

Conclusions: Of note, age did not significantly differ across clusters in contrast to existing research in which cognition is Objectively measured. That is, perceived cognitive errors are significantly associated with lower psychological well-being for both young and older adults with BD.

P21: Cultural adaptations of an evidence-based mental health intervention for older adults with depression and anxiety in a low- resource setting in Peru.

Authors: Oscar Flores-Flores, Diego Otero-Oyague, Vanessa Patiño, Tatiana Cruz, Ivonne V. Carrión, Dafne Lastra, Alejandro Zevallos-Morales, Jose F. Parodi, PhD, Joseph J. Gallo, MD MPH, Suzanne Pollard, Lesley Steinman

Objectives: Effectively adapting innovative mental health evidence-based community interventions is critical, yet underdeveloped, for reducing the treatment gap among older adults with depressive and anxiety symptoms. The Program to Encourage Active, Rewarding Lives (PEARLS) is an evidence-based community intervention designed to reduce symptoms of depression and improve quality of life among older adults. PEARLS includes 6-8 sessions of in- home visits of trained social workers to deliver a multi-component intervention: problem- solving, behavioral activation activities, and psychoeducation. We used the Framework for Reporting Adaptations and Modifications-Enhanced (FRAME) to document process and changes made to adapting PEARLS, branded as VIDACTIVA (Vidas Activas y Valiosas) in an urban, low- resource community in Lima, Peru.

Methods: We obtained data in two stages. First, we conducted formative interviews with several stakeholders, including older adults, health professionals, community health workers (CHWs), city officials, and church leaders from the community. Second, during the iterative pilot phase, we used a mixed-Methods approach, integrating interviews with fidelity assessments, field notes, and training evaluations. We employed an iterative, rapid content analytic approach to triangulate findings from multiple sources and stakeholders, allowing us to identify needed adaptations.

Results: We made several adaptations. Most adaptations occurred during the formative phase focused on the training plan for CHWs (VIDACTIVA delivers). We also made adaptations of the components of the intervention (problem-solving) and in the way supervision sessions were conducted. Adaptations involved researchers, CHWs, health professionals and older adults. All adaptations were fidelity-consistent with PEARLS. Due to this is the early stage of implement VIDACTIVA, the most common goal across adaptations was increased feasibility and acceptability of the intervention.

Conclusions: The current study is an early effort to apply FRAME in the low-income urban context in Lima, Peru. FRAME guided systematic documentation of the adaptation decision- making process while successfully balancing fidelity. These observations lend insight to continue implementation efforts of VIDACTIVA intervention, which is undergoing a pilot clinical trial.

P22: Comparative Analysis of Efficacy of Intravenous Ketamine and Intranasal Esketamine in Treatment-Resistant Depression across Age Groups

Authors: Charles J. Hutchison, Adriana Patricia Hermida, MD, Anahit Keshishyan, MD, Brandon Kitay, Anthony Chatham, Rachel Hershenberg, Patricio Riva Posse, MD, Patricio Riva Posse, MD