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Working Memory Training in Older Adults: Bayesian Evidence Supporting the Absence of
Transfer

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Abstract

The question of whether working memory training leads to generalized improvements in untrained cognitive abilities is a longstanding and heatedly debated one. Previous research provides mostly ambiguous evidence regarding the presence or absence of transfer effects in older adults. Thus, to draw decisive conclusions regarding the effectiveness of working memory training interventions, methodologically sound studies with larger sample sizes are needed. In this study, we investigated whether or not a computer-based working memory training intervention induced near and far transfer in a large sample of 142 healthy older adults (65-80 years). Therefore, we randomly assigned participants to either the experimental group, which completed 25 sessions of adaptive, process-based working memory training, or to the active, adaptive visual search control group. Bayesian linear mixed-effects models were used to estimate performance improvements on the level of abilities, using multiple indicator tasks for near (working memory) and far transfer (fluid intelligence, shifting, and inhibition). Our data provided consistent evidence supporting the absence of near transfer to untrained working memory tasks and the absence of far transfer effects to all of the assessed abilities. Our results suggest that working memory training is not an effective way to improve general cognitive functioning in old age.

Keywords: cognitive training, working memory, healthy aging, Bayesian statistics

Working Memory Training in Older Adults: Bayesian Evidence for Supporting the Absence of Transfer

On average, advancing age is accompanied by deterioration in multiple cognitive domains, with fluid abilities, such as processing speed, reasoning, and memory declining earlier than crystallized abilities (e.g., Horn & Cattell, 1967; Salthouse, 2004). In recent years, this has led to the development of computer-based cognitive training interventions, both in the “brain training” industry and in the cognitive training research community. The main goal of these interventions is to maintain or improve cognitive functions such as working memory (WM) that are relevant for daily life activities (e.g., Feldmann Barrett, Tugade, & Engle, 2004). WM is a capacity-limited system coordinating representations needed for ongoing cognitive processing. Individual differences in WM capacity (WMC) have been shown to be strongly related to other higher-order cognitive abilities, including fluid intelligence, attention, shifting, inhibition (Kyllonen & Christal, 1990; Miyake et al., 2000; Miyake & Shah, 1999; Oberauer, Süß, Wilhelm, & Wittmann, 2008; Süß, Oberauer, Wittmann, Wilhelm, & Schulze, 2002), and a wide variety of complex everyday tasks (see Feldmann Barrett et al., 2004 for an overview). Based on the process overlap theory (Kovacs & Conway, 2016), the theoretical rationale behind WM training is that extensive practice on a set of WM tasks enhances not only WMC, but also transfers to non-trained but related cognitive tasks or abilities that share cognitive processes with WM.

Inconclusive Evidence for the Effectiveness of Cognitive Training Interventions

“Brain training” interventions have proven popular especially among older adults as a promising way to counteract age-related cognitive decline, although there is little scientific support for the effectiveness of commercially available cognitive training interventions (see Simons et al., 2016 for a more detailed discussion). Regarding scientifically developed

training interventions, numerous WM training studies have generated consistent evidence for large improvements in the trained tasks in younger and older adults alike (see Karbach & Verhaeghen, 2014; Melby-Lervåg, Redick, & Hulme, 2016 for meta-analyses). Whether WM training leads to transfer effects, is, however, less clear. After some promising early findings reporting far transfer to, for instance, intelligence in younger adults (e.g., Jaeggi, Buschkuhl, Jonides, & Perrig, 2008), there is accumulating evidence against a generalized effect of WM training interventions in younger adults coming from methodologically sound studies (e.g., De Simoni & von Bastian, 2017; Redick et al., 2013; see also Melby-Lervåg & Hulme, 2013; Melby-Lervåg et al., 2016 for meta-analyses). Far fewer WM training studies exist that examined the effectiveness of WM training in older adults, the majority of which reported transfer effects to not explicitly practiced WM tasks (i.e., near transfer; e.g., Borella et al., 2014; Borella, Carretti, Riboldi, & De Beni, 2010; Brehmer, Westerberg, & Bäckman, 2012; Buschkuhl et al., 2008; Richmond, Morrison, Chein, & Olson, 2011), to untrained other cognitive abilities (i.e., far transfer; Borella et al., 2010, 2014; Brehmer et al., 2012), or to lab-based everyday life performance measures (Cantarella, Borella, Carretti, Kliegel, & de Beni, 2017). So far, there are only few studies that have reported the absence of generalized effects transfer effects in older adults (e.g., von Bastian, Langer, Jäncke, & Oberauer, 2013). Thus, a recent meta-analysis concluded that, compared to active controls, WM and executive control training leads to substantial training and near transfer, and to smaller but significant far transfer effects (Karbach & Verhaeghen, 2014, but see Melby-Lervåg et al., 2016).

The absence of studies reporting null findings may indicate that older adults are more susceptible to WM training interventions than younger adults, as there might be more room for improvement for individuals starting at lower levels of baseline performance and subsequently benefitting more from training. However, it is also possible that methodological shortcomings (e.g., small sample sizes) or design choices (e.g., transfer assessment, the

nature of the control group) in the reported studies caused these effects. Most training studies in older adults are severely underpowered due to small sample sizes (e.g., meta-analysis of Lampit, Hallock, & Valenzuela, 2014; median group size of 22), which is associated with two major statistical problems (cf. von Bastian, Guye, & De Simoni, 2017). On the one hand, low power can drastically inflate effect sizes of individual studies (Halsey, Curran-Everett, Vowler, & Drummond, 2015), leading to biased estimates in meta-analyses evaluating the overall effect of cognitive training (Bogg & Lasecki, 2015). On the other hand, p-values can vary greatly in the presence of small sample sizes (referred to as “the dance of the p-value” by Cumming, 2011), with the low statistical power increasing the risk of not only false-negative, but also false-positive findings (Button et al., 2013). A suitable alternative to the traditional p-value is the Bayes Factor (BF), which is the ratio between the likelihood of the data under one hypothesis (typically the alternative hypothesis, H_1) relative to another hypothesis (typically the null hypothesis, H_0). Considering the controversy regarding the (in-)effectiveness of cognitive training interventions, BFs offers an important advantage. Whereas significant p-values indicate the presence of a hypothesized effect, non-significant p-values only indicate the absence of evidence for a hypothesized effect. Hence, non-significant p-values do not distinguish between evidence for the null hypothesis and the lack of evidence for either of the two hypotheses. In contrast, BFs allow for drawing conclusions about the evidence supporting the presence of an effect (i.e., whether the data are more likely under the alternative hypothesis), the evidence supporting the absence of an effect (i.e., whether the data are more likely under the null hypothesis), or whether there is not enough evidence to support either of the two hypotheses sufficiently, as indicated by ambiguous BFs (for a more detailed discussion, see e.g., Dienes, 2014). Thus, BFs constitute an adequate statistical index in the context of intervention research.

So far, only few studies have applied BFs to evaluate the effectiveness of cognitive training (but see De Simoni & von Bastian, 2017; Guye, De Simoni, & von Bastian, 2017; Sprenger et al., 2013; von Bastian & Oberauer, 2013). Based on the meta-analysis from Au et al. (2015), Dougherty, Hamovitz, and Tidwell (2016) re-evaluated the effectiveness of n-back training in terms of far transfer to intelligence in younger adults using BFs. They demonstrated that studies with passive control groups strongly favored the alternative hypothesis (i.e., the presence of the effect), but those with active controls moderately favored the null hypothesis (i.e., the absence of the effect). In a similar vein, to investigate the (in-)effectiveness of WM training interventions in older adults, we re-evaluated the meta-analysis from Lampit et al. (2014) using Bayesian statistics. Our results show that overall, most studies produced only ambiguous evidence regarding near and far transfer effects, providing insufficient statistical support for either the alternative or the null hypothesis (von Bastian et al., 2017). Thus, the debate of whether or not WM training is effective in older adults cannot be settled based on the current body of literature.

In addition, poor design choices such as the nature of transfer assessment or the control group can further limit the inferences permitted by individual studies (cf. Guye, Röcke, Mérillat, von Bastian, & Martin, 2016; Noack, Lövdén, Schmiedek, & Lindenberger, 2009; Shipstead, Redick, & Engle, 2012). For example, many studies relied on only single indicators when assessing transfer, thereby potentially mistaking task-specific effects with generalized transfer effects (e.g., Borella et al., 2010, 2014; Brehmer et al., 2012). As each task contains paradigm-specific variance, stimulus material-specific variance, and some measurement error, using multiple indicators per cognitive ability and thus inferring from a combined score, minimizes random sources of error (cf. Moreau, Kirk, & Waldie, 2016). Another issue is the lack of adequate control groups. Although a passive control group sufficiently controls for the test repetition effects (and therefore allows for testing potential

effects of any kind of cognitive stimulation), it cannot do so for unspecific intervention effects (e.g., regularly spending time on a computer, social contacts during the assessments, changes in training-related motivation or beliefs). Controlling for such effects requires an active control group that engages in an alternative, plausible training intervention comparable to the experimental training intervention that only differs in the ability that is being trained by keeping all other intervention-specific and -unspecific factors constant (e.g., duration, intensity, adaptive task difficulty, stimulus material).

In sum, although a number of training studies with older adults have been published in recent years, the evidence regarding transfer effects is still relatively ambiguous in either direction (i.e., presence or absence of transfer effects; cf. von Bastian et al., 2017). Thus, before concluding about the general effectiveness of WM training in older adults, methodologically sound studies (i.e., adequate control group and transfer assessment) with large samples are needed to provide decisive evidence for or against transfer effects.

The Present Study

The main goal of this study was to investigate training and transfer effects after a process-based WM training intervention in older adults using Bayesian statistics by overcoming the methodological issues outlined above. We conducted a randomized-controlled, double-blind study trial and assigned the participants to either the experimental (WM) group or to an active control group practicing visual search (VS). As previous research found that conjunction search efficiency is unrelated to WM capacity (e.g., Kane, Poole, Tuholski, & Engle, 2006), VS training constitutes a plausible cognitive control condition (cf. Harrison et al., 2013; Redick et al., 2013). The training interventions were comparable in length and duration, as both groups received five weeks of intensive training intervention consisting of 25 training sessions. WM training consisted of heterogeneous WM tasks, thereby enhancing variability and reducing the probability that participants merely adopt

task-specific processes (cf. Schmidt & Bjork, 1992). Based on the work by Wilhelm, Hildebrandt, and Oberauer (2013), we selected three well-established WM tasks shown to be reliable indicators of the WMC construct, namely an updating task, a binding task, and a complex span task. For both training interventions, solely visuo-spatial stimulus material was used to prevent the application of verbal strategies such as imagery or rehearsal (cf. Zimmermann, von Bastian, Röcke, Martin, & Eschen, 2016). Based on the assumption that plasticity is driven by a prolonged mismatch between task demands and cognitive capacity (Lövdén, Bäckman, Lindenberger, Schaefer, & Schmiedek, 2010), we implemented an adaptive training algorithm in both training groups that increased the level of difficulty depending on participants' performance.

The effectiveness of the WM training intervention in eliciting training, near and far transfer effects was evaluated using BFs, as they allow for quantifying the strength of evidence for the alternative hypothesis (i.e., presence of training/transfer effects) and the null hypothesis (i.e., absence of training/transfer effects). Training effects were quantified by administering test versions of the WM and VS training tasks in addition to measuring performance improvements during training, as the latter is potentially confounded with initial level of performance (cf. von Bastian & Oberauer, 2013). Transfer effects were assessed by comparing pre- and post-training performance in multiple tasks per cognitive ability (cf. Shipstead et al., 2012). Near transfer was measured using three structurally dissimilar visuo-spatial WM tasks. Further, we assessed far transfer to multiple measures of fluid intelligence, shifting, and inhibition. Fluid intelligence has been shown to be strongly correlated with WM (Engle, Tuholski, Laughlin, & Conway, 1999; Salthouse & Pink, 2008; Süß et al., 2002), and both shifting, the ability encompassing control processes in situations where individuals actively switch between tasks (for an overview, see Monsell, 2003), and inhibition, the ability

to suppress inappropriate behavioral responses, share common variance with WM updating according to Miyake et al.'s three-factor model of executive functions (Miyake et al., 2000).

Method

Participants

Older adults (65 – 80 years, $M = 70.35$, $SD = 3.66$) were recruited through the participant database of the University Research Priority Program (URPP) “Dynamics of Healthy Aging” of the University of Zurich, lectures at the Senior Citizens’ University of Zurich, flyers, online announcements, and word-of-mouth. Interested seniors were informed that they would participate in a “brain jogging” study and that they had the right to withdraw at any time. Written informed consent was obtained from all participants. The study was approved by the ethics committee of the Department of Psychology of the University of Zurich (in compliance with the Helsinki Declaration).

Participants were retired, German speaking seniors who had access to a computer with Internet connection at home and basic experience in using the computer and Internet. After study completion, they received CHF 150 (approx. USD 150). We refrained from using estimates from previous training studies for power analyses, as they are likely severely underpowered (Bogg & Lasecki, 2015), and therefore, probably yielded inflated effect size estimates (Halsey et al., 2015). Instead, we aimed to recruit at least three times as many participants than previous training studies with older adults (i.e., $n = 66$ per group; cf. Lampit et al., 2014). A total of 194 seniors were individually screened for ongoing neurological and psychiatric disorders, psychotropic drug use, and severe sensory impairments (motor, hearing, or vision disabilities) potentially impacting cognitive performance. Further, participants were screened for color blindness using the Ishihara Test (Ishihara, 1917), for subclinical depression using the German version of the Geriatric Depression Scale (GDS; Sheikh & Yesavage, 1986: cut-off criterion = 4), and for cognitive impairment using the

German version of the Mini-Mental State Examination (MMSE; Folstein, Folstein, & McHugh, 1975: cut-off criterion = 26). During the screening session participants additionally completed three computer-based questionnaires, including a demographic questionnaire, a health questionnaire, and a questionnaire assessing computer and Internet experience. In addition, everyday problem solving abilities were assessed using an adapted version of the multiple-choice Everyday Problems Test (EPT; Willis & Marsiske, 1993). The EPT is an objective measure for the ability to solve everyday activities on printed material. Results on the EPT are reported elsewhere (Guye et al., 2017).

Three participants were ineligible for the study due to self-reported psychotropic drug use, self-reported psychiatric disease, and subclinical depression symptoms as assessed by the GDS, respectively. Of the remaining 191 participants, 16 participants withdrew their participation during the everyday life assessment due to the reasons shown in Figure 1. The remaining 175 participants entered the subsequent study phase (i.e., pre-assessment, training, and post-assessment), 17 of which withdrew their participation before beginning with the training intervention (attrition rate of 10%). During the training intervention, two additional participants (one of each training group) withdrew their participation due to low training motivation (approx. 1%). Further, we had to exclude 14 participants: the first six participants of the study had to be excluded as they were administered a longer test battery during pre-assessment including additional tasks, which we afterward decided to remove due to time restrictions. Data from six participants were excluded as they did not complete one or more tasks during cognitive pre- or post-assessment. Moreover, two individuals were excluded because they performed below chance level in more than 25 % of the training sessions. Thus, the final sample consisted of 142 participants (68 female, 74 male).

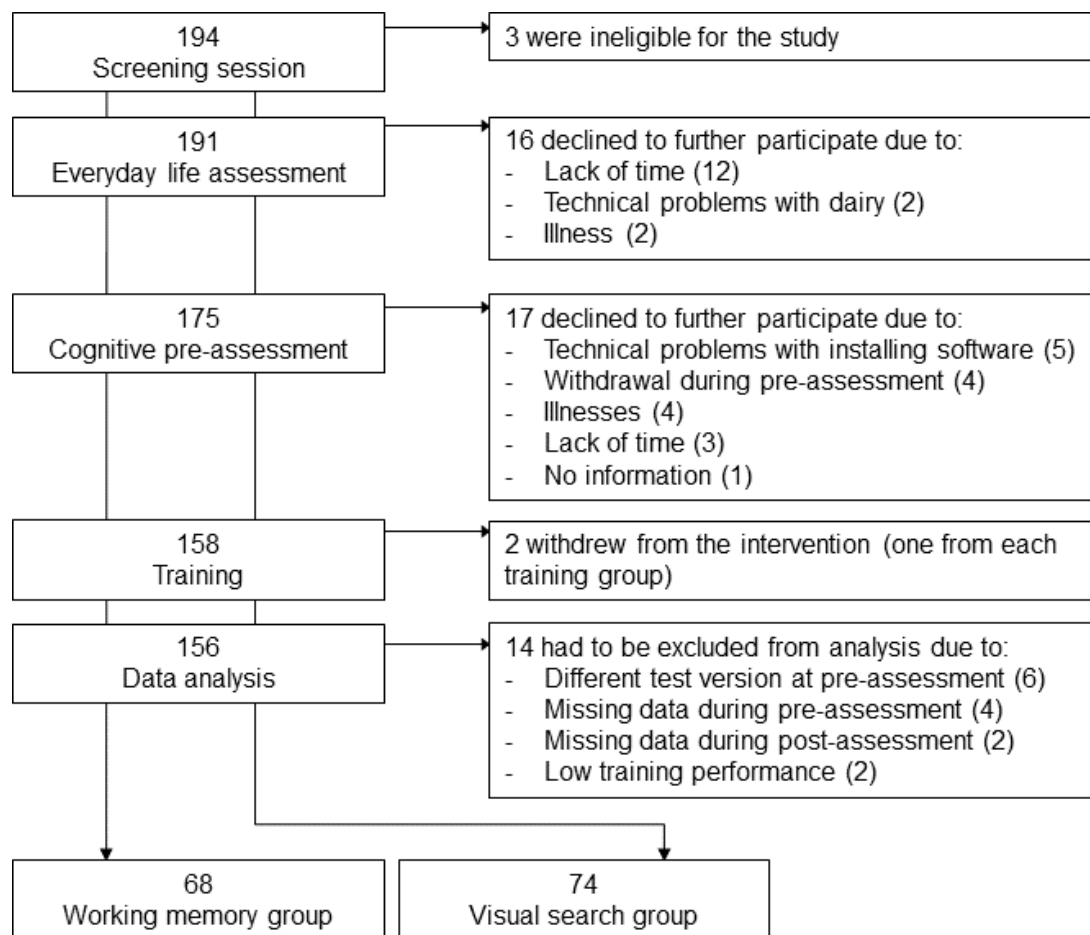


Figure 1. Flow chart of participant recruitment.

To assign participants to groups, they were given a random identification number. A randomization list was created stratified by age (65–69; 70–74; 75–80) and gender. A random sequence of experimental group and active control group assignments was generated within each age and gender group and participants were assigned accordingly by the research manager. As listed in Table 1 (see Table S1 for null hypothesis significance testing [NHST] results), the two groups were comparable in age, education, cognitive functioning (MMSE), and depressive symptoms (GDS), with ambiguous evidence regarding group differences in education (with the experimental group, on average, having obtained a slightly higher degree), and in gender (with more females in the control group).

Table 1

Participant Demographics

Demographics	Group				
	WM	VS	BF _{H0}	BF _{H1}	Error
Gender (f/m)	29 / 39	39 / 35	2.38	0.42	0.00
Age (years)	70.15 (3.57)	70.53 (3.75)	4.66	0.21	0.00
Education ^a	4.47 (1.77)	3.96 (1.67)	1.33	0.76	0.00
MMSE score	29.16 (0.78)	29.28 (0.93)	4.01	0.25	0.00
GDS score	0.68 (1.09)	0.64 (0.87)	5.39	0.19	0.00

Note. Mean values and standard deviations in parentheses. Bold Bayes Factor values indicate substantial evidence for the respective hypothesis. Bayes Factors were determined by Bayesian two-tailed independent t-tests (chi-square test in the case of gender). WM = working memory; VS = visual search; BF = Bayes Factor; H₀ = null hypothesis; H₁ = alternative hypothesis; MMSE = Mini-Mental State Examination; GDS = Geriatric Depression Scale.

^aThe scale for education ranged from 0 (no formal education) to 7 (doctorate).

Design and Material

Table 2 lists the four phases of the study: (1) an everyday life assessment, (2) a cognitive pre-assessment, (3) an intensive training regime, and (4) a cognitive post-assessment. We used a randomized controlled double-blind pretest/posttest trial comparing the WM group with the VS group. Neither the participants nor the research assistants collecting the outcome measures had knowledge of the group to which they were assigned, and participants were not informed about the existence of a second condition.

Table 2

Overview of the Study Phases

Study phase	Description	# of sessions	Duration
Everyday life assessment	Longitudinal daily life assessment and questionnaires	4	4 hours
Cognitive pre-assessment	Extensive cognitive test battery including 21 tasks for working memory, inhibition, shifting, fluid intelligence, and visual search; PANAS-X questionnaire	1	4.5 hours
Cognitive training	25 sessions of computer-based cognitive training	25	30-45 min per session
Cognitive post-assessment	Extensive cognitive test battery including 21 tasks for working memory, inhibition, shifting, fluid intelligence, and visual search; Training-related expectations questionnaire.	1	4.5 hours

Note. Everyday life assessment and cognitive training were self-administered and cognitive pre- and post-assessments were conducted in-lab.

Everyday life assessment. Eligible participants took part in a longitudinal daily life assessment and completed several questionnaires. During the one-week daily life assessment, participants were asked to complete a modified and translated online version of the Day Reconstruction Method (DRM; Kahneman, Krueger, Schkade, Schwarz, & Stone, 2004) at three predefined days. To assess general activity involvement, participants were asked to complete a modified version of the Adult Leisure Activity Questionnaire (Jopp & Hertzog, 2010). In addition, participants completed several questionnaires including the NEO Five-Factor Inventory (Costa & McCrae, 1992), Grit scale (Duckworth, Peterson, Matthews, & Kelly, 2007), Need for Cognition scale (Cacioppo & Petty, 1982), Theories of Intelligence scale (Dweck, 2000), General Self-Efficacy scale (Schwarzer & Jerusalem, 1995), and the Cognitive Failure Questionnaire (Broadbent, Cooper, FitzGerald, & Parkes, 1982), results of which are reported elsewhere (Guye et al., 2017).

Cognitive training interventions. Training procedures were identical for both groups if not mentioned otherwise. The interventions were self-administered at home using Tatoon (von Bastian, Locher, & Ruffin, 2013). After each session, data were automatically uploaded to a webserver running Tatoon Online, allowing for monitoring participants' compliance throughout the training phase.

Participants were instructed to complete 25 sessions of intensive cognitive training (30-45 minutes per session) distributed equally across five weeks, with most participants completing training sessions on 5 days a week. To enhance training commitment, participants were individually reminded via e-mail if they fell behind their training schedule. Moreover, at the beginning of every training week, participants received an e-mail with information on their training status and a motivating slogan (e.g., "If you always do what you've always done, you'll always get what you've always got"). In case of technical problems, participants could contact the study manager via phone or e-mail.

Participants practiced three cognitive tasks, each lasting approximately 10 min per session. Task order was randomized to avoid sequence effects. Each task was automatically terminated if task duration exceeded 15 min to prevent training sessions longer than 45 min. Before each session, participants were asked to complete a shortened version of the PANAS-X (Grühn, Kotter-Grühn, & Röcke, 2010) assessing their current affect. They had to indicate their agreement or disagreement with the adjectives on an 8-point Likert scale. At the beginning of and mid-way through training (sessions 2 and 14), we assessed participants' training motivation using an adapted version the Intrinsic Motivation Inventory (Deci & Ryan, 2016). Results of affective and motivational correlates during training will be the focus of a different manuscript.

Working memory training. Training consisted of a complex span task, a binding task, and a memory updating task (see Figure 2). For all three tasks, the set size (i.e., number of

memoranda) and the response time limit varied depending on the level of task difficulty set by the adaptive training algorithm (see below). In each session, participants completed up to 15 trials per task.

Complex span task. We used the figural-spatial complex span task from von Bastian and Eschen (2016). In each trial, participants had to memorize a series of positions of red squares in a 5 x 5 grid. Presentation of memoranda was interleaved by a distracting task, in which participants had to determine as quickly and as accurately as possible whether a L-shaped figure composed of red grid cells was oriented vertically or horizontally. At the end of each trial, participants had unlimited time to recall the grid positions in correct serial order by mouse-click. Memoranda were presented for 1000 ms each. Response time during the distractor task was limited (see adaptive task difficulty).

Binding task. We used an adapted version of the local-recognition task (e.g., Oberauer, 2005), in which participants had to memorize a series of colored triangles and their position in a 4 x 4 grid. Afterward, as many probes as memoranda were presented, for each of which participants had to decide whether it matched the triangle that was previously presented at that position. Across all 15 trials, 50 % of the probes were positive, 25 % were distractors (i.e., triangles in colors not presented within this trial), and 25 % were intrusions (i.e., triangles in colors that had been presented within this trial but at a different position). Memoranda were displayed for 900 ms (with an additional 100 ms inter stimulus interval) and time to respond was restricted (see adaptive task difficulty).

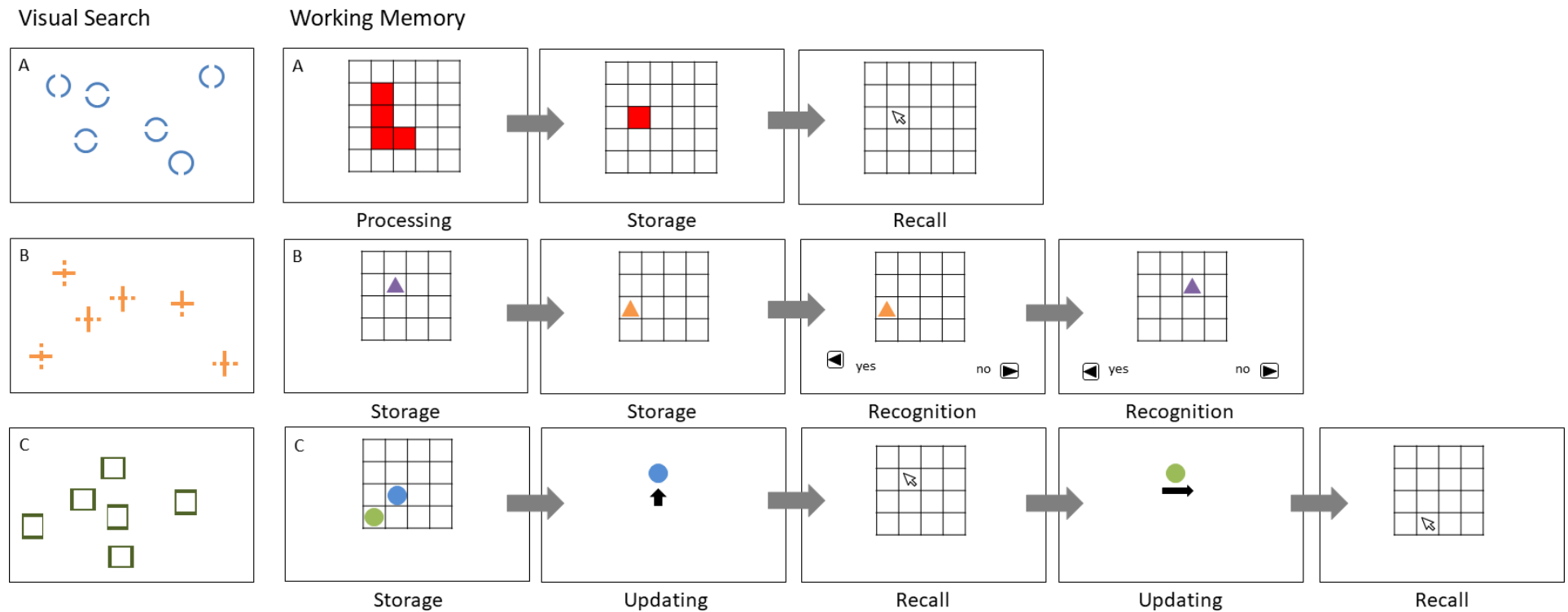


Figure 2. Schematic overview of the visual search training tasks: A) circles task, B) crosses task, C) rectangles task and the working memory training tasks: A) complex span task, B) binding task, C) memory updating task.

Memory updating task. We used an adapted version of the task used by De Simoni and von Bastian (2017; cf. Schmiedek, Lövdén, & Lindenberger, 2014). First, participants had to memorize the locations of colored circles presented simultaneously in a 4 x 4 grid. Thereafter, one of the circles appeared on a white background alongside an arrow. Participants had to update the circle's position by mentally moving it to the adjacent cell in the direction the arrow pointed toward (up, down, left, or right). Participants indicated the new position of the circle by mouse click. Each trial consisted of nine updating steps of which four to five were switch and repetition trials, respectively. During switch trials, the to-be-updated circle changed compared with the preceding trials, whereas during repetition trials the to-be-updated circle did not change. Memoranda were displayed for 500 ms and time to respond was restricted (see adaptive task difficulty).

Visual search training. Based on Kane et al.'s (2006) experiments, we developed three conjunction search tasks to improve visual search tasks using different stimulus material such as circles, crosses, and rectangles (cf. De Simoni & von Bastian, 2017). Participants had to identify a target stimulus as quickly and as accurately as possible among distractors. All stimuli appeared in a warped 8 x 7 grid, resulting in an irregular distribution of the stimuli on the screen. For each task and each session, half of the trials contained a target.

In the circles task (cf. von Bastian, Langer, et al., 2013) the target stimulus was a circle with a gap facing up, right, down, or left. Distractors were circles with two gaps either facing left and right, or up and down. In the crosses task, the target stimulus was a cross with a gap at the upper, right, lower, or left bar. Distractors were crosses with two gaps either at the left and right bar, or at the upper and lower bar. Finally, in the rectangles task, the target stimulus was a rectangle with a bold side facing up, right, down or left. Distractors were rectangles with two bold sides either facing left and right, or up and down. Participants had to

indicate the presence of a target by pressing the corresponding arrow key or by pressing the A key if there was no target present during the trial. Participants completed up to 70 trials per task and time to respond was unrestricted.

Adaptive task difficulty. We used the default adaptive score and level handler included in Tatool (von Bastian, Locher, et al., 2013). In the first training session, participants' performance was assessed and task difficulty possibly increased after every 7 % of trials (1 trial in WM training and 5 trials in VS training), ensuring participants to quickly reach their individual baseline cognitive capacity limit and so maximizing the time exposed to challenging task demands. After the first session, performance was assessed and task difficulty possibly after every 40 % of trials (6 trials in WM training and 28 trials in VS training). In the WM tasks, difficulty was raised by either reducing the response time limit by 300 ms (four subsequent level-ups) or by increasing the set size by one additional memorandum (fifth level-up, which also reset the response time limit) if accuracy was above 80 %. The first training session started with a set size of two and a response time limit of 5000 ms per response. The maximum set size was set to 8 for the three tasks. In the VS tasks, level of difficulty was raised by increasing the number of distractors by two if participants' accuracy was above 95 %. The start level of difficulty was six items, the maximum set size was set to 54 for the three tasks.

Training feedback. Performance-based trial-by-trial feedback was presented as a green check mark for a correct response, and a red cross for an incorrect response. Moreover, at the beginning of each session, participants were presented with their performance across all completed training sessions in the form of a graph plotting level against session for each of the three training tasks.

Cognitive assessment. Before and after the training intervention, participants completed an extensive test battery (see Table 3 for task descriptions and Table S2 for

correlations and reliabilities). Cognitive pre- and post-assessment were conducted at the University of Zurich in the laboratories of the URPP “Dynamics of Healthy Aging” by trained research assistants. Participants were tested in groups of up to four individuals. Both pre- and post-assessments took 4.5 hours including a 10-min break and two 5-min breaks.

To measure training-related improvements independent of the training situation, we used criterion tasks identical to those practiced during WM and VS training. Near transfer was assessed with structurally dissimilar WM tasks and different visuo-spatial stimulus material. Far transfer was measured to fluid intelligence, shifting, and inhibition. We used identical versions of the test battery at both cognitive assessments to facilitate comparability between the groups and test occasions.

At the beginning of the pre-training assessment, participants completed a shortened version of the PANAS-X (Grühn et al., 2010) assessing their general affect. At the end of the post-assessment, self-reported training-related expectations were assessed with three items asking participants whether they believed that they improved in the trained tasks, in the untrained cognitive tasks, and in everyday life tasks. Participants had to respond on an 8-point Likert scale ranging from “not at all” to “very much”.

Cognitive tasks and the affect questionnaire were programmed using (von Bastian, Locher, et al., 2013), the expectation questionnaire was in paper-pencil format. Participants completed the pre- and post-assessment within seven days before respectively after the scheduled training phase.

Table 3

Description of the Cognitive Test Battery Used During Training and Cognitive Assessments

Measure	Task	Number of trials	Timing	Dependent measure
Working Memory Criterion				
Complex span	Memorize a series of positions of red squares presented in a 5 x 5 grid. Each trial of the series was interleaved by a distractor task, in which vertically or horizontally oriented L-shaped figures presented in the grid had to be rated according to their orientation (von Bastian & Eschen, 2016).	6 per set size (i.e., 2-4)	Stimulus duration: 1000 ms Distractor task: max. 3000 ms	Storage accuracy
Binding	Memorize a series of associations between coloured triangles and their locations in a 4 x 4 grid. After memorization, memoranda and probes were presented, each of which had to be rated as positive or negative. Across all trials, 50 % of the probes were positive (i.e., matches), and 50 % were negative probes (25 % distractors, and 25 % intrusions; adapted from Oberauer, 2005).	6 per set size (i.e., 2-4)	Stimulus duration: 900 ms + 100 ms inter-stimulus-interval	d' ^a
Memory updating	Memorize the locations of a set of circles in a 4 x 4 grid. Then, update the circle's positions by mentally shifting them to the adjacent cell based on the orientation of an arrow (adapted from De Simoni & von Bastian, 2017; Schmiedek et al., 2014)	6 per set size (i.e., 2-4)	Stimulus duration: 500 ms Updating step duration: 500 ms	Accuracy
Visual Search				
Circles	Identify the circle with one gap among circles with two gaps (adapted from Kane et al., 2006).	8 per set size (i.e., 7-11)	Unrestricted response time	Accuracy
Crosses	Identify the cross with one gap among crosses with two gaps (adapted from Kane et al., 2006).	8 per set size (i.e., 7-11)	Unrestricted response time	Accuracy
Rectangles	Identify the rectangle with one bold side among rectangles with two bold sides (adapted from Kane et al., 2006).	8 per set size (i.e., 7-11)	Unrestricted response time	Accuracy
Working Memory Transfer				

Brown-Peterson	Memorize a series of Gabor patches. Memorization phase was followed by a distractor task, in which the length of a horizontally oriented bar had to be compared to the a gap between two points (Brown, 1958; Peterson & Peterson, 1959).	4 per set size (i.e., 2-4)	Stimulus duration: 1000 ms Distractor task: max. 3000 ms	Storage accuracy
Binding	Memorize a series of associations between coloured shapes and their locations in a 1 x 4 grid. After memorization, memoranda and probes were presented, each of which had to be rated as positive or negative. Across all trials, 50 % of the probes were positive (i.e., matches), and 50 % were negative probes (25 % distractors, and 25 % intrusions; adapted from Oberauer, 2005).	8 per set size (i.e., 2-4)	Stimulus duration: 900 ms + 100 ms inter-stimulus-interval	d ^{ra}
Memory updating	Memorize the orientation of arrows pointing in one of eight directions (i.e., cardinal directions). Then, update the arrow's orientation by rotate them according to a presented arrow and indicate the new cardinal direction (adapted from De Simoni & von Bastian, 2017; Schmiedek et al., 2014)	8 per set size (i.e., 2-4)	Stimulus duration: 500 ms Updating step duration: 500 ms	Accuracy
Fluid Intelligence				
RAPM	Out of nine options, identify the missing element that completes a 3 x 3 pattern matrix (Arthur & Day, 1994).	12	Task restricted to 12 minutes	Accuracy
Relationships	Out of five options, select the correct Venn diagram that represents the relationship among a set of three objects (Ekstrom, French, Harman, & Derman, 1976).	2 x 15	Each block max. 4 min	Accuracy
Locations	Based on four dashed lines, identify the rule of the spatial distribution of x's and place the x at the corresponding location on a fifth dashed line (Ekstrom et al., 1976).	2 x 14	Each block max. 6 min	Accuracy
Shifting ^b				
Animacy-size (categorical)	Categorize drawings of animals and everyday objects according to two classification rules: animacy (living vs. non-living) and size (smaller vs. larger than a soccer ball) (von Bastian, Souza, & Gade, 2016).	Single blocks: 64 Mixed block: 128	Cue stimulus interval: 150 ms Unrestricted response time	Proportional SC ^c and MC ^d
Shape-color	Categorize geometrical shapes according to two	Single blocks: 64	Cue stimulus interval: 150	Proportional

(figural)	classification rules: color (green vs. blue) and shape (round vs. angular; von Bastian et al., 2016).	Mixed block: 128	ms	SC ^c and MC ^d
Parity-magnitude (numerical)	Categorize digits (1-9, excluding 5) according to two classification rules: parity (odd vs. even) and magnitude (smaller vs. greater than 5; von Bastian et al., 2016).	Single blocks: 64 Mixed block: 128	Unrestricted response Cue stimulus interval: 150 ms Unrestricted response time	Proportional SC ^c and MC ^d
Inhibition				
Flanker	Indicate the orientation of a centrally presented target arrow, which is flanked by congruent (arrows facing toward the same direction), incongruent (arrows facing toward the opposite direction) or neutral stimuli (i.e., “XX”); (Eriksen & Eriksen, 1974).	96 per condition (i.e., neutral, congruent, incongruent)	Unrestricted response time	Proportional interference ^e
Stroop	Indicate the hue of a color word while inhibiting the prepotent response to read the word instead. In congruent trials, the hue matches the color word, in incongruent trials, the hue does not match the color word, and in neutral trials, a neutral stimulus (i.e., “xxxx”) is presented (Stroop, 1935).	96 per condition (i.e., neutral, congruent, incongruent)	Unrestricted response time	Proportional interference ^e
Simon	Indicate the color of a green or red circle which is presented on the left, right, or in the center of the screen by pressing the corresponding arrow key (e.g., left for green circles, right for red circles). The circle can appear on the congruent (e.g., green circle on the left), incongruent (e.g., red circle on the left) or neutral position (i.e., centrally; Simon, 1969).	96 per condition (i.e., neutral, congruent, incongruent)	Unrestricted response time	Proportional interference ^e

Note. RAPM = Raven Advanced Progressive Matrices; SC = switch costs; MC = mixing costs

^a $d' = z(\text{hit rate}) - z(\text{false alarms to intrusions})$.^bShifting tasks consisted of five blocks presented in the following order: two single blocks, a mixed block, and two single blocks in reversed order. A visual cue indicating the classification rule was presented before the stimulus. In single block tasks, the same rule had to be applied across all trials, whereas in mixed blocks, stimuli had to be classified according to both rules which

switched unpredictably. Half of the trials were repetition trials (two successive trials in which the same rule had to be applied) and the other half were switch

Results

Data are available on the Open Science Framework (OSF; osf.io/zrj3q). Data preprocessing and data analysis were carried out with R (version 3.2.3; R Core Team, 2016). BFs were computed using the R package “BayesFactor” (version: 0.9.12.2; Rouder & Morey, 2012) and the default prior settings (i.e., Cauchy distribution with a medium scaling factor, $r = 0.707$). To test the robustness of our results, we replicated the analyses across a range of priors (i.e., $r = 0.50$, $r = 2.00$) and the conclusions remained the same. The interested reader is referred to the analyses scripts publicly available on the OSF. BFs range from zero to infinity, with higher values expressing stronger evidence for the respective hypothesis. An adapted version of the verbal labels proposed by Wetzels and Wagenmakers (2012) was used to facilitate interpretation (see Table 4). BFs favoring the null hypothesis (i.e., $\text{BFs} < 1$) are expressed as $1/\text{BF}$.

Table 4

Verbal Labels for Bayes Factors

BF	Interpretation
> 100	Decisive
30-100	Very strong
10-30	Strong
3-10	Substantial
1-3	Ambiguous
1	No evidence

Note. Adapted from Wetzels and Wagenmakers (2012). BF = Bayes Factor.

Preprocessing RT Data

Shifting scores (i.e., proportional switch costs [SC] and mixing costs [MC]) and inhibition scores (i.e., proportional interference) were computed based on the reaction times (RT) of correct responses. RT outliers were excluded from the data analysis. Outliers were

defined as data points that were more than three median absolute deviations away from the overall median (Leys, Ley, Klein, Bernard, & Licata, 2013).

Training Compliance and Performance

Due to scheduling problems, seven participants completed less than 25 sessions. Three participants from the WM group completed 21, 23, and 24 sessions and four participants from the VS group completed 19, 20, and 24 (2 participants) sessions. As all of these participants completed at least 75% of the training intervention, they were included in the data analysis to enhance power.

There was substantial evidence that the WM ($M = 24.97$, $SD = 0.71$, range = 21 - 28) and VS group ($M = 24.88$, $SD = 0.95$, range = 19 - 26) did not differ in the number of completed training sessions as indicated by a Bayesian two-tailed independent t-test, $BF_{H0} = 4.57 \pm 0.00$ %, (see Table S3 for NHST results). If participants completed more than 25 training sessions, these additional sessions were omitted from data analysis.

As illustrated in Figure 3, both groups showed substantial training effects for each training task. To test if performance improved monotonically across sessions, we conducted Bayesian linear mixed effects (LME) models with set size achieved by the end of each session as the dependent variable and training session (coded as linear contrast) as fixed effect (see Table S4 for NHST results). These analyses were run separately for each group and training task, including a random effect for subject to account for variability between individuals. The reported estimates represent the increase in set size from one session to the next around their 95% credible interval. There is decisive evidence that across the 25 training sessions, participants in the WM group improved in the binding task ($M_{Diff} = 0.09$ [0.08, 0.09]), $BF_{H1} > 100 \pm 0.98$ %, the complex span task ($M_{Diff} = 0.07$ [0.07, 0.07]), $BF_{H1} > 100 \pm 1.01$ %, and the memory updating task ($M_{Diff} = 0.04$ [0.04, 0.04]), $BF_{H1} > 100 \pm 1.92$ %. The VS group also improved training performance in the circles task ($M_{Diff} = 1.35$ [1.33, 1.38]), $BF_{H1} > 100 \pm$

3.17 %, the rectangles tasks ($M_{Diff} = 1.52 [1.50, 1.55]$), $BF_{H1} > 100 \pm 1.22$ %, and the crosses task ($M_{Diff} = 1.39 [1.37, 1.42]$), $BF_{H1} > 100 \pm 2.15$ %.

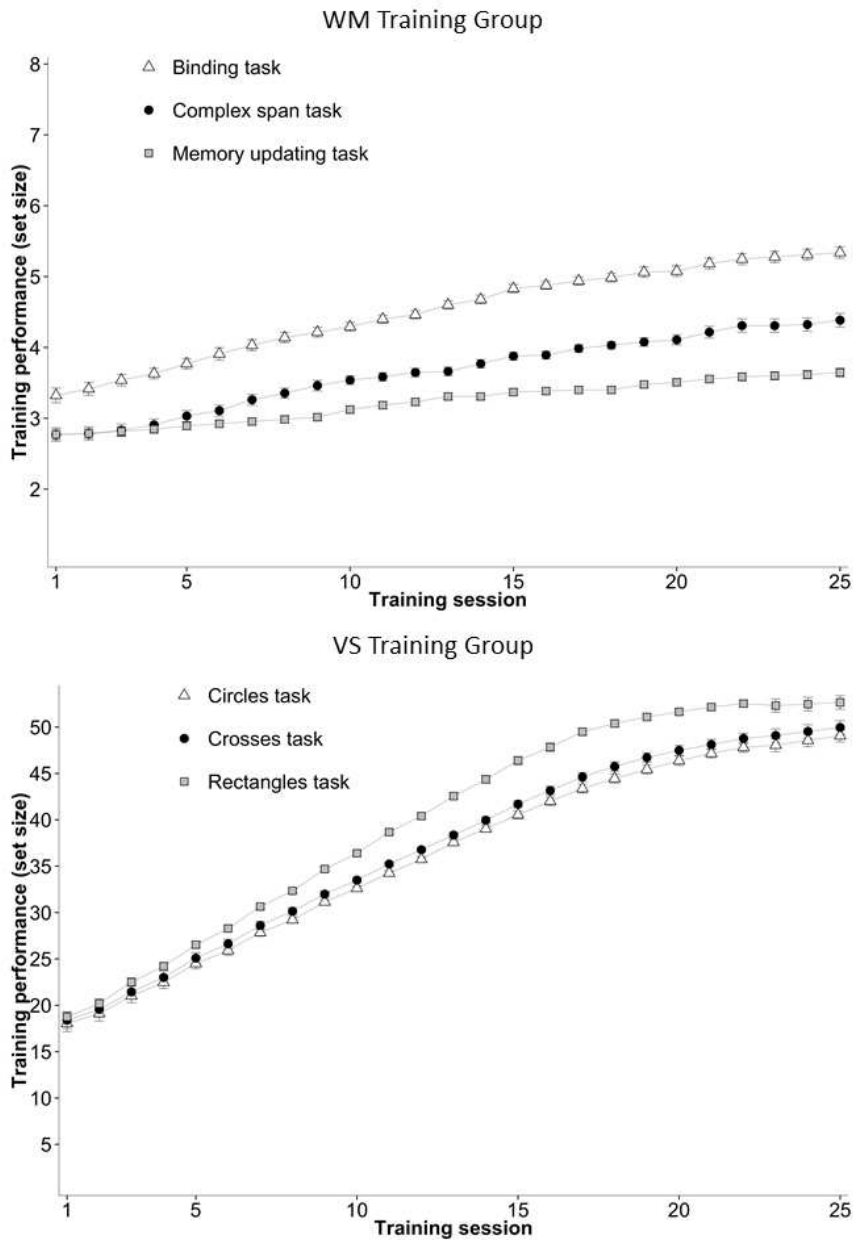


Figure 3. Training performance during working memory and visual search training. Maximum set size for the working memory training group was 8 items, and 54 items for the visual search training group. Error bars represent 95% within-subjects confidence intervals calculated according to Cousineau (2005) and Morey (2008). WM = working memory; VS = visual search.

Training Gains and Transfer Effects

To investigate training gains, we assessed performance improvements for both groups on the respective test versions of the training tasks (i.e., WM and VS criterion tasks).

Moreover, we evaluated whether WM training led to near transfer to structurally dissimilar WM tasks, and to far transfer to fluid intelligence, shifting, and inhibition.

Statistical modeling. To assess performance improvements from pre- to post-assessment while taking potential baseline differences into account, we calculated standardized gains scores for each cognitive task (i.e., post-assessment performance subtracted by pre-assessment performance divided by the pre-assessment standard deviation), which were used as dependent variables (cf. von Bastian & Eschen, 2016; von Bastian & Oberauer, 2013). Bayesian LME models including crossed random effects were run to estimate performance improvements on the level of cognitive abilities (as compared to individual cognitive tasks; cf. Baayen, Davidson, & Bates, 2008; Judd, Westfall, & Kenny, 2012 for details). Training group was included in the models as fixed effect predictor. Two random effects were included to account for variability between the participants and to account for variability between the tasks. The reported estimates represent the group differences in gain scores around their 95% credible interval. Descriptive statistics of the cognitive tasks are presented in Table 5.

Table 5

Descriptive Statistics of Cognitive Task Performance

Task	WM		VS	
	Pre-assessment	Post-assessment	Pre-assessment	Post-assessment
Criterion				
Complex span	0.31 (0.18)	0.73 (0.16)	0.26 (0.16)	0.30 (0.19)
Binding	1.06 (0.65)	1.29 (0.65)	0.98 (0.58)	1.10 (0.57)
Memory	0.41 (0.17)	0.65 (0.12)	0.37 (0.15)	0.46 (0.16)
updating				
Visual search				
Circles	0.96 (0.08)	0.96 (0.09)	0.95 (0.09)	0.99 (0.02)
Crosses	0.83 (0.23)	0.88 (0.20)	0.89 (0.19)	0.99 (0.02)
Rectangles	0.91 (0.17)	0.90 (0.19)	0.91 (0.18)	0.98 (0.06)
Working memory				
Brown-Peterson	0.35 (0.14)	0.42 (0.15)	0.31 (0.15)	0.36 (0.16)
Binding	1.12 (0.67)	0.99 (0.55)	1.52 (0.61)	1.27 (0.52)
Memory	0.33 (0.17)	0.38 (0.16)	0.28 (0.15)	0.32 (0.18)
updating				
Fluid Intelligence				
RAPM	0.41 (0.16)	0.48 (0.20)	0.37 (0.16)	0.41 (0.18)
Relationships	0.43 (0.16)	0.47 (0.16)	0.42 (0.13)	0.44 (0.15)
Locations	0.26 (0.12)	0.33 (0.14)	0.26 (0.11)	0.33 (0.12)
Shifting SC				
Categorical	-0.27 (0.16)	-0.26 (0.14)	-0.20 (0.12)	-0.23 (0.14)
Figural	-0.22 (0.13)	-0.23 (0.12)	-0.18 (0.15)	-0.20 (0.13)
Numerical	-0.27 (0.26)	-0.28 (0.19)	-0.24 (0.26)	-0.26 (0.24)
Shifting MC				
Categorical	-0.56 (0.22)	-0.50 (0.17)	-0.59 (0.23)	-0.55 (0.16)
Figural	-0.68 (0.22)	-0.68 (0.18)	-0.70 (0.23)	-0.69 (0.19)
Numerical	-0.54 (0.28)	-0.48 (0.22)	-0.53 (0.24)	-0.55 (0.24)
Inhibition				
Flanker	-0.03 (0.05)	-0.03 (0.11)	-0.03 (0.04)	-0.02 (0.04)
Stroop	-0.19 (0.11)	-0.18 (0.10)	-0.19 (0.13)	-0.19 (0.12)
Simon	-0.05 (0.02)	-0.04 (0.02)	-0.05 (0.03)	-0.04 (0.02)

Note. Values are means with standard deviations in parentheses. Scores are accuracies (proportion

correct), except for shifting (proportional switch costs and mixing costs), binding (d'), and

inhibition (proportional interference). RAPM = Raven Advanced Progressive Matrices; SC = switch costs; MC = mixing costs.

Comparability at baseline. To ensure that the training gains and transfer effects can be attributed to the training intervention and do not reflect baseline group differences, we compared the groups at pre-assessment running Bayesian LME models with crossed random effects for each ability using the pre-assessment scores as dependent variables (see Table 6, for NHST results, see Table S5). There was no evidence for baseline differences for most abilities, although evidence was ambiguous for the WM criterion ($BF_{H0} = 2.13 \pm 1.74 \%$), WM transfer ($BF_{H1} = 1.02 \pm 1.66 \%$), and shifting SC tasks ($BF_{H1} = 1.59 \pm 1.46 \%$). Further inspection of the individual tasks revealed that there was strong evidence for a baseline difference for the shifting SC categorical task only ($BF_{H1} = 9.90 \pm 0.00 \%$), with the VS group outperforming the WM group (see Table S6 for BFs and NHST). As group differences in training gains and transfer effects were assessed using standardized gain scores, any effects observed were beyond these baseline differences. However, results should still be interpreted cautiously as we cannot exclude regression to the mean for these outcomes.

Training gains. Results for the Bayesian LME models are presented in Table 7 (for NHST results, see Table S7). We found decisive evidence for an effect of group for the WM criterion tasks, indicating that the WM group improved more from pre- to post- assessment compared to the VS group ($M_{Diff} = 1.14 [0.93, 1.35]$, $BF_{H1} > 100 \pm 1.63 \%$). Similarly, we found strong evidence for an effect of group for the VS criterion tasks, indicating that the VS group improved significantly more from pre- to post-assessment on the trained VS tasks compared to the WM group ($M_{Diff} = -0.41 [-0.67, -0.15]$, $BF_{H1} = 11.74 \pm 2.29 \%$).

Table 6

Baseline Differences in Cognitive Abilities

Ability	M_{Diff} [95% HDI]	BF_{H0}	BF_{H1}	Error
Criterion	0.20 [-0.05, 0.47]	2.13	0.47	1.74
Visual search	-0.03 [-0.26, 0.22]	9.09	0.11	2.07
Working memory	0.25 [0.01, 0.49]	0.98	1.02	1.66
Fluid intelligence	0.11 [-0.11, 0.33]	6.25	0.16	1.57
Shifting SC	-0.28 [-0.52, -0.03]	0.63	1.59	1.46
Shifting MC	0.06 [-0.17, 0.29]	9.09	0.11	1.40
Inhibition	0.04 [-0.18, 0.25]	10.00	0.10	2.42

Note. Estimates are means of the sampling from the posterior distribution with 10000 iterations based on standardized data assessed by Bayesian linear mixed-effects models. As standardized values were used the grand mean for all abilities is zero. Bold Bayes Factors values indicate substantial evidence for the presence or absence of baseline group differences. HDI = highest density interval of the posterior distribution; BF = Bayes Factor; H_0 = null hypothesis; H_1 = alternative hypothesis; SC = switch costs; MC = mixing costs.

Transfer effects. Results for Bayesian LME models are presented in Table 7 (for NHST results, see Table S7). We found substantial evidence for the absence of an effect of group for near transfer to structurally dissimilar WM tasks ($M_{Diff} = 0.12$ [-0.07, 0.33], $BF_{H0} = 5.26 \pm 2.56$ %). Moreover, there was substantial to strong evidence for the absence of an effect of group on measures of far transfer, including fluid intelligence ($M_{Diff} = 0.08$ [-0.14, 0.30], $BF_{H0} = 8.33 \pm 1.60$ %), shifting SC ($M_{Diff} = 0.11$ [-0.10, 0.33], $BF_{H0} = 6.67 \pm 1.50$ %), shifting MC ($M_{Diff} = 0.11$ [-0.12, 0.34], $BF_{H0} = 6.67 \pm 2.48$ %), and inhibition ($M_{Diff} = -0.02$ [-0.25, 0.24], $BF_{H0} = 11.11 \pm 1.50$ %).

Table 7

Group Differences in Gain Scores

Ability	M_{Grand}	M_{Diff} [95% HDI]	BF_{H0}	BF_{H1}	Error
Criterion	0.89	1.14 [0.93, 1.35]	< 0.01	> 100	1.63
Visual search	0.27	-0.41 [-0.67, -0.15]	0.09	11.74	2.29
Working memory	0.40	0.12 [-0.07, 0.33]	5.26	0.19	2.56
Fluid intelligence	0.38	0.08 [-0.14, 0.30]	8.33	0.12	1.60
Shifting SC	-0.06	0.11 [-0.10, 0.33]	6.67	0.15	1.50
Shifting MC	0.10	0.11 [-0.12, 0.34]	6.67	0.15	2.48
Inhibition	0.08	-0.02 [-0.25, 0.24]	11.11	0.09	1.50

Note. Estimates are means of the sampling from the posterior distribution with 10000 iterations based on standardized data assessed by Bayesian linear mixed-effects models. Bold Bayes Factor values indicate at least substantial evidence for the presence or absence of group differences. HDI = highest density interval of the posterior distribution; BF = Bayes Factor; H_0 = null hypothesis; H_1 = alternative hypothesis; SC = switch costs; MC = mixing costs.

Training-related expectations. Bayesian two-tailed independent t-tests were used to test whether the groups differed in their training-related expectations. Data from four participants were missing for expected cognitive transfer and data from three participants were missing for expected transfer to everyday life. These individuals were excluded from the respective data analysis. We found substantial evidence for the absence of a group differences regarding the expected training gains between the WM group ($M = 5.44$, $SD = 1.30$) and the VS group ($M = 5.47$, $SD = 1.87$), $BF_{H0} = 5.51 \pm 0.00$ %. Regarding expected transfer to untrained tasks, we found decisive evidence for participants in the WM group ($M = 4.20$, $SD = 1.66$) reporting higher levels in expected cognitive transfer than the VS group ($M = 3.15$, $SD = 1.51$), $BF_{H1} > 100 \pm 0.00$ %. Finally, we found ambiguous evidence for the absence of a difference in expected transfer to everyday life between the WM group ($M = 4.59$, $SD = 1.76$) and the VS group ($M = 4.25$, $SD = 1.73$), $BF_{H0} = 2.97 \pm 0.00$ % (see Table S8 for NHST results).

Discussion

The goal of the study was to investigate the evidence for and against the effectiveness of WM training in eliciting generalized performance improvements in older adults using Bayesian statistics. To this aim, we investigated the training, near, and far transfer effects after a WM training intervention in a fairly large sample of 142 healthy older adults. To overcome frequent methodological issues in the cognitive training field, we conducted a randomized-controlled, double-blind trial using an active, adaptive VS control condition. Further, training and transfer effects to WM, fluid intelligence, shifting, and inhibition were assessed on the level of abilities, that is, using multiple cognitive tasks as indicators for the construct of interest.

Consistent with previous literature (Karbach & Verhaeghen, 2014; Melby-Lervåg et al., 2016), we found that WM training yielded substantial practice effects across the 25 sessions of training in the respective WM tasks. Moreover, the WM training group also showed large improvements from pre- to post-assessment in the criterion tasks when compared to the VS control group. Although participants substantially improved in the trained tasks, we found substantial evidence against near transfer effects to structurally dissimilar WM tasks, and substantial to strong evidence against far transfer effects to fluid intelligence, shifting, and inhibition on the ability level. Thus, our results do not support the notion of generalized enhancements in cognitive functioning after intensive, computer-based WM training in older adults.

Absence of Transfer

At first, the absence of transfer in our study may seem contradictory to past research, as many studies reported at least near transfer in older adults (see Karbach & Verhaeghen, 2014 for a meta-analysis). However, our data consistently supported the absence of near transfer to structurally different WM tasks and far transfer effects to fluid intelligence, shifting, and inhibition (BFs from 5.26 to 11.11) which is in line with recent WM training studies with larger samples of younger adults (De Simoni & von Bastian, 2017; Sprenger et al., 2013). This finding is especially striking, as participants in the WM training group reported higher post-training expectations

regarding their improvements on the cognitive transfer tasks. There are multiple possible explanations for the absence of transfer effects found in this study.

First, the absence of near transfer to structurally dissimilar WM tasks indicates that the training intervention did not change WMC. One possible reason is that the training intervention was not intensive enough to change WMC and subsequently produce substantial transfer effects (e.g., see Schmiedek, Lövdén, & Lindenberger, 2010, for a high-intensity training intervention successfully producing positive transfer even in old age). Another possible reason is though that the training intervention facilitated the acquisition of task-specific processes that are relevant to perform the tasks efficiently and thus improve performance. Although we included three relatively distinct WM training tasks to enhance variability in learning, a factor that had been suggested to enhance generalizability of practice (Schmidt & Bjork, 1992), practicing the same set of tasks with the same set of stimuli for 25 sessions may have still encouraged the acquisition of strategies tied to the stimuli sets or the structure of the tasks, thus hindering the generalization of improvements to tasks with different stimuli and surface structure (cf. Lustig, Shah, Seidler, & Reuter-Lorenz, 2009). This is in line with some recent meta-analyses suggesting that training interventions with lower intensity (i.e., fewer or less frequent sessions) are more likely to produce transfer effects (Lampit et al., 2014; but see Melby-Lervåg et al., 2016). In addition to task-specific processes, the improvements observed during training and in the criterion tasks may also reflect individuals' capacity to adapt to the training setting and the increase in confidence when performing the computer-based cognitive tasks. Although all of our older participants were experienced in using a computer, they were probably not familiar with practicing such relatively complex WM tasks. Thus, it is possible that the performance increases in the trained tasks primarily reflect improved task literacy.

Second, it is possible that WM training is effective only under certain circumstances and for some individuals. For example, some meta-analyses suggest home-based individual training interventions to be less effective than lab-based group training (Lampit et al., 2014, but see Kelly

et al., 2014), as the latter included face-to-face supervision by a trainer to guarantee compliance and prevent cheating, provision of motivational and IT support, and nonspecific effects of social interaction. Although we cannot completely exclude that these training-related aspects may have limited the effectiveness of our training intervention, we minimized these issues by maximizing personal contact throughout the study (e.g., IT support, weekly motivational quotes, and daily and weekly feedback on training progress). Further, we ensured compliance using Ttool Online and contacted participants if they fell behind their schedule, possibly contributing to the fact that only two participants dropped out during the training intervention.

Further, individual differences factors such as personality, training-related beliefs, and motivation can influence training gains and transfer effects (see Katz, Jones, Shah, Buschkuehl, & Jaeggi, 2016 for an overview, but see Guye et al., 2017). As the heterogeneity between older individuals might be relatively large, this may potentially mask transfer effects on the group level, if they are assumed to be relatively small (cf. Bürki, Ludwig, Chicherio, & de Ribaupierre, 2014). To gain insight into whether subgroups of individuals benefited more from the intervention than others, we analyzed the training data of this study and investigated whether 29 individual differences variables reported frequently in the literature (including demographic variables, real-world education, motivation, training-related beliefs or personality traits) predicted change in training performance (Guye et al., 2017). However, out of all of these investigated variables, only one predicted change in training performance in the older adults (i.e., belief in the malleability of intelligence; Dweck, 2000), and it did so opposite to common expectations (i.e., participants believing more strongly in the intelligence being fixed showed larger training gains). These results suggest that the role of individual differences in explaining variance in training gains is negligible only. Assuming that transfer gains are a consequence of training gains, our findings thus render it unlikely that individual differences in these commonly proposed traits can explain the (in-)effectiveness of cognitive training interventions.

Third, it is possible that WM training effects did not generalize simply because repetitive cognitive task practice is not effective in eliciting changes in WM capacity in general. Hence, the near and far transfer effects reported in recent meta-analyses (e.g., Karbach & Verhaeghen, 2014) might have been substantially overestimated due to methodological limitations of the (included) studies (i.e., small sample sizes, passive control groups, transfer assessment on the level of individual tasks). And, these effects may have been aggravated by more general problems in psychology such as publication bias. For example, notoriously small sample sizes, in particular in studies with older adults, yielding low statistical power seriously threatens statistical inferences by increasing the probability of inflated effect sizes (cf. Bogg & Lasecki, 2015; Halsey et al., 2015). Hence, meta-analyses based on these inflated effect sizes potentially overestimate the effect of training interventions.

Limitations and Future Research

One limitation of our study is that computer-based cognitive training interventions generally attract highly educated and computer-versed older adults who have an inherent interest in their cognition and in ways to improve their cognitive functioning. This self-selection bias towards a highly functioning sample can cause a threat to the generalizability of our results to the general population of older adults. Participants in our sample were considerably more educated than the general population in Switzerland. In our sample, 53 % of the 65-74 years old and 48 % of the 75-80 years old graduated from an institution for higher education (i.e., tertiary institution), whereas only about 14 % of the 65-74 years old and 10 % of the 75-80 years old hold such a qualification in the general population (Bundesamt für Statistik, 2016). Such high levels of cognitive functioning in older participants may leave less room for improvements in cognitive tasks and so could have limited the likelihood to observe transfer effects. Similarly, all participants in our sample had to have access to a computer including Internet connection at home to be able to receive the training intervention. This is, however, not the standard situation in the general population in Switzerland in which only about 50% of individuals older than 65 own a computer

or laptop (Seifert & Schelling, 2015). Both of these factors may reduce the generalization of our results. Thus, future research should aim to investigate training effectiveness in more representative samples.

A second limitation is that traditional lab-based cognitive tasks (such as those used in our study) capture an individuals' cognitive performance, that is, when they expend their maximum effort. However, an equally important aspect of an individuals' cognitive capacity is how individuals perform during everyday life activities in their natural environment (cf. Verhaeghen, Martin, & Sędek, 2012). Developing training interventions that target everyday life cognition and include activity-based transfer measures could increase not only the ecological validity of cognitive training but also boost its effectiveness (cf. Guye et al., 2016).

Conclusion

Whether WM training interventions can enhance general cognitive functioning is heatedly debated. In line with accumulating evidence speaking against its effectiveness in younger adults (cf. Dougherty et al., 2016), and despite decisive evidence for substantial improvements on the trained WM tasks, we found substantial evidence for the absence of near transfer to WM and substantial to strong evidence for the absence of far transfer to fluid intelligence, shifting, and inhibition. Our results thus suggest that WM training is no "quick-fix solution" to improve general cognitive functioning in older adults.

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