Table 2. Summary of Study Results, Outcome Measures, and Statistical Findings

Study	Hampstead, Sathian, Phillips, Amaraneni, Delaune, & Stringer (2012)	Greenaway, Duncan, & Smith (2013)	Kinsella, Mullay, Rand, Ong, Burton, Price, Phillips, & Storey (2009)	Rapp, Brenes, & Marsh (2002)	Troyer, Murphy, Anderson, Moscovitch, & Craik (2008)
Summary of Results	Mnemonic strategy training improved ability to recall object-location associations in healthy controls and aMCI participants.	Memory support systems were found to improve functional ability in activities of daily living.	Participants in the intervention group demonstrated improved performance on everyday memory tasks and on knowledge and use of memory strategies.	Following completion of the memory training program, participants in the treatment group perceived themselves to have significantly improved memory abilities.	Memory strategy knowledge and use increased significantly in the treatment group at post-test and 3-month follow-up.
Outcome Measures	 MMSE RBANS Trail Making Test GDS FAQ 	 DRS-2 MMSE eCOG QOL-AD CES-D Caregiver burden Caregiver mood Memory self-efficacy 	Prospective memory tasks MMQ-perceived memory ability Contentment associated with memory Memory strategy usage SKR—memory strategy knowledge	1. Word list task 2. Grocery list memory task 3. Names and faces memory task 4. Perceived memory ability–MCI and MFQ 5. Perceived control over memory–MCI 6. Use of memory strategies– MFQ 7. Perceived impact of memory problems– MFQ	1. Memory strategy use–MMQ 2. Memory task 3. Memory strategy knowledge 4. Self-reported memory ability–MMQ 5. Memory contentment–MMQ 6. Perceived impact of memory on daily functioning 7. Perceived importance of lifestyle factor's impact on memory 8. Face–name learning 9. Number learning
Statistical Findings	In the mnemonic strategy group (healthy controls & aMCI), a positive correlation was found between immediate improvement and RBANS scores (.68; $p < .001$). For the aMCI mnemonic group, a positive correlation was found for the Trail Making Test.	The intervention group demonstrated significant improvement according to the eCog at the end of training (t (15) = 3.1, $p < 0.01$) and 8-week follow-up (t(17) = 2.4, $p < 0.05$).	A significant group effect $(F(1, 36) = 5.98, p = 0.02)$ was found on prospective memory tasks at 2 weeks and 4 months follow-up such that the treatment group performed significantly better than the notreatment group.	Perception of memory ability by the treatment group was significantly greater than the non-treatment group as measured by the MCI ($p = 0.008$, R2 = 0.23)	A significant main effect was found across the strategy use tests (F (3, 43) = 6.97, p = 0.001) and with each test individually. Strategy toolbox (F (1,45) = 14.27, MSE = 178.93, p < .001); MMQ–strategy (F (1,45) = 5.74, MSE = 168.62, p = 0.021); Strategy use on memory tasks (F (1, 45) = 4.08, MSE = 12.61, p = 0.049)
Follow-up	1 month	6 months	4 months	N/A	3 months

CES-D = Centers for Epidemiological Studies - Depression; DRS-2 = Dementia Rating Scale-2; eCOG = Everyday Cognition; FAQ = Functional Activities Questionnaire; GDS = Geriatric Depression Scale; MCI = Memory Controllability Index; MFQ = Memory Functioning Questionnaire; MMQ = Multifactorial Metamemory Questionnaire; MMSE = Mini-Mental Status Exam; QOL-AD = Quality of Life-Alzheimer's Disease; RBANS = Repeatable Battery for the Assessment of Neuropsychological Status; SKR = Strategy Knowledge Recall