

A Culturally Adapted Cognitive Activation Program for Older Adults with Cognitive Impairment in Taiwan

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- 1.Filling the Knowledge Gap: While CST benefits dementia globally, its application within Taiwanese care remained unstudied. This study fills that gap by creating a culturally adapted Cognitive Activation Program (CAP) tailored specifically to Taiwan's healthcare context.
- 2.Reversing Cognitive Decline: Unlike the control group that suffered typical cognitive decline, CAP participants achieved remarkable improvements across global cognition. Average MoCA scores leaped from 12.83 to 20.78, demonstrating powerful efficacy over treatment as usual.
- 3.Proving Sustained, Scalable Value: The findings prove that combining individual and maintenance phases yields sustained cognitive gains in executive function and attention. This establishes CAP as a highly scalable, culturally responsive non-pharmacological solution for community care.

INTRODUCTION	METHODS	RESULTS	CONCLUSIONS	REFERENCES
Non-pharmacological interventions play a central role in dementia care, yet culturally adapted cognitive programs for Chinese-speaking populations remain limited. Cognitive stimulation therapy (CST) has demonstrated cognitive benefits in people with dementia, but its implementation within Taiwanese dementia care services has not been well studied. This study developed and evaluated a culturally adapted Cognitive Activation Program (CAP) based on the Hong Kong CST model and tailored to the Taiwanese cultural and healthcare context..	A quasi-experimental, nonrandomized, controlled before-and-after design was used. Thirty-five older adults with cognitive impairment (Clinical Dementia Rating 0.5–2) were allocated to either an intervention group receiving a 14-week CAP or a control group receiving treatment as usual. The CAP consisted of an Individual Cognitive Activation Program (iCAP, weeks 1–7) followed by a Maintenance CAP (mCAP, weeks 8–14), delivered twice weekly. Cognitive outcomes were assessed at baseline, week 7, and week 14 using the Cognitive Abilities Screening Instrument (CASI) and the Montreal Cognitive Assessment (MoCA). Paired t-tests and generalized estimating equations were applied to evaluate within- and between-group changes over time.	After completion of iCAP, the intervention group showed significant improvements in global cognition, particularly in orientation, visuospatial/executive function, and naming. In contrast, the control group demonstrated cognitive decline, most notably in language and abstraction. Following mCAP, sustained cognitive gains were observed in the intervention group, with CASI scores increasing from 61.23 to 77.76 and MoCA scores from 12.83 to 20.78 (both $p<0.001$). Significant group-by-time interactions ($p<0.001$) were identified across multiple cognitive domains, including attention, abstraction, language, and fluency of thought.	This culturally adapted Cognitive Activation Program was associated with significant and sustained improvements in cognitive function among Taiwanese older adults with cognitive impairment. CAP represents a feasible, scalable, and culturally responsive non-pharmacological intervention that can be integrated into community- and home-based dementia care services. Keywords: Cognitive activation program, cognitive impairment, dementia, semantic fluency, cognitive intervention	1.Spector, A., Thorgrimsen, L., Woods, B., Royan, L., Davies, S., Butterworth, M., & Orrell, M. (2003). Efficacy of an evidence-based cognitive stimulation therapy programme for people with dementia: randomised controlled trial. <i>British Journal of Psychiatry</i>, 183(3), 248–254. https://doi.org/10.1192/bjp.183.3.248 2.Wong, G. H. Y., Yek, O. P. L., Zhang, A. Y., Lum, T. Y. S., & Spector, A. (2018). Cultural adaptation of cognitive stimulation therapy (CST) for Chinese people with dementia: multicentre pilot study. <i>International Journal of Geriatric Psychiatry</i>, 33(6), 841–848. https://doi.org/10.1002/gps.4663 3.Woods, B., Rai, H. K., Elliott, E., Aguirre, E., Orrell, M., & Spector, A. (2023). Cognitive stimulation to improve cognitive functioning in people with dementia. <i>Cochrane Database of Systematic Reviews</i>, (1). https://doi.org/10.1002/14651858.CD005562.pub3 CONTACT  林承儒 Chen-Ju Lin gloria993130@gmail.com ALZHEIMER'S ASSOCIATION AAIC>26