

program significantly improved the objective memory (post-test: $\beta=-0.179$, $p=0.001$), and subjective memory (post-test: $\beta=7.542$, $p=0.007$; 3-month: $\beta=7.842$, $p=0.012$), neuropsychiatric symptoms (post-test: $\beta=2.822$, $p=0.001$; 3-month: $\beta=3.038$, $p=0.007$), and depression (post-test: $\beta=2.665$, $p=0.017$; 3-month: $\beta=3.556$, $p=0.007$). It also improved the caregiver stress in symptom management at post-test ($\beta=2.822$, $p=0.001$) and depression at the 3-month endpoint ($\beta=1.510$, $p=0.015$). Identifying and mobilizing the strengths of the clients with MCI and their family caregivers not only promote a more assertive coping experience and positive self-image for the care dyads, but also improve their health outcomes.

ENGAGEMENT MATTERS TO OPTIMIZE COGNITIVE BENEFITS OF COGNITIVELY IMPAIRED PEOPLE IN COGNITIVE STIMULATION THERAPY

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Background Cognitive stimulation therapy (CST), a 14-session themed groupwork for people with cognitive impairment, shows effectiveness in maintaining cognitive functioning, quality of life and communication. However, its mechanism of optimizing individual cognitive benefits is little known. Engagement, a state of being occupied by meaningful external stimuli, may be an overlooked link. Individual constructive engagement is defined as the verbal or motor individual behavior exhibited for the meaningful purposed activities. Objective To investigate the individual experience of engagement in CST and its effect on cognitive benefits. Methods A total of 108 participants were recruited from 8 community centers, 2 daycare centers and 2 residential care units in Hong Kong. Trained assessors not involved in CST delivery conducted the pre-and-post assessments using Alzheimer's Disease Assessment Scale-Cognitive Subscale (ADAS-Cog). Trained raters observed each participant's engagement under six 5-minute observation windows in total during CST sessions by time sampling using the adapted Myers Institute Engagement Scale. Results Paired t-test shows significant improvement in ADAS-Cog (Pretest: $M=22.71$, $SD=12.63$; Posttest: $M=19.06$, $SD=10.93$; $MD=3.65$, $SD=7.38$, $t=5.138$, $p<.000$). Individual constructive engagement was exhibited 23.3% of activity time averagely. It correlated with the change in ADAS-Cog positively ($r=.292$, $p<.002$). Greater individual constructive engagement predicted lower post-intervention ADAS-Cog score ($B=-14.98$, $\beta=-.192$, $p<.001$), indicating a better cognitive functioning, after controlling baseline ADAS-Cog score ($B=.707$, $\beta=.816$, $p<.000$) in the multiple linear regression analysis ($R^2 = .698$, $F(2,105) = 121.38$, $p<.000$). Conclusion Engagement is the potential mechanism to maximize individual cognitive benefits. Future studies can investigate contributing factors of engagement to improve intervention effectiveness

EFFECTIVENESS OF DIFFERENT INTERGENERATIONAL LEARNING PROGRAMS FOR ELDERLY WITH MILD COGNITIVE IMPAIRMENT

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The purposes of this study was to investigate the efficacy of interpersonal relationships, cognition, instrumental activities of daily living, depression for elderly with cognitive impairment through intervention using the intergenerational somatosensory video game and company. The experimental design was used for this study. Eighty-nine elders with mild cognitive impairment and 180 adolescents were from nine junior and senior high school were recruited in this study. Eight day care centers were randomly assigned to the experimental group I (EGI) (5-week intergenerational somatosensory video game), the experimental group II (EGII) (8-week intergenerational somatosensory video game), the experimental group III (EGIII) (5-week intergenerational company), the experimental group IV (EGIV) (8-week intergenerational company) and control group for eight weeks of routine activities. Subjects were interviewed using structured instruments, including the Instrumental Activities of Daily Living (IADL), Token test, and Geriatric Depression Scale. Obtained data was analyzed using the Generalized Estimate Equation (GEE). The results revealed that there was no significant difference of elders' characteristics among five groups. After intervention, instrumental activities of daily living scores in 8-week intergenerational somatosensory video game (EGII) and 8-week intergenerational company groups (EGIV) were significantly better than the control group. Token test score in 8-week intergenerational company (EGIV) were significant higher than that in the control group; while depression in 5-week intergenerational company (EGIII) was significantly lower than that in the control group. Based on the research findings, to arrange intergenerational action video game and intergenerational company to enhance elders' attention, instrumental activities of daily living and decrease depression.

PSYCHOLOGICAL WELL-BEING AND THE ONSET OF COGNITIVE IMPAIRMENT AMONG CHINESE OLDER ADULTS

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Previous research has shown the beneficial effects of positive psychological assets on health, but more research is needed to confirm the prospective effects on cognitive function. The purpose of this study is to examine the relationship between psychological well-being and the earliest onset of cognitive impairment among Chinese older adults. Data came from 2000 to 2014 waves of the Chinese Longitudinal Healthy Longevity Survey. Study sample consisted of 6,225 older adults who were free from cognitive impairment in 2000. Psychological well-being was measured based on seven items that assessed optimism, conscientiousness, self-determination, happiness, self-esteem, pessimism, and loneliness, with responses ranging from "always (1)" to "never (5)". Negative feelings items were reverse coded. Higher score indicated more positive psychological well-being. Cognitive impairment was measured by a Chinese version of the Mini-Mental State Examination. Respondents scored at or above 24 were regarded as having no cognitive impairment. A multi-category time-varying variable was used to capture four potential outcomes: (1) persistently free of cognitive impairment between waves, (2) onset of cognitive impairment, (3) death between waves, and (4) attrition. Socio-demographics, chronic diseases conditions, functional health status were served as controls. Multilevel multinomial logistic regression