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*Healthy Ageing in Western Pacific:
Moving Forward with the UN Decade of Healthy Ageing*

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Poster Presentations

A1-01	The Association between Sarcopenia and Functional Disability in Older Adults

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AIMS

To examine the association between sarcopenia status and functional disability based on China Health and Retirement Longitudinal Study (CHARLS).

METHODS

Participants aged at least 60 years old from the CHARLS 2015y were included. Sarcopenia was assessed according to the Asian Working Group for Sarcopenia 2019 algorithm. The outcomes of this study were basic activities of daily living (BADLs) and instrumental activities of daily living (IADLs). The logistic regression model was conducted to analyze the cross-sectional and longitudinal associations between sarcopenia status and BADLs and IADLs disability.

RESULTS

In the cross-sectional study, 37.2% of the 6893 participants were defined as having sarcopenia. Any form of sarcopenia was associated with BADLs and IADLs disability. During three years of follow-up, 786 (16.5%) participants developed new-onset BADLs disability, and 980 (22.5%) participants developed new-onset IADLs disability. Compared with the no-sarcopenia, participants with possible sarcopenia (OR: 1.59, 95%CI: 1.32-1.91), sarcopenia (OR: 1.58, 95%CI: 1.18-2.11), or total sarcopenia (OR: 1.58, 95%CI: 1.34-1.88) had a higher risk of BADLs disability. While, the risk of IADLs disability for participants with possible sarcopenia (OR: 1.66, 95%CI: 1.40-1.98), sarcopenia (OR: 1.86, 95%CI: 1.39-2.49), or total sarcopenia (OR: 1.71, 95%CI: 1.45-2.00) was still significantly increased. With statistical interaction between sarcopenia status and residence or gender in BADLs and IADLs disability, older adults in urban, with ORs ranging from 1.37 to 2.29, were at a higher risk of sarcopenia-related disability than those in rural, and possible sarcopenia was associated with a much higher risk of BADLs disability (OR: 1.64, 95%CI: 1.23-2.19) in males and a higher risk of IADLs disability (OR: 1.98, 95%CI: 1.55-2.52) in females.

CONCLUSIONS

Sarcopenia was associated with an increased risk of BADLs and IADLs disability among older Chinese adults. Even possible sarcopenia still significantly impacted BADLs and IADLs disability, and this association varied by sex and residence.

A1-02	Short-term Multi-Modal Prehabilitation Intervention in Patients Undergoing Limited Operation for Gastrointestinal Cancer: A Randomized Controlled Clinical Trial

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AIMS

The aim of the present study was to evaluate the possible effects of short-term multi-modal prehabilitation intervention on post-operative systemic stress response in patients undergoing limited operation for gastrointestinal cancer.

METHODS

A single-centre, randomized controlled trial in which 86 patients with nonmetastatic gastrointestinal cancer were randomly assigned to two groups(a control group(n=43):usual care according to standard perioperative protocol of Department of General Surgery, Shanghai General Hospital; a prehabilitation group(n=43):five-day multi-modal prehabilitation program comprising of exercise training, nutritional supplementation and psychological support prior to surgery which were supervised by a multidisciplinary team in hospital).Peripheral blood were sampled at baseline, at the day of surgery, and 6,24 and 48hours postoperatively.

RESULTS

The baseline characteristics of the two groups of patients were similar. Levels of epinephrine, norepinephrine,C-reactive protein and interleukin-6(IL-6) in both groups increased 6,24 and 48hours after the operation. The increase of epinephrine, C-reactive protein and interleukin-6(IL-6) levels in the prehabilitation group were significantly lower than the control group($p < 0.05$). There was no significant difference in norepinephrine levels between groups($p > 0.05$).

CONCLUSIONS

The short-term, supervised multi-modal prehabilitation in hospital is feasible in patients with nonmetastatic gastrointestinal cancer. Furthermore, this study provides evidence that such technologies can reduce post-operative systemic stress which can accelerate the postoperative recovery of patients to a certain extent.

A1-03	A Randomized Controlled Feasibility Study of a Nintendo RingFit-based Exercise Program to Improve Balance and Muscle Strength in Community-Dwelling Older Adults with a History of Falls

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AIMS   To examine the feasibility, safety and acceptability of a Nintendo RingFit-augmented exercise program to improve balance and muscle strength in community-dwelling older adults with a history of falls.

METHODS   Forty-three older adults with at least one fall in the past year were randomly assigned to a Nintendo RingFit-augmented exercise (NRE) group or a control (CON) group. The NRE group received an 8-week balance and muscle strengthening exercise program using the Nintendo RingFit, while the CON group received usual care. The attendance rate, adverse events and acceptance of the NRE group based on a questionnaire designed for this study were assessed. The physical, cognitive and psychological function of the participants in the two groups were evaluated and compared at 8 weeks.

RESULTS   The attendance rate of the NRE group was 88%. No adverse event related to the exercise training was reported. The participants in the NRE generally agreed that the exercise program was enjoyable and feasible, and they perceived that the program could improve their physical function and reduce their risk of falls. Compared to the CON group, the NRE group had a significant improvement in the anticipatory subscore of the Mini-Balance Evaluation Systems Test with a moderate to large effect size (NRE = 0.85 [0.28]; CON = -0.28 [0.25]; $p = .02$; Partial eta squared = 0.19).

CONCLUSIONS   The Nintendo RingFit-based exercise program was feasible, safe, acceptable, and potentially effective to improve balance in community-dwelling older fallers. Further study is warranted to evaluate the effects of the exercise program using a larger sample of older adults.

A1-04	eLearning Programme as a Valuable Support in Elder Care

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AIMS   In the context of global ageing population, there are greater demand for formal and informal caregivers to acquire knowledge and skills in taking care of the complex chronic health conditions of older people. The Programme aims at providing elder care education to formal and informal caregivers through the e-devices.

METHODS   The programme provides free online training courses on a dedicated website and a self-help health screening mobile App "iHealth Screen" which facilitated health monitoring and elder care learning at anytime, anywhere. It provided structured guide for learning and video clips with practical tips for caregivers so that they could easily pick up cues in their process of learning. Quantitative and qualitative methods were used to evaluate the programme.

RESULTS   Among 225 respondents, 96% reported that they would continue to use iHealth Screen and 95% would recommend iHealth Screen to their friends and family. Older adults' respondents shared that their personal health literacy was improved by using iHealth Screen; and the age-related health information, interactive videos allowed them to put learning into practice in daily life so as to facilitate healthy ageing. The software successfully cultivated a chill and relaxing atmosphere for caregivers to discuss health condition with older adults, and they valued the comprehensive healthcare materials provided which enhanced their knowledge and increased their confident in elder care, so as to alleviate the caregiver stress. Furthermore, the reporting feature allowed caregivers to monitor health condition of the older adults on a regular basis and reach out to professional consultation if necessary. The programme has positive impacts on elder care knowledge enhancement that improved health literacy and facilitated healthy ageing.

CONCLUSIONS   The formal and informal caregivers were empowered to better manage older adults' complex health issues and to acquire the latest elder care knowledge and skills, thereby fostering the older people to healthy ageing.

A1-05	Developing a Model to Promote the Quality of Life for the Elderly through Local Administrative Organization and Community in the Northern Border in Thailand

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AIMS

The purpose of this study was to assess the quality of life among the elderly population and develop a model aimed at enhancing their quality of life in collaboration with local administrative organizations and the community.

METHODS

The study employed a Participatory Action Research approach, collecting baseline data from a sample of 620 elderly individuals. The model was developed through the active involvement of various stakeholders, including public health officials, local authorities, government agencies, the public sector, and community representatives in the Wiang Phang Kham sub-district, involving a total of 62 participants.

RESULTS

The findings revealed that a significant proportion of the elderly participants exhibited a relatively high quality of life (85.16%). The proposed model for enhancing the quality of life among the elderly, referred to as the WPK Model (derived from the sub-district name), incorporates three key components: W - Within the organization and community, it promotes sustainable development of structures and human resources; P - People's health, with a focus on health management for both Thai and ethnic ageing populations; and K - Knowledge building, encompassing the development of health management competencies among health volunteers and improvement of health literacy among the elderly within the community. Following the implementation of this model, the elderly participants and community stakeholders reported high levels of satisfaction.

CONCLUSIONS

The quality of life development model for the elderly aligns with the concept of healthy ageing, facilitating the enhancement of intrinsic capacity, particularly in terms of accessing essential healthcare services and living in suitable environments, thereby promoting better functional abilities.

A1-06	The Effects of a Cognitive Stimulating Program for Elderly People with Mild Cognitive Impairment

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AIMS

To investigate effects of the Cognitive Stimulating Program on elderly with mild cognitive impairment.

METHODS

This program consists six-sessions have two-weeks between each session. The instruments were 1)General questionnaire 2) 2-question depression questionnaire 3)Thai Geriatric Depression Scale 4) Barthel Activities of Daily Living 5) Mini-Mental State Examination-Thai version 6)Montreal Cognitive Assessment. The instrument No.3 - 6's Inter-rater reliability coefficient were 0.55, 0.77, 0.69 and 0.71. Data were analyzed using paired t-test.

RESULTS

The mean cognitive function score after participated the program (Mean = 24.28, SD = 2.95) was higher than before participated (Mean = 19.97, SD = 3.21) (t = 8.64, $p<.001$). The mean scores on Attention, Language, and Memory after participated higher than before participated (t = 4.00, $p<.001$), (t = 4.61, $p<.001$), (t = 6.79, $p<.001$).

CONCLUSIONS

This Program should be implemented to promote cognitive function and reduce the risk of dementia.

A1-07	Intergenerational Support to Elderly with Dementia through Table Tennis

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AIMS

With the surging number of elderly diagnosed with dementia, the strong need for special services for elderly with dementia must be addressed eloquently in society. It is important to engage young people to offer intergenerational support to the elderly with dementia, as they are the future roots of the society. With all said, it is crucial to design a concise programme that supports the demented elderly and simultaneously engage young people to provide support.

METHODS

The Hong Kong Christian Service and The Hong Kong Polytechnic University have collaborated to develop a technology-enhanced table tennis (TeTT) training programme. It is hoped to engage young people in the project in accordance with our aims. Series of expert panel meetings have been conducted to obtain professional opinions and advice from domain experts. Whereas, stakeholders' interviews would be equally important to collect opinions on rehabilitation and table tennis training. Several protocol try-outs have been delivered in the Hong Kong Christian Service with precious feedback received.

RESULTS

For the engagement of young people as one of our aims, an increase in understanding of dementia and service needs, and skills when offering support to the elderly with dementia have been observed. In terms of expert domains, the cross-disciplinary approach has enhanced the service programme as fruitful contents and opportunities have been suggested to support the demented population.

CONCLUSIONS

It was unquestionably a fruitful experience to the engaged young people and institutions linked. Through constructive collaboration, thoughts and wide-ranged opinions have been shared to enhance the TeTT training programme and this inevitably elevated our teamwork. Similar projects are highly recommended in the future to further reach out the population with dementia and better meet the aims.

A1-08	Model School for Elderly Self-Reliance

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AIMS

The establishment of a community-based school model for the elderly is done to create knowledge on how to support the potential of the senior citizen and encourage them to become social entrepreneurs with a better life quality.

METHODS

1) the selection of five students from each selected "Self-reliance Demonstration School for the Elderly", with a total of eighty students from sixteen schools, 2) the basic training focusing on the practice to develop new knowledge and the collection of qualitative data to explain the results of the sixteen schools that developed a self-sufficiency model for the elderly to become a social enterprise, 3) the extension of the results to train older people to become social entrepreneurs from the selected schools for the elderly.

RESULTS

To examine the elements and mechanisms of the propulsion of self-reliance schools for the elderly as social enterprises. The information obtained from the questionnaire concerns the elderly's potential in becoming social enterprise entrepreneurs.

CONCLUSIONS

It was found that the factors that promote the success of senior schools as social enterprises include self-reliability, business development, strong cooperation among staff, support from the community and network partners, knowing how to build networks, the drive to become a creative and innovative community, and the ability to think outside the box to generate income.

A1-09	Mobile Phone Usage, Social Support, Attitude to Aging, and Depressive Symptoms among Older Adults

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AIMS

This study investigated critical factors affecting MPPU and filled the gap between social support and MPPU in older people.

METHODS

A cross-sectional study was conducted in community (n = 376) with questionnaires of Multidimensional Scale of Perceived Social Support (MSPSS), Geriatric Depression Scale (GDS-15), Attitudes to Aging Questionnaire (AAQ) and Mobile Phone Problem Use Scale (MPPUS).

RESULTS

80.9 % of older people used smartphones and spend less than three hours on mobile phone per day. MPPU was affected by social support (β = 0.16, P = 0.041), AAQ-psychosocial loss (β=1.11, P<0.001), AAQ-psychological growth (β = 0.51, P = 0.021), GDS-15 (β = 0.56, P = 0.036). The relationship between social support and MPPU was partially mediated by attitudes to psychosocial loss and physical change.

CONCLUSIONS

Almost half of older adults have MPPU. Positive social support may weaken depressive symptoms and physical change, which may increase MPPU in turn.

A1-10	Prevalence and Associated Factors with Psychological Distress among Patients with Chronic Obstructive Pulmonary Disease (COPD) in Hunan, China

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AIMS

To describe the status quo of psychological distress and explore its associated factors among COPD patients in China.

METHODS

Using cluster random sampling, 351 COPD patients participated in and completed a questionnaire survey from June 2021 to January 2022. Instruments included a self-designed social-demographic questionnaire, the Kessler Psychological Distress Scale (K10), the COPD Knowledge Question (COPD-Q), the Type D Personality Scale (DS-14), the COPD Assessment Test (CAT), and modified Medical Research Council Dyspnea Score (mMRC). Multivariate linear regressions were used in the final analysis.

RESULTS

Among 351 COPD patients, 87.5% had psychological distress. Our univariate analysis indicated that psychological distress scores were significantly associated with monthly household income (F = 2.861, p < 0.05), exercise frequency (F = 4.039, p < 0.01), type D personality (t = 5.843, p < 0.01), years with COPD (r = 0.156, p < 0.01), frequency of acute exacerbation (r = 0.114, p < 0.05), mMRC score (r = 0.301, p < 0.01), and CAT score (r = 0.415, p < 0.01). Multivariate linear regression showed that exercise frequency (β = -1.012, p < 0.01) was an independent protective factor of psychological distress in COPD patients, while type D personality (β = 3.463, p < 0.001), mMRC score (β = 1.034, p < 0.001) and CAT score were independent risk factors (β = 0.288, p < 0.001). No relationship was observed between psychological distress and knowledge of COPD.

CONCLUSIONS

Psychological distress is prevalent among COPD patients in China. Our findings emphasize the significance of evaluating exercise frequency, personality type, dyspnea, and the impact of COPD on daily living to prevent and manage psychological distress related to COPD. Given the high incidence of psychological distress among COPD patients, policymakers should ensure that mental health resources are easily accessible to this vulnerable population.

A1-11	**Age-related Differences in Prosocial Behaviour: A Meta-Analysis**

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AIMS	Prosocial behaviour is a broad concept that is defined as a voluntary behaviour that intends to benefit others. Although some studies found that people tended to be more prosocial as they age, some studies found different results. Therefore, the current study aimed to quantify the age-related differences in prosocial behaviour and identify the potential moderators by conducting a meta-analysis.
METHODS	The systematic literature search was conducted in Embase, PubMed, PsycINFO, Web of Science, and Scopus.
RESULTS	Thirty-nine studies were included in the meta-analysis. Older adults were more prosocial compared to younger adults (Hedges' $g = 0.418$). The age differences in prosocial behaviour may be moderated by the types of prosocial behaviour (helping, sharing, comforting, mixed). There was a medium age effect in sharing (Hedges' $g = 0.539$), a small age effect in mixed types of prosociality (Hedges' $g = 0.198$), but a nonsignificant age effect in helping (Hedges' $g = 0.275$) and comforting (Hedges' $g = -0.198$).
CONCLUSIONS	Older adults are more prosocial than younger adults in general, but the age-related differences could be moderated by types of prosociality, socioeconomic status, and the life expectancy of the country. Future research may develop more instruments to assess different types of prosociality and use neuroimaging techniques (e.g., functional magnetic resonance imaging) to understand the neural mechanisms of age-related changes in prosocial behaviour.

A2-01	**Study on the Quality of life of COPD Patients and Caregivers and the Actor-Partner Interdependence Effect**

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AIMS	To describe and explore the current status of quality of life of patients and caregivers with COPD. To determine the actor-partner interdependence effects between social support, psychological resilience, coping styles and quality of life of patients with COPD and their caregivers.
METHODS	In this study, 250 pairs of COPD patients and caregivers were surveyed in three hospitals in Hunan Province from June 2022 to January 2023. They completed the Social Support Scale（SSRS）, the Psychological Resilience Scale, the Medical Coping Questionnaire（MCMQ）, and the World Health Organization Quality of Life 26 item(WHO-QOL-26) Questionnaire. The actor-partner interdependence effects were estimated using the bootstrap method via Amos 24.0.
RESULTS	The total quality of life score was 48.35 ± 17.26 for COPD patients and 49.08 ± 15.24 for caregivers, both of which were lower than the norm in China. The quality of life scores of patients with COPD differed in terms of the diagnosis years, the acute exacerbations times, and the disease history(both $p<0.05$). Caregiver quality of life scores differed by caregiver gender, work status, and disease history(both $p<0.05$). The actor-partner interdependence model of quality of life influencing factors showed that for patients' quality of life, patients' psychological resilience had a subject effect ($\beta=0.283$, $p<0.001$); patients' social support had a subject effect ($\beta=0.21$, $p<0.001$); and caregivers' confrontation coping had an object effect ($\beta=0.149$, $p<0.05$). For caregiver quality of life, caregiver's psychological resilience had a subject effect ($\beta=0.147$, $p<0.05$); patient's social support had an object effect ($\beta=0.143$, $p<0.05$), and patient's psychological resilience had an object effect ($\beta=0.236$, $p<0.001$).
CONCLUSIONS	Nurses should focus on the actor-partner interdependence effects of quality of life for patients and caregivers with COPD and improve their psychological resilience and social support, thereby contributing to adapt to the disease and improve their quality of life.

A2-02	The Effect of Self-Reported Health and Spouse Health on Depression Symptoms in Chinese Older Adults: the Mediating Role of Social Participation

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AIMS	This study focuses on the relationship between self-reported health and spouse health and depression in older adults and the mediating role of social engagement. This study also explored the effects of gender, drinking, visual function, diet, quality of life, and economic level on the model.
METHODS	The analytic sample included 5119 older adults aged 60 and above. Prospective data were obtained from the Chinese Longitudinal Healthy Longevity Survey (CLHLS). Firstly, we used multiple linear regression to analyze the effects of covariates on the regression model. Secondly, we used partial least squares structural equation model to explore the correlation between self-reported health, spouse health, social participation, and depression. At the same time, the mediating effect of social participation and the moderating effect of 6 common or modifiable covariates, such as gender, drinking, visual function, diet, quality of life, and economic level, were analyzed.
RESULTS	Self-reported and spouse health were significantly correlated with social participation and depression, respectively ($p<0.01$). The higher self-reported health ($\beta=0.167$) and spouse health ($\beta=0.081$) scores, the better the social participation behavior. The higher the self-reported health ($\beta= -0.378$), spouse health ($\beta= -0.103$), and social participation ($\beta= -0.201$) scores of older adults, the less depression. Social participation mediates between self-reported health ($\beta= -0.034$) and spouse health ($\beta=-0.016$) to depression. In addition, the older adult's gender, drinking, visual function, diet, quality of life, and economic level were modulated.
CONCLUSIONS	Self-reported and spouse health can directly or indirectly reduce depression in older people, and social participation is an important mediating factor. This study suggests that the researchers should consider the effects of both self-reported and spouse health on depression in older adults and develop a variety of interventions to increase social participation in older adults to reduce the risk of depression.

A2-03	The Status and Influencing Factors of Life Space Constriction Among Rural Elderly Patients with Sarcopenia in Henan Province

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AIMS	To investigate the status of life space constriction among rural elderly patients with sarcopenia in Henan province and analyze influencing factors.
METHODS	By convenient sampling,265 rural elderly patients with sarcopenia over 65 years old in Henan province were selected and investigated using demographic questionaire, Chinese version of the Life Space Assessment, Geriatric Depression Scale-15,Modified Fatigue Impact Scale, Short Physical Performance Battery Scale.
RESULTS	The total score of life space of rural elderly patients with sarcopenia was 16~102(60.39±22.71).56.8% rural elderly patients with sarcopenia had life space constriction. Multivariate logistic regression analysis showed that age, numbers of chronic conditions, depressive state, fatigue state ,residential status and lower limb function constraction were influencing factors for life space constriction($p<0.05$）.
CONCLUSIONS	The incidence of life space constriction among rural elderly patients with sarcopenia in Henan province is high. It is recommended that medical staff focus on the life space level of the rural elderly patients with sarcopenia, especially older, depressive, fatigue, have a great number of comorbidities, lower limb function constraction, live with spouse and children. Targeted intervention strategies to expand the life space should be considered to improve physical performance and sarcopenia symptom.

| A2-04 | The Role of Cognitive Functions in Language Production in Older People |

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AIMS Abundant research shows that with healthy aging could come gradual decline in language production. It is not clear, however, whether language deterioration is a consequence of healthy aging or a downstream consequence of decline in other cognitive functions which are influenced by healthy aging. The purpose of this study was to determine what cognitive functions have the biggest effect on language production in older Cantonese adults.

METHODS 51 older Cantonese adults (over 65 years old) were recruited from Hong Kong for this study. Cognitive functions such as working memory, domain-general and domain-specific processing speed, and inhibitory control were measured. In addition, participants' linguistic history and lifestyle experiences were controlled. Picture naming task was used to measure language production. Bayesian mixed effects analysis was used to analyze the data.

RESULTS The findings show that among all the cognitive functions tested, domain-general processing speed has the biggest effect on language production in older adults. Linguistic experience, particularly exposure to first language, plays a key role in communication in older population as well.

CONCLUSIONS The findings of this study demonstrate that a mix of cognitive and linguistic skills are important predictors of successful communication in the older population. Moreover, researchers working on healthy aging need to include several cognitive functions and linguistic/lifestyle experiences in order to have more valid findings.

| A2-05 | Meditech – Empowerment of "Say No to Waste", Smart High-Tech Intervention for Reducing Household Pharmaceutical Waste |

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AIMS Our research focus on exploring social innovation model and advanced technology to solve the problem of household pharmaceutical waste and lack of medication compliance which empower various medication disposal procedures and improve the knowledge and awareness of household pharmaceutical waste. This is significant to guide the pharmaceutical waste disposal practice to found to be effective, efficient, safe, environmental friendly and user-friendly.

METHODS To solve the problem pharmaceutical waste, we conduct the action research. Firstly, we decomposed the whole process of medication, from collecting, classifying, packaging, distributing to retrieving. Series of problems will happened in the process, like lack of medication compliance, patients forget to take medicine, repeat medicine repeatedly or take the wrong medicine. And then, based on this, our intervention which focus on the household pharmaceutical waste problem use the intelligent smart pillbox called "Medicine Companion" and data management system "Medicine Cloud" which will link up the product remotely can collect the data about the medication behavior and enable us to solve the problem of medication non-adherence which can improve the effective utilization of medication and reduce the pharmaceutical waste.

RESULTS (1) Having a reminder about which medications to take and when can be handy, especially for the elderly who take medication every day. It may also help prevent serious negative health effects.
(2) Reduce the occurrence of errors in dosing, improve medication adherence and increase treatment satisfaction of the elderly. Reduce the pharmaceutical waste.
(3) Improve the knowledge and awareness of household medication adherence.

CONCLUSIONS The medication management equipment and data system will promote a habit of following medication compliance, improving awareness, and generating early medication data reports through the system. This research is of great significance as it aims to guide the pharmaceutical waste disposal practice towards effectiveness, efficiency, safety, environmental-friendliness, and user-friendliness, rather than merely proposing an abstract theory.

A2-06	**A Semantic-Based Cognitive Training Programme on Everyday Activities for Older Adults – A Feasibility and Acceptability Study**

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AIMS

As individuals age, cognitive functions and memory naturally decline, affecting their ability to carry out daily activities such as cooking, cleaning, managing finances, and shopping. Semantic memory encoding strategies have shown to improve cognitive and functional performance in older adults. An app-based program that incorporates these strategies, called Enhancing Memory in Daily Life (E-MinD Life), offers an accessible, cost-effective, and flexible solution. However, no studies to date have examined such an app-based program specifically focused on everyday activities.

This study aimed to assess the feasibility and acceptability of the E-MinD Life program targeted at older adults, constructed on the principles of semantic memory encoding strategies. Feasibility was evaluated by examining acceptance, engagement, and attendance, while acceptability was assessed by measuring perceived effectiveness, relevancy, clarity, and convenience.

METHODS

Eleven participants were recruited for the nine-week program, involving 18 sessions using E-MinD Life. Feasibility was determined by collecting data on recruitment and retention rates, session attendance, and duration. Acceptability was evaluated through a Likert scale questionnaire and open-ended comments. Descriptive statistics were used to analyze Likert scale responses, and qualitative analysis employed a constant comparative approach for open-ended responses.

RESULTS

Nine participants successfully completed the program. Overall, the majority found the program to be relevant, convenient, logical, and easy to understand. Participants perceived it as effective in addressing functional cognitive issues that impact everyday activities. Qualitative analysis revealed that participants enjoyed the program and found the interaction with the research team beneficial throughout the intervention.

CONCLUSIONS

E-MinD Life shows promise as a subject for further research to determine its effectiveness and the impact of semantic-based cognitive strategies on maintaining cognition and performance in everyday activities for older adults, both with and without cognitive impairment.

A2-07	**Hybrid Deep Learning based Dish and Diet Recognition with Customized Recommendation**

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AIMS

The role of diet in human health is paramount as it significantly impacts daily nutrient intake and metabolism. Consequently, it becomes crucial to assess daily food consumption or offer meal recommendations based on individuals' past intake to uphold human health. This holds particular significance for elderly and individuals with underlying diseases such as cardiovascular and cerebrovascular conditions or diabetes, as managing their diet effectively is vital in preventing the worsening of their conditions due to inappropriate food choices. However, the availability of practical and user-friendly systems for evaluating diets and providing meal recommendations on a daily basis is relatively limited.

METHODS

Our paper employs an approach that combines classical image segmentation with deep learning techniques, utilizing multiple models including ResNet and YOLO to accurately identify food images of various dishes and estimate their corresponding nutrient content. Nutrients information is collected via health authorities and validated with laboratory tests reports of common food items.

RESULTS

By synergistically combining classical image segmentation with advanced deep learning models, our study successfully achieves accurate dish identification and precise estimation of nutrient content. Leveraging the prediction results, the user's long-term dietary patterns for one or more days are thoroughly evaluated, analyzing both deficiencies and excesses in food intake. Furthermore, the analysis enables the generation of personalized recommendations for healthy eating, ensuring optimal nutrition and well-being.

CONCLUSIONS

Maintaining a healthy diet is a crucial aspect of leading a wholesome life in healthy ageing. However, the availability of real-time applications that assess users' diets and offer immediate dietary advice remains limited. Therefore, our paper introduces a deep learning-based system that prioritizes dish and diet identification, meal evaluation, and personalized recommendations. This innovative approach aims to bridge the gap and empower individuals with timely and tailored guidance for making informed dietary choices.

B2-01	Development and Validation of a Nomogram for predicting frailty risk in Chinese community-dwelling older adults with chronic diseases

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AIMS

To establish and validate a nomogram that predicts the risk of frailty for community-dwelling older adults with chronic diseases.

METHODS

We recruited 540 older residents from July 2018 to January 2019. The survey included general demographic information and chronic diseases. Frailty diagnosis was according to the Chinese version of the Tilburg frailty indicator. The independent risk factors of frailty associated with chronic diseases were screened using univariate and multivariate logistic regression analyses. Based on the independent risk factors, a nomogram model was developed to predict the risk of frailty for community-dwelling older adults with chronic diseases. The performance of the nomogram model was evaluated by calibration curve, receiver operating curve (ROC), calibration plot and decision curve analysis.

RESULTS

Frailty was identified in 45.2% (244 of 540) participants. Age (OR=1.054, 95%CI=1.029-1.080), stroke (OR=5.062, 95%CI=3.377-7.590), diabetes (OR=1.783, 95%CI=1.132-2.810), and cardiovascular disease(OR=2.440, 95%CI=1.432-4.158) were significant contributors to frailty risk, and remained significantly after adjusting for activities of daily living. Nomogram for predicting frailty in community-dwelling older adult was developed using these factors. ROC analysis showed that the area under the curve was 0.787 (95%CI=0.732-0.841) .The Hosmer-Lemeshow test yielded $\chi 2$ values of 10.347 and P values of 0.242, the model possesses well fitness and predictive ability (sensitivity of 63.9% and specificity of 84.3%). And the results of discriminatory ability of the adjusted model were sensitivity of 80.5 % and specificity of 73.9%. The nomogram demonstrated a high net benefit in the clinical decision curve

CONCLUSIONS

This study developed and validated a risk prediction nomogram for frailty among community-dwelling older adults with chronic diseases. The nomogram showed that the patients with higher age, stroke, cardiovascular disease and diabetes have a more increased risk of frailty. This nomogram provides an accurate visual tool to medical staff, caregivers, and older adults for prediction, early intervention, and graded management of frailty.

B2-02	To Construct an Effective Chinese Medicine Sleep-Aid Sacs for the Treatment of Senile Insomnia: the Delphi Method

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AIMS

To investigate various prescriptions of traditional Chinese medicine to formulate the best compound for sleep-aid sacs for insomnia treatment in the elderly.

METHODS

Literature review and group discussions were conducted to analyze and summarize the common pathogenesis of insomnia in the elderly. Following this, a draft proposal of a Traditional Chinese Medicine (TCM) compound was compiled. To ensure this medicinal compound was effective in curing insomnia, the Delphi method was used to consult 12 Chinese medicine experts on their views over the proposed compound for the treatment of insomnia in the elderly.

RESULTS

The positive coefficients (recovery rates) of the questionnaire for expert consultation in the three rounds were 100%. The expert authority coefficient was 0.94, whilst the Kendall's W coefficients were 0.196, 0.341, and 0.158, respectively, which were statistically significant by $\chi 2$ test (p < 0.05). The final prescription had 10 kinds of Chinese herbal medicines which included Dalbergia odorifera, Semen ziziphi spinosae, Chinese Eaglewood, Rose, Polygala Amflra, Radix Aucklandiae, Cassia Obtusifolia, Jasmine, Albiziae Cortex and Polygoni Multiflori Caulis.

CONCLUSIONS

The questionnaire recovery rates, expert authority coefficient, and degree of expert coordination in this study were high. Based on the Delphi method, the traditional Chinese medicine compound so developed for the treatment of insomnia in the elderly is scientific and reliable, and it can provide an effective reference for the study of insomnia treatment with TCM in the elderly.

B2-03	Implementing AI-driven Prognosis System in Knee Osteoarthritis Peri-operative Care: a pilot study

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AIMS

To enhance knee osteoarthritis (KOA) peri-operative care by implementing AI-driven prognosis system. To investigate patients' understanding of their knee health and orthopaedist's perception of the benefits rendered by the above system.

METHODS

1. Develop an AI-based multimodal big data analysis platform which combines radiographs, motion-analysis and self-reported questionnaires for precise prognosis of KOA and implement the prognosis system in an orthopaedic clinic.
2. Recruit new adult patients presenting at the clinic for KOA-related symptoms.
3. Conduct structured interview with the patients and semi-structured one with the orthopaedist after clinic consultation.

RESULTS

Patients can know their knee condition in a long-term scale and surgeons may schedule knee surgery also in a long-term scale with the help of prognosis system.

CONCLUSIONS

AI prognosis system may benefit both KOA patients and healthcare providers.

B2-04	The Relationship between Nutritional Status and Cognitive Function among the Elderly Patients with Chronic Diseases: The Mediating Role of Sleep Quality

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AIMS

This study aimed to test the mediating role of sleep quality in the relationship between nutritional status and cognitive function in elderly patients with chronic diseases.

METHODS

A cross-sectional study was conducted among 231 elderly patients with chronic diseases who were admitted in a district tertiary hospital, Shenzhen, China from January to November 2022. Data were collected by using a general demographic data questionnaire, the Mini Nutritional Assessment Short Form (MNA-SF) for nutritional status, the Montreal Cognitive Assessment (MoCA) for cognitive function, and the Pittsburgh Sleep Quality Scale (PSQI) for sleep quality. Bootstrap test was employed for statistical analysis.

RESULTS

The age of the participants ranged from 60 to 95 years, with an average of 71.7 ± 8.6 years. The average MNA-SF score was 11.5 ± 1.9 in the elderly patients, and 46.8% of them were at risk of malnutrition (MNA-SF score ≤ 11). Over half (55%) of the elderly patients had cognitive decline (MoCA score < 26). The average PSQI score was 9.0 ± 3.5. The elderly patients with compromised nutritional status were more likely to experience cognitive decline ($\beta = 0.730$, $P < 0.001$) and poor sleep quality ($\beta = -0.797$, $P < 0.001$). Cognitive function of the elderly patients was significantly associated with sleep quality ($\beta = -0.231$, $P = 0.004$). The relationship between nutritional status and cognitive function was significantly mediated by sleep quality ($\beta = 0.184$, $P < 0.001$), and the mediating effect accounted for 20.1% of the total effect.

CONCLUSIONS

Nutritional status can directly affect cognitive function of elderly patients with chronic diseases and indirectly affect their sleep quality. More attention should be paid to monitoring and improving nutritional status and sleep quality, thus reducing the risk of cognitive impairment in elderly patients with chronic diseases.

B2-05	Development and Validation of a Risk Prediction Model for Cognitive Frailty in Elderly Patients with Type 2 Diabetes

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AIMS   The purpose of this study was to develop and internally validate a model to identify elderly patients with type 2 diabetes who are at high risk of cognitive frailty.

METHODS   This cross-sectional study enrolled elderly patients (age≥60 years) with type 2 diabetes who were admitted to the Department of Endocrinology at a district tertiary hospital in Shenzhen, China from September 2021 to December 2022. Participants were defined as having cognitive decline if they complained of memory loss, had a Montreal Cognitive Assessment (MoCA) scale score below the cutoff, and had a FRAIL score ≥ 3. Eligible participants (n=508) were randomly divided into a development set (n=370) and an internal validation set (n=138). Multivariate logistic regression analysis including sociodemographic variables, behavioral characteristics, health status, and mental health parameters, was performed to establish a prediction model of cognitive frailty with the development set and was then validated with the internal validation set. A nomogram was used to visualize the prediction model. The discriminant validity and calibration of the nomogram were evaluated using the area under the receiver operating characteristic (ROC) curve and the Hosmer-Lemeshow test, respectively.

RESULTS   Among the enrolled participants, 117 (23%) had cognitive frailty. Regular exercise, nutritional status, disease duration, history of hypoglycemia, HblAc, and history of chronic kidney disease were identified as the significant predictors by multivariate logistic regression analysis for cognitive frailty in elderly patients with type 2 diabetes and were included in the nomogram. The ROC value of the prediction model was 0.838 (95% Confidence Interval [CI]:0.789-0.887) in the test set and was 0.895 (95% CI:0.827-0.964) in the internal validation set, indicating a good discriminant validity. The calibration curves showed good agreement between the model predictions and actual observations; the P values of Hosmer-Lemeshow test were 0.94 and 0.74 for the test set and the internal validation set, respectively (both were greater than 0.05).

CONCLUSIONS   The prediction model and the nomogram developed in this study were promising and convenient tools to identify elderly patients with type 2 diabetes at high risk of cognitive frailty. The findings would contribute to better clinical care for such at-risk populations.

B2-06	Experiences of Parenting Concerns of Patients with Cancer: A Meta-Synthesis of Qualitative Studies

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AIMS   This study aimed to systematically review and synthesise existing qualitative research evidence exploring the experiences of cancer patients in raising children, so that medical staff can understand the feelings and treatment preferences of cancer patients, and provide reference for clinical development of targeted nursing interventions.

METHODS   Four English (Pubmed, Web of Science, Medline and Cochrane Library) and four Chinese (CNKI, Wanfang, CBM and VIP) databases were searched for qualitative studies of the real-life experiences of raising children in cancer patients s from the establishment of the library to April 2023. The methodological quality of the included literature was assessed using the Australian JBI quality evaluation criteria for qualitative research (2016). Qualitative data were extracted, summarized, and meta-synthesized.

RESULTS   A total of nineteen studies were included in this meta-synthesis, covering seven different countries and 335 cancer patients. 80 results were extracted from these the included literatures, which were combined into 11 categories, and finally formed 4 themes: cancer patients are concerned about the impact of their disease on their children, the challenges of parenting, coping strategies, multifaceted parenting needs.

CONCLUSIONS   Cancer patients have severe psychological stress when raising children, which will reduce their quality of life and affect treatment decisions. Nurses should pay attention to the inner experience and needs of such patients, and formulate targeted nursing support.

A3-01	Life Expectancy, Burden of Diseases and the Role of Sociodemographic Factors and Health Spending among Western Pacific Region Older Adults: A 1995 to 2019 Population-Based Data Analysis

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AIMS

The aim of this study was to evaluate the associations between sociodemographic factors, health spending, disease burden, and life expectancy of older adults in West Pacific Region (WPR).

METHODS

The current work analysed the public available Global Burden of Disease (GBD) 2019 estimates of those aged 70+ years in 22 WPR countries between 1995 and 2019. The GBD 2019 summary measures of death rates, Years lived with Disability (YLDs), and others were used, at 70+ .

The 22 countries of the sample, were China, Mongolia, Japan, South Korea, Cambodia, Laos, Vietnam, the Philippines, Malaysia, Brunei, and Singapore, Australia, New Zealand, Papua New Guinea, Fiji, Kiribati, Marshall Islands, the Federated States of Micronesia, Samoa, Solomon Islands, Tonga, and Vanuatu.

Among others, correlation tests, generalized additive mixture were applied to examine the associations of interest. All data were analysed using SPSS 25 and R 4.1.0 on RStudio 1.4.1717.

RESULTS

The highest life expectancy among older males and females was reported in Singapore and Japan. Solomon Islands had the lowest LE among the 22 countries in male and females.

Sociodemographic development index (SDI) was related to the YLDs and mortality rate. It was shown that the higher the SDI index the lower the YLDs and the mortality rate.

Health spending when tested, was not consistently linked with disease burden on older adults.

Non-communicable diseases, YLDs rates and mortality rates attributable to different risk groups were related to higher healthy life loss and shorter life expectancy respectively, particularly in low- and middle-income countries of the WPR.

When exploratory cluster analysis applied, three clusters of countries with similar characteristics were identified.

CONCLUSIONS

Non-communicable diseases were related to less life expectancy, while the time living in poor health did not progress among the older adults living in WPR.

Country specific healthy ageing strategies could be prioritized in the area.

A3-02	Construction and Validation of a Frailty Risk Prediction Model for Elderly Stroke Patients

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AIMS

To construct a model for predicting the risk of frailty in stroke and to evaluate the predictive efficiency of the model to provide a basis for early identification and prevention of frailty in elderly stroke patients.

METHODS

Data from the China Health and Retirement Longitudinal Study (CHARLS) were used, and the study cohort was randomly divided into a training set and a validation set, with proportions of 70% and 30%. LASSO regression analysis was used for screening, and logistic regression prediction models were constructed based on univariate analysis results and Lasso variable screening. Factors associated with debilitation in stroke patients were explored. Calibration curves were used to judge the fit of the model and decision curve analysis to test the discriminatory power of the model.

RESULTS

1933 stroke patients from the CHARLS database collected in 2015 (n=563) and 2018 (n=1370) were included in the final analysis. A total of 1453 (75.17%) had debilitating symptoms.The differences in age, education, marital status, living alone, hypertension, dyslipidaemia, social activity, sleep duration at night, self-perceived health status and instrumental activities of daily living were statistically significant (all P < 0.05).age, nighttime sleep time, self-feeling healthy, equilibrant, nervousness and anxiety, and living alone were independent risk factors for the development of debilitation in elderly stroke patients, and the area under the ROC curve of the column line graph for the training and validation groups (are a under curve (AUC) was 0.833 and 0.8376 in the training and validation groups, respectively.

CONCLUSIONS

The model constructed to predict the risk of frailty in elderly stroke patients has good predictive efficacy and can be used to screen clinical caregivers for people at high risk of frailty.

A3-03	**Research Progress on the Application of Nursing Informatization in the Health Management of Chronic Diseases in the Elderly-Based on CiteSpace Visual Analysis**

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AIMS	Systematic analysis and summary of nursing informatization on disease management and improvement of health status of elderly patients with chronic diseases.
METHODS	Taking CNKI database as the data source, CiteSpace software was used to conduct bibliometric analysis and visual map drawing of the application research of nursing informatization in health management from 2003 to 2023 to understand the current status, trend and hot spots of research in this field, and reveal the future development direction.
RESULTS	The results show that: (1) the annual number of research publications in this field fluctuates and increases with time, especially after 2012, indicating that research in this field is increasingly valued; (2) The disciplines are mainly distributed in clinical medicine, medical and health policy and law and regulation research, Chinese politics and international politics, medical education and medical marginal disciplines, and computer software and computer applications. (3) Beijing, Anhui, Hubei, Sichuan, etc. are the current hot research areas. (4) Words such as Internet +, community chronic disease management, APP, and pension have become research hotspots, and research hotspots continue to develop over time.
CONCLUSIONS	Nursing informatization has a low-cost positive effect on disease management, improving health status and improving the quality of life of elderly patients with chronic diseases

A3-04	**Association between Solid Cooking Fuel Use and Dementia in Older Chinese Adults: The Mediating Effect of Depression**

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AIMS	This study aimed to explore the association between household solid cooking fuel use and dementia prevalence and the mediating effect of depression on this association.
METHODS	Cross-sectional and retrospective longitudinal research was used. Data derives from the China Health and Retirement Longitudinal Study (CHARLS). Structural Equation Modeling (SEM) with maximum likelihood estimation was employed to examine the indirect effect of depression. Sample representativeness analysis and sensitive analysis were used to validate the results.
RESULTS	A total of 3404 (2018) and 1379 (2015 to 2018) older participants ($\geq$65) were enrolled in the cross-sectional and retrospective longitudinal analyses, respectively. The results showed that solid cooking fuel use was associated with an increased dementia prevalence (adjusted OR = 1.44) from 2015 to 2018. The indirect effect of depression on this association explained 7.14% and 13.11% variances in the cross-sectional and longitudinal mediating model, respectively. The sensitivity analysis confirmed this result.
CONCLUSIONS	Household solid cooking fuel use is a risk factor for the development of dementia, and depressive symptoms partially accounted for this association. The use of improved cookstoves and clean fuel in households and air cleaners and early intervention in depression may reduce the incidence of dementia.

A3-05	Study of the Willingness and Influencing Factors of Nursing Undergraduates for Geriatric Nursing

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AIMS	To explore the willingness of nursing students to participate in the elderly care.
METHODS	A total of 257 nursing graduates were surveyed by questionnaire survey method.
RESULTS	The attitude assessment scale of the elderly included appreciation and bias. Among them, the average score of appreciation dimension of was 49.241, and the bias dimension was lower than 43.805. There were differences in the attitude of nursing students towards the elderly in the places of origin, gender, living time with the elderly, and whether they are willing to participate in nursing. And the logistic regression analysis showed the main influencing factors of the attitude of nursing students towards the elderly were related to one-child a family or not (P <0.001, OR = 2.019), had prior experience with elderly caregivers (P <0.001, OR = 1.882), time spent living with the elderly (P=0.022, OR=1.695), and whether they have attended an elderly care course (P=0.027, OR=1.395).
CONCLUSIONS	The willingness of nursing students to engage in geriatric nursing is positive, and geriatric nursing courses should further encourage students to participate in clinical and community practice.

A3-06	Barriers and Facilitators to Participation in e-Health Interventions in Older Adults with Cognitive Impairment: An Umbrella Review

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AIMS	This study aims to identify barriers and motivating factors influencing the participation of older individuals with mild cognitive impairment or dementia in e-health interventions and develop appropriate intervention strategies.
METHODS	The Joanna Briggs Institute umbrella review methodology was employed, and relevant literature from various databases was searched. Inclusion criteria were applied, and methodological quality assessments were conducted using appropriate tools. The Unified Theory of Acceptance and Use of Technology framework was utilized to map barriers and incentives to participation, and behavior change techniques were employed to develop theoretically informed implementation strategies.
RESULTS	The review included 27 relevant reviews, covering a total of 644 primary studies. From these reviews, 14 factors were identified, and the following four factors were found to have the strongest supporting evidence for participation: availability of e-technology, level of support from the social environment, own e-health technology literacy, and perceived level of benefit. Based on these findings, six implementation strategies were developed using behavior change techniques, including the development of more targeted, simple, and accessible electronic intervention procedures, encouraging supervision and feedback from caregivers and carers, providing a quiet and comfortable intervention environment, fostering increased digital health literacy in the older population, modeling behavior, and adopting the right approach to stress management.
CONCLUSIONS	By employing technology acceptance and an integrated theoretical framework, this study has identified structural factors for future interventions. The umbrella review conducted here is expected to inform the development of implementation strategies based on an intervention planning approach that will facilitate the engagement of individuals with mild cognitive impairment and dementia in eHealth interventions.

A3-07	Overview of the Scope of the Classification of Types of Social Participation of Older Persons

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AIMS
The scope of the division of social participation types of the elderly at home and abroad was reviewed to provide reference for the social participation of the elderly and its related research.

METHODS
Systematic search of relevant studies on the social participation of the elderly in Chinese-British databases, and the search period was established until March 2023.

RESULTS
A total of 20 literatures from 9 countries/regions were included, and after literature research, it was found that China and other countries have differences in the division of types of social participation of the elderly, which is determined by the national conditions of each country, according to previous research and China's national conditions, the social participation of the elderly is divided into six types: productive activities, leisure and entertainment activities, fitness and exercise activities, cultural participation, social activities, and political activities.

CONCLUSIONS
It is necessary to improve the policy of guaranteeing the social participation of the elderly, enrich the forms of social participation of the elderly, continue to encourage and promote the social participation of the elderly, and promote the development of China's cause of the elderly.

A3-08	Association between Community Activity Participation and Intrinsic Capacity: A Community-Based Study

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AIMS
This study aims to examine the association between activity participation and change in intrinsic capacity (IC).

METHODS
Participants were community-dwelling older people aged 60 years or above. Participants' IC were assessed at baseline and one-year follow-up. Their activity participation records were also collected for one year. Mixed-effects regression was used to examine the association between activity participation and change in IC.

RESULTS
A total of 7,357 participants were interviewed. Their mean age was 74.72 years, 80% of which were women. After adjusting for age, sex, education, marital status, and number of diseases, more activity participation was significantly associated with greater improvement in IC ($\beta = 0.005$, 95% CI [0.003, 0.008]).

CONCLUSIONS
In general, more activity participation was associated with greater improvement in IC.

| A3-09 | **Discovering a Healthy Lifestyle in the Longevity Era and Building a Perfect New Healthy Living Community for the Longevity era** |

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AIMS

We are committed to creating a new type of healthy living community with multi-generational integration and longevity, enabling residents to live a long and healthy life through holistic wellness, vibrant living, professional continuum of care and international high-end medical treatment. Get ready to provide a healthier lifestyle for future generations.

METHODS

We are now proceeding a new healthy living community development in Hengqin Island, in which we will advocate a holistic approach for health and healthy living with three main directions: prevention, treatment and support.

The community will be able to live a long and healthy life through a combination of the followings: reshaping of human intimacy, vibrant life, continuous realization of personal values, development of multiple interests, maintaining happiness, upholding personal dignity, integration of nature and safe environment, nutrition, exercise, positive emotions, continuous professional development and quality medical care.

The project is now under construction and is expected to be completed in phases from late 2025 to late 2026 for phased occupancy, and our target group is primarily on prospective retirees or recent retirees, mainly aged 50+, who will be able to come and live or have a vacation with their young families.

RESULTS

Our operations team will work diligently with a number of universities to give input into a comprehensive health management system and conduct research for our community to understand more how residents can maintain or improve their personal health as a result of living in this new healthy community, thereby affirming our philosophy is in force.

CONCLUSIONS

The longevity era brings unprecedented challenges to societies, families and individuals in human history. Residents are encouraged to start developing healthy lifestyle at a young age. The new healthy living community that we advocate for multigenerational integration and longevity will be the new community development trend for the longevity society.

| B3-01 | **Evidence-based Implementation of Mild Cognitive Impairment Screening in Elderly Inpatients** |

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AIMS

There were 15.5% (38.77 million) of people aged 60 years or older have mild cognitive impairment (MCI) in China. And there is a consensus for primary screening of this population. It is important to screen elderly inpatients for MCI, considering their high risk. This project aimed to promote MCI screening rate in elderly inpatients through the implementation of an evidence-based practice (EBP) project.

METHODS

A Population, Intervention, Comparison, and Outcome (PICOT) question was established to guide literature search. Found articles were critically appraised using the JBI critical appraisal tools. Following the critical appraisal, the steps of EBP were utilized to implement a new MCI screening flow for elderly inpatients in a 28-bed neurology unit. Outcomes of the practice change were evaluated by comparing adherence of best evidence, screening rate, nurses' knowledge of evidence and attitude to MCI screening before and after implementation.

RESULTS

Twelve articles were critically appraised. After implementation, data demonstrated an increase in the screening rate of elderly inpatients (95% vs. 15%, $p<0.001$), adherence of best evidence, nurses' knowledge of evidence (87.75 ± 7.13 vs. 68.87 ± 8.58, $p<0.001$) and attitude to MCI screening (92.08 ± 4.77 vs. 78.00 ± 13.77，$p<0.001$).

CONCLUSIONS

Evidence-based strategies to promote MCI screening among elderly inpatients are achievable. Engagement of key stakeholders and timely roll out of EBP changes are important for successful implementation.

B3-02	Strategies for Promoting Healthy Aging through Evidence-Based Programs in Hawaii

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AIMS

This study examined strategies for implementing evidence-based programs to promote healthy aging among culturally diverse populations in Hawaii. Since 2003, the Hawaii Healthy Aging Partnership (HAP)—a coalition of government agencies, community organizations, and the university—has been crucial in linking clinical support with community resources for lifestyle change. The HAP offers "Enhance®Fitness" (EF) for fall prevention and "Better Choices Better Health" (BCBH) for self-management of chronic health conditions.

METHODS

Between 2003 and 2023, the strategies used to develop partnerships, build the community's capacity to implement evidence-based programs, and secure funding were assessed. A pretest-posttest design was used to measure the impacts of the programs in promoting healthy aging, such as changes in functional fitness (chair stands, arm curls, and the up-and-go test) and chronic disease-related outcomes (symptoms, medical visits, engagement in exercise). Cost-saving analysis was also conducted.

RESULTS

The strategies for achieving the HAP goals were identified for the following three phases: Startup, growth, and expansion. Barriers and attempts to overcome them were discussed. By 2023, the EF and BCBH programs have served over 5,000 older adults. One-fourth of the participants were White, 23% were Japanese, 22% were Filipino, 16% were Hawaiian or part Hawaiian, and 14% were other races. Common chronic health conditions among the participants were: high blood pressure (46%), arthritis (41%), and diabetes (29%). After 16 weeks of EF, all functional fitness measures showed significant improvements, and the net saving was $625.01 per participant. Six-month after the BCBH workshop, the participants reported fewer symptoms, fewer medical visits, more exercising, and fewer falls.

CONCLUSIONS

The HAP has successfully implemented two evidence-based programs and reached many older adults from diverse cultural backgrounds. However, the sustainability of the HAP depends on the commitment of state and local governments to prioritize health promotion among competing needs.

B3-03	Trajectories of Intrinsic Capacity, their Predictors and their Associations with Independence in Community-Dwelling Older People: A Longitudinal Study in China

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AIMS

Ensuring the preservation of intrinsic capacity in the older people is a critical imperative for the promotion of healthy ageing. Nurses play a key role in identifying the changes in intrinsic capacity and intervening accordingly to delay its decrease in older people. However, nurse-led analyses of intrinsic capacity trajectories are scarce.

This study aims to 1) identify the trajectories of intrinsic capacity; 2) examine the relationship between social determinants of health (SDoH), including personal, family, and social factors and the intrinsic capacity; and 3) their associations with independence among community-dwelling older people in China.

METHODS

Data from the national longitudinal study, which surveyed older adults in China. The intrinsic capacity was measured using the WHO-recommended tool. Group-based trajectory models were applied to identify potential heterogeneity in longitudinal changes over time. Logistic regression analyzed predictors of intrinsic capacity changes and the relationship with independence.

RESULTS

A total of 3893 older adults from the cohort study were included in the study. Three different trajectory groups of intrinsic capacity were identified: Increase (15.7%), Stable (52.7%), and Decline (31.6%). Predictors that contributed to the changes in intrinsic capacity. These predictors are grouped as 1) personal factors (i.e., Age, gender); 2) family factors (i.e., more than 3 children), and 3) social factors (i.e., social participants). Decreased cognitive function, psychology status and locomotion at baseline predicted new Activities of Daily Living and Instrumental activities of daily living dependence after five years.

CONCLUSIONS

Three trajectories of intrinsic capacity have been identified in the Chinese elderly population, the social determinants factors were associated with different trajectory groups of intrinsic capacity, which could help to guide the timing and focus of prevention strategies. It is imperative for healthcare providers in primary community settings to identify risk factors associated with decreased intrinsic capacity. Early prevention or intervention of these determinants can assist in maintaining or delaying the rate of decline in intrinsic capacity, ultimately leading to improved overall health outcomes.

B3-04	Older Adult's Productivity in a Family-Like Care Facility: A Narrative Inquiry

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AIMS

Not all woman were being gifted with children, but they have the vocation to care for homeless children, as their mother and a family. Thus, this narrative inquiry aimed to explore and understand how the retired SOS Mothers interpret their everyday lived experiences and productivity as foster mothers of homeless children in a family-like facility in Davao City.

METHODS

A qualitative narrative inquiry was utilized among the four (4) retired SOS mothers selected purposively conducted in a family-like care facility in Davao City. Data were analyzed using the thematic-narrative analysis which focuses on the study of the content of narratives and identify the themes that appear in stories.

RESULTS

The study has brought out several themes which the researchers found interesting which were: (1) Living productive, (2) Support Appreciation, (3) Contentment, and (4) Mother's Love.

CONCLUSIONS

There is a sense of fulfillment to retire. But for the retired SOS mothers, their fulfillment was to see their SOS children become independent, integrated in the society and successful. This study was an eye-opener to everyone and have some realizations doing this study that also emerged. First, the support that our older adults should receive must be able to complement their needs – especially for their primary needs. Second, the government may not be able to provide everything, employers may have something to extend to their very hardworking employees who have served decades and can replicate some services from the family-like care facility. Lastly, as health is really vital to enjoy retirement, there has to be constant support for maintenance medications and even having free medical checkup as preventive measures against more complicated conditions.

B3-05	Dyadic Effects of Functional Limitations on Depressive Symptoms among Korean Older Couples

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AIMS

Although the association between functional limitations and depressive symptoms in older adults has been well documented, very limited studies have examined this association within married couples. This study explored the relationship between functional limitations and depressive symptoms within married couples in Korea.

METHODS

Data from the Korean Longitudinal Study of Ageing (KLoSA 2020) were used (N = 2,113 heterosexual couples). Functional limitations were defined as limitations in activities of daily living (ADLs) and instrumental activities of daily living (IADLs). Depressive symptoms was evaluated using the 10-item Center for Epidemiologic Studies Depression Scale (CES-D10). Actor-partner Interdependence Model (APIM) was employed to examine the relationship between functional limitation and depressive symptoms in couple dyads.

RESULTS

Gender difference in depressive symptoms was not significant. For both husbands and wives, experiencing more functional limitations was reciprocally linked to greater depressive symptoms at the personal level. Moreover, both actor and partner effects of functional limitations on depressive symptoms were observed.

CONCLUSIONS

The empirical findings in this study contribute to the field of the dyadic relationship between functional limitations and depressive symptoms in Korean couples. Provision of ADL/IADL assistance and targeted interventions for depression in older adults should therefore be to consider couple context. Further research utilizing longitudinal data is recommended.

B3-06   **The Effectiveness of a Community-Based Pain Self- Management Program for Older Adults with Chronic Pain in Hong Kong**

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AIMS

This retrospective evaluation aimed to compare the effectiveness of a community- based Brief Pain Self-Management Program (BPSM), using cognitive- behavioral therapy and exercise, with 2 control programs in managing negative emotional states and improving self-efficacy in older adults with chronic pain in Hong Kong.

METHODS

187 community living older adults with chronic pain aged between 60 and 91 were randomly allocated to one of the three 8-week intervention programs: BPSM (n=57), exercise group (n=48), and pain educational class (n=61). All participants were provided with weekly in-person group sessions organized in elderly community centers. Outcome measures included Pain self-efficacy questionnaire (PSEQ), Chinese Depression Anxiety Stress Scales 21 (DASS21), Roland-Morris Disability Questionnaire (Hong Kong Chinese Version) and tailor-made questionnaire which is designed to assess the degree of "Living with Pain" attitude with questions related to the behaviors in the daily life. These outcome measures were assessed 1 to 2 week before the treatment group, immediately after the treatment session and at 1-month follow-up.

RESULTS

All three programs demonstrated effectiveness in reducing depressive and anxiety symptoms. Pain-related self-efficacy significantly improved across all programs. The BPSM program showed a more lasting improvement in pain-related self-efficacy compared to the exercise group. There were no significant differences between the groups in terms of depression, anxiety, and stress symptoms.

CONCLUSIONS

The BPSM program demonstrated effectiveness in reducing depressive and anxiety symptoms and showed sustained benefits in enhancing pain-related self-efficacy for older adult with chronic pain in Hong Kong.