## 29<sup>th</sup> Alzheimer Europe Conference

## Making dementia a European priority

## The Hague, Netherlands / 23-25 October 2019

## ABSTRACT ORAL PRESENTATION (scheduled Oct 25)

The Effects of the Namaste Care Family Program on Caregiving Experiences of Caregivers of People with Dementia

Hanneke J. A. Smaling, PhD1,2, Karlijn J. Joling, PhD3, Prof. Wilco P. Achterberg, MD, PhD2, Prof. Anneke L. Francke, PhD1, Jenny T. van der Steen, PhD2

- 1 Amsterdam Public Health research institute, Amsterdam UMC, location VU University Medical Center, Department of Public and Occupational Health, Amsterdam, The Netherlands
- 2 Leiden University Medical Center, Department of Public Health and Primary Care, Leiden, The Netherlands
- 3 Amsterdam Public Health research Institute, Amsterdam UMC, location VU University Medical Center, Department of General Practice and Elderly Care Medicine, Amsterdam, The Netherlands

Family caregivers of people with advanced dementia regularly judge quality of life as poor and find it difficult to meaningfully connect with their relative. Psychosocial interventions for people with advanced dementia generally do not involve family caregivers or lack evaluation of the effects on caregiver outcomes. The daily Namaste Care program provides person-centered care offering meaningful activities to people with advanced dementia. We adapted Namaste Care to more actively involve family caregivers. Using a cluster-randomized controlled trial, we examined the effect of Namaste Care Family on family caregiver experiences. Ten nursing homes implemented Namaste Care Family for 117 residents, while nine nursing homes provided usual care for 114 residents. The Gain in Alzheimer Care Instrument (GAIN) was used to measure family caregivers' gains in dementia caregiving at baseline and after 1, 3, 6, and 12 months. Qualitative interviews with family caregivers took place 12 months after the start of the program. Mixed models were used to take clustering of repeated measurements within subjects and subjects within nursing homes into account. Interaction terms for group with time were also added. No overall effect of group on caregivers' gains was found. However, the difference in caregivers' gains between the Namaste and control group at 6 months was significantly different from the 1-month difference, with lower caregivers' gains in the Namaste group. Qualitative data indicated that family caregivers changed in how they perceived people with dementia (more positive awareness), visited their relative more often, experienced improved contact with their relative, and reported that the program affected their own feelings (e.g. feeling happy when seeing their relative enjoying him/herself, finding it confronting to see residents in more advanced stages of dementia). Involving family caregivers in Namaste Care Family can have both a positive and negative impact on caregiving experiences.