MEASURES IN PREDICTING FUTURE DEMENTIA BURDEN

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Alzheimer's disease and related dementias begin with mild early symptoms of memory loss, progressing to more severe cognitive and functional impairment. Reports of worsening memory and subjective cognitive decline (SCD) are often the earliest possible signs of dementia onset. The trajectory of certain types of dementia may require early detection of worsening memory in the disease progression for successful interventions. However, the predictive value of subjective measures of cognitive decline is limited; the majority of those who report subjective symptoms do not progress to diagnosed cognitive impairment or dementia. These two realities create a significant challenge in confronting the growing dementia crisis. Population-level data can be beneficial in tracking trends in SCD. Data from the Behavioral Risk Factor Surveillance System (BRFSS) core questions related to chronic diseases and from the SCD optional module from survey years 2015-2019 were aggregated across the participating 50 states, D.C., and Puerto Rico for this analysis. Among 181,097 U.S. respondents aged  $\geq 45$  years, 11.3% (95% CI=10.9-11.6) reported SCD; among 20,424 with SCD symptoms, 39.4% (37.6-40.6) reported functional difficulties associated with SCD symptoms and 33.9% (32.4-35.5) needed assistance with day-to-day activities resulting from symptoms. Studies suggest persons experiencing SCD symptoms and associated functional difficulties are at increased risk for dementia compared with those with SCD without functional difficulties. Combining responses about SCD with associated functional difficulties, anxiety, and other measures might help to better inform the future burden of more severe cognitive impairment than SCD status alone.