



Institute for Aging Research

Hebrew SeniorLife



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COLLAGE, The Art and Science of Healthy Aging

Memory Interventions and Everyday Competencies

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CCRC settings

- Major goal: to remain as functionally independent and cognitively intact as possible



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- Autonomy, engagement, and social vitality are key components of the CCRC story.....



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- Examined the interplay between cognitive status and physical activity level in CCRC's
- Assessed residents' level of interest in programs to improve cognition or physical activity level
- Examined the model in relation to select demographic, health and functional characteristics



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- Sources of Data
 - interRAI Community Health Assessment (CHA)
 - Functional Supplement to the CHA
 - COLLAGE Wellness Assessment



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- Used subjects of vector questions for analyses
 - Cognition
 - Physical Activity
 - Resident Preferences



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Cognition

Revised Cognitive Performance Scale (CPS2)

- is short term memory OK (CHA)
- is procedural memory OK (FS)
- what is the level of *cognitive skills for daily decision making* (CHA)
- what is the level of ability in *making self understood* (CHA)
- what is the level of ability in eating (FS)



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– How would you rate your memory (Wellness)



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- Developed an eight level hierarchal scale (0-7)
- Score of 3 or less = Good Cognition
- Score of 4 or higher = Moderate to severe cognitive deficits



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- Physical Activity
 - What is your *total hours of exercise or physical activity in the last 3 days* (CHA/Wellness)
 - Good physical activity = having exercised 3 or more hours in the last 3 days

Satisfaction with level of physical activity

Are you satisfied with your fitness level (Wellness)



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– Resident Preferences

- *Are you interested in programs to improve your memory (Wellness)*
 - if yes = **COGNITIVE STRIVERS**
- *Are you interested in programs to improve your fitness level (Wellness)*
 - If yes = **PHYSICAL STRIVERS**



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- **CONTENT** individuals
 - Good cognition and good physical activity and not interested in participating in any programs
- **SEDENTARY**
 - Good cognition and poor physical activity and not interested in a physical activity program
- **RESIGNED**
 - Poor cognition and not interested in program to improve their cognition



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- Based on participants responses to questions associated with the memory and physical activity vectors, 3 distinct strata emerged:
 - Good Cognition and Good Physical Activity
 - Good Cognition and Poor Physical Activity
 - Poor Cognition



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Good Cognition, Good Physical Activity

largest stratum – 50% of the sample

3 phenotypes:

content – 25.6%

cognitive striver – 10.5%

physical striver – 13.9%



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Good Cognition and Poor Physical Activity

comprised 45% of the sample

3 phenotypes:

sedentary – 17.4%

cognitive strivers – 7.3%

physical strivers – 20.3%



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- **Poor Cognition**

- Smallest group – 5% of the sample
- 2 phenotypes:
 - Cognitive strivers 2.4%
 - Resigned 2.6%



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Demographic Characteristics

Good Cognition and Good Physical Activity

- younger, married, graduate degree

Good Cognition and Poor Physical Activity

- older

Poor Cognition

- less formal education

Gender not statistically significant



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Health Characteristics

Good Cognition and Good Physical Activity

- better self-rated health
- less lonely
- reportedly no major life stressors



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- **Good Cognition and Poor Physical Activity**
 - More likely to have had a stroke
 - COPD
 - Cancer
 - Experienced more anxiety
 - Experienced more depression

Of note, coronary heart disease and diabetes not statistically significant



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- **Functional Characteristics**
- **Good Cognition and Good Physical Activity**
 - More likely to
 - Drive, walk, perform housework independently
 - **Good Cognition and Poor Physical Activity**
 - 75.5% able to perform housework independently
 - **Poor Cognition**
 - Majority did not drive
 - Majority required help with housework



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- Thank you for your time and attention.



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