

United States, 5. AARP Services, Inc., Washington, District of Columbia, United States

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

Rifky Tkatch,¹ Lizi Wu,² Laurie Albright,³ Rachel Ungar,² Catherine Zaidel,⁴ Yan Cheng,² James Schaeffer,² and Charlotte Yeh,⁵ 1. *UnitedHealth Group, Oak Park, Michigan, United States*, 2. *UnitedHealth Group, Minnetonka, Minnesota, United States*, 3. *UnitedHealth Group, Minneapolis, Minnesota, United States*, 4. *OptumLabs, Minnetonka, Minnesota, United States*, 5. *AARP Services, Inc., Washington, District of Columbia, United States*

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

Janella Hudson,¹ Rachel Ungar,² Laurie Albright,³ James Schaeffer,² and Ellen Wicker,⁴ 1. *Optum/United Healthcare, Tampa, Florida, United States*, 2. *UnitedHealth Group, Minnetonka, Minnesota, United States*, 3. *UnitedHealth Group, Minneapolis, Minnesota, United States*, 4. *AARP Services, Inc., Washington, District of Columbia, United States*

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

Benjamin Olivari,¹ Christopher Taylor,¹ and Lisa McGuire,² 1. *Centers for Disease Control and Prevention (CDC), Atlanta, Georgia, United States*, 2. *CDC, Atlanta, Georgia, United States*

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 ≥ 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.