

# Interventions to Manage Caregiver Stress

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# Caregiving for a PLWD Impacts Caregiver Health

- Emotional, financial, and physical difficulties (Brodaty et al. 2014, *Am J Geriatr Psychiatry*, 22: 756-65)
- Higher rates of anxiety and depressive disorders (Joling et al. 2015, *Am J Geriatr Psychiatry* 23:1193-1203; Sallim et al. 2015 *J Am Med Dir Assoc* 6:1034-1041)
- Poorer physical health, frailty, and mortality (Dassel et al. 2016, *The Gerontologist*, 56:444-450; Piquart et al. 2007 *J Gerontol B Psychol Sci Soc Sci.*, 62:P126-137; Schulz and Sherwood, 2008 *Am J Nurs*108(9 Suppl):23-27)
- Increased risk for functional comorbidities due to age (50% of caregivers are over 50)
- Personal and spiritual growth, competence and mastery, stronger relationships with PWD (Lloyd et al., 2016, *Dementia*, 15:1534-61)



# Impact on Caregiver Health is Important

- There are a lot of them
- National healthcare policy relies on the contributions of family caregivers
- Caregivers who experience high burden and emotional consequences of caregiving (depression, grief) are more likely to place their loved one in out-of-home care

## CAREGIVING

Nearly 12 million Americans provide unpaid care for a family member or friend with dementia, a contribution to the nation valued at more than \$413 billion.



# There are Many Known Targets for Caregiver Intervention

## FACTORS PROMOTING + OUTCOMES

- High caregiver **self-efficacy**
- Experiencing **positive aspects of caregiving**
- Receiving **psychological support** during caregiving
- Satisfaction with **social support**

## FACTORS PROMOTING - OUTCOMES

- **High** self-reported caregiver **strain/burden**
- Poor caregiver **health**
- Caregiver **depression**
- Low social support
- The PWD experiencing **low functional status** and a high number of **behavioral symptoms**





# Many Different Forms of Intervention Are Effective (for Many Different Outcomes)

## FORMAT

- In-person
- Telephone/virtual
- Individual (1:1)
- Peer/Professionally led

## LOCATION

- Home
- Medical center/hospital
- Community setting
- Telephone/web
- Multiple locations

## CONTENT

- Skills
- Education
- Social support
- Psychotherapy
- Support groups
- Occupational therapy
- Speech therapy
- Medication management

## STAGE

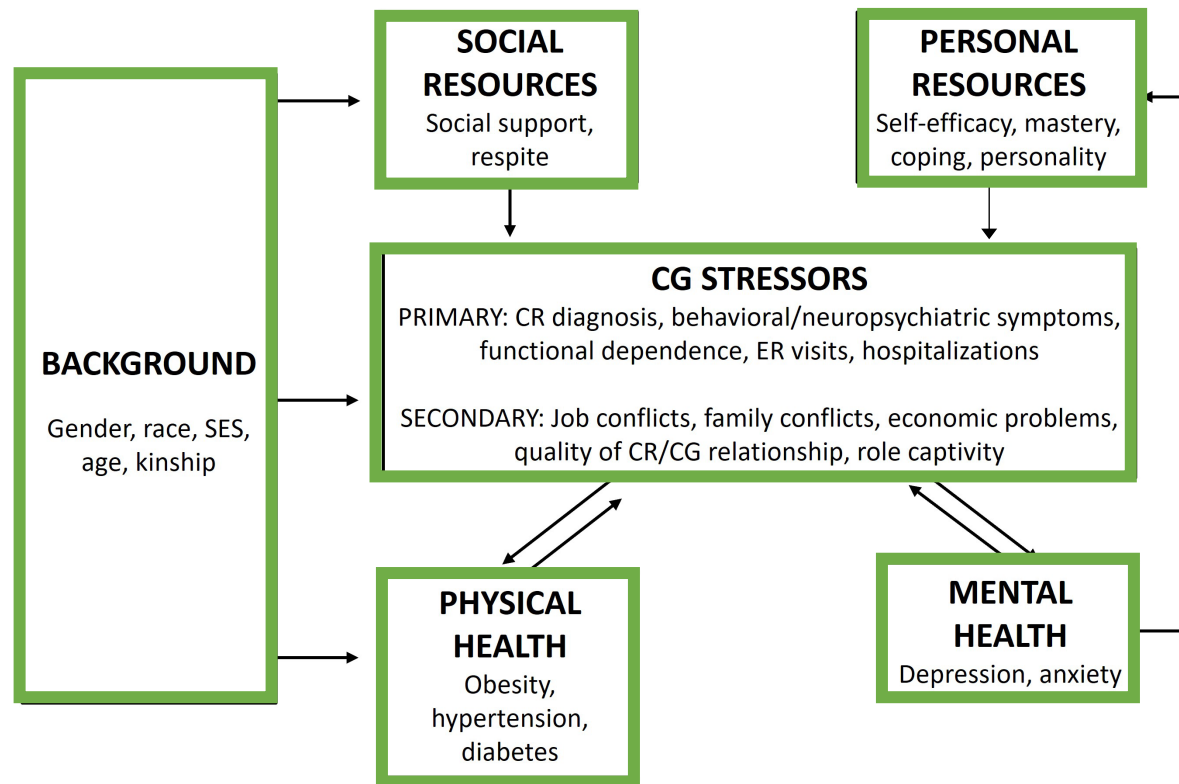
- Early stage
- Middle stage
- Late stage
- Transition points

## OUTCOMES

- CG, PLWD, or dyadic
- CG Burden/strain
- Satisfaction
- Self-efficacy
- Coping style
- Positive/negative strategies
- Behavioral symptoms PLWD
- Functional disability PLWD
- Physical health
- Mental health
- **Social support/networks**
- **Biological outcomes**
- **Documentation of adaptations**
- **Grief**

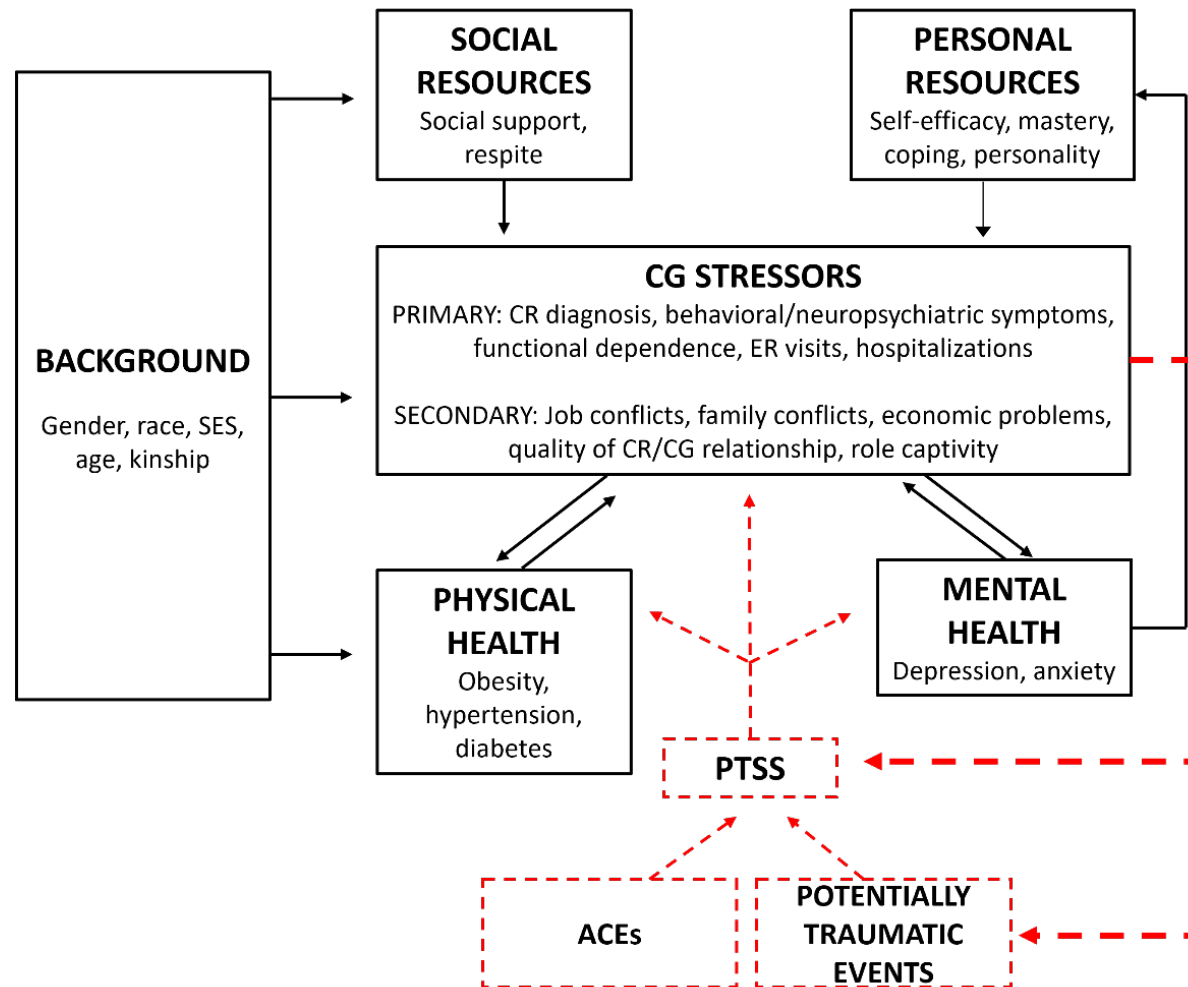


# Pearlin Stress Process



1. Pearlin et al., 1990, *The Gerontologist*, 30(5):583-594
2. Lazarus and Folkman, 1984, *Stress, appraisal, and coping*. Springer Publishing Company.
3. Liu et al. 2012, *Nursing Research*, 61

# Pearlin Stress Process-Modified



# Components of trauma



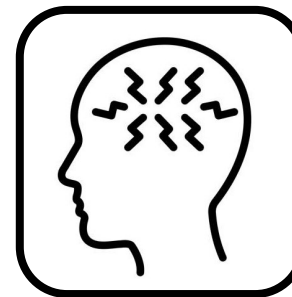
## EXPOSURE TO A POTENTIALLY TRAUMATIC EVENT

- Actual or threatened death, serious injury, or sexual violence through
- **Direct experience**
- **Witnessing** the event
- **Learning about** a traumatic event that happened to family/friend
- Repeated and extreme **exposure** to aversive details of a traumatic event



## RESPONSE (PTSS)

- **Posttraumatic Stress Symptoms**
  - **Re-experiencing** the trauma
  - **Avoidance** of reminders of the trauma
  - **Negative cognitions and mood**
  - **Arousal and reactivity**



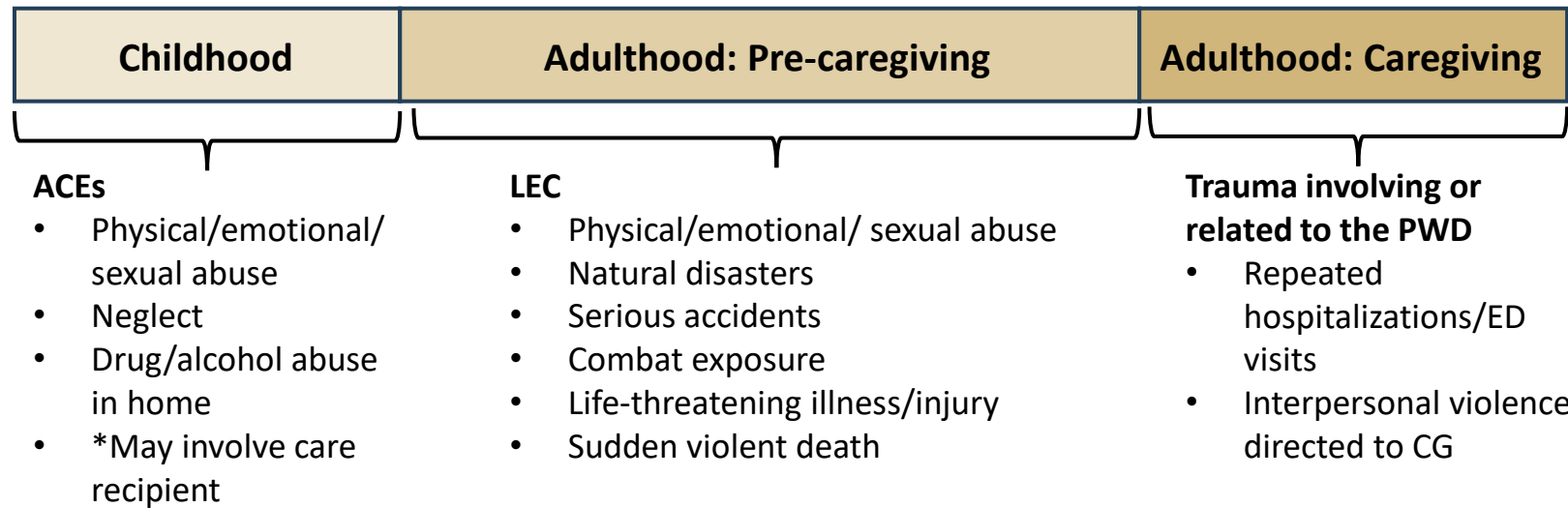
## PTSD

- **1-2 symptoms in each category**
- **Symptoms present  $\geq$  1 month**
- **Significant distress or impairment**



# Timing of Trauma

- Adverse Childhood Events (ACEs): Physical, emotional, sexual abuse or neglect; witnessing domestic violence
- Before, during, as a result of caregiving role
- Trauma involving the PWD
- Trauma related to dementia



# Trauma During Caregiving

## INTERPERSONAL VIOLENCE

- **PWD can inflict harm without intention**
- Behavioral symptoms of dementia:
  - Aggression
  - Verbal abuse
  - Sexual disinhibition
- Study of 184 dyads showed 15.8% of CG experience severe violent behavior (Paveza et al., 1992, *The Gerontologist*, 32:493-497)
- Aggression by PWD associated with increased risk for CG depression (Covinsky et al., 2003, *J Gen Intern Med*, 18:1006-1014; Pinyopornpanish et al., 2022, *Sci Rep* 12:14138)

# Impact of Events Scale – 6 (IES-6)

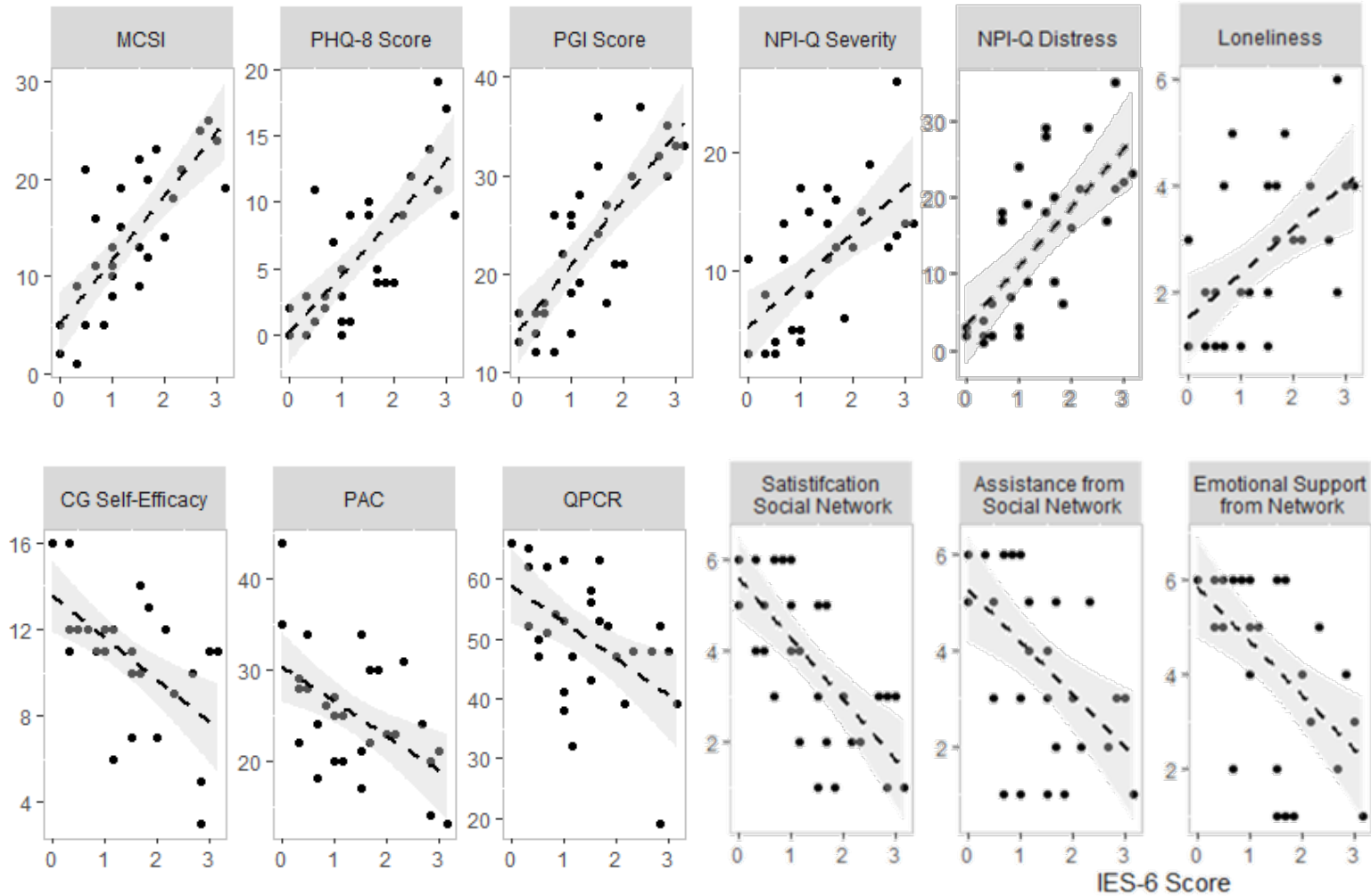
	Not at all	A little bit	Moderately	Quite a bit	Extremely
I thought about [the event] when I didn't mean to	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I felt watchful or on-guard	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other things kept making me think about [the event]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I was aware that I was experiencing a lot of feelings about [the event]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I tried not to think about [the event]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I had trouble concentrating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



# CARES Study Preliminary Data: ACES

	Total ACEs	
	r-value	p-value
MCSI	0.24	(0.20)
PHQ-8 Score	<b>0.45</b>	<b>(0.01)</b>
PGI Score	<b>0.42</b>	<b>(0.02)</b>
NPI-Q Severity	<b>0.42</b>	<b>(0.02)</b>
NPI-Q Distress	<b>0.43</b>	<b>(0.02)</b>
CG Self-Efficacy	<b>-0.39</b>	<b>(0.03)</b>
PAC	<b>-0.55</b>	<b>(0.002)*</b>
QPCR	<b>-0.50</b>	<b>(0.005)*</b>
Social Network: Satisfaction	-0.33	(0.07)
Social Network: Assistance	-0.32	(0.09)
Social Network: Emot. Support	-0.24	(0.20)
Loneliness	<b>0.51</b>	<b>(0.004)*</b>
Overall Health	<b>-0.40</b>	<b>(0.03)</b>

# CARES Study Preliminary Data: IES-6



# What's Next

- Administer surveys to 1200 caregivers across the state of NC
- Potential to target PTSS in caregivers experiencing those symptoms