DEMENTIA CARE AND PSYCHOSOCIAL FACTORS

POSTER PRESENTATIONS

Alzheimer's & Dementia THE JOURNAL OF THE ALZHEIMER'S ASSOCIATION

Dementia care research (research projects; nonpharmacological)/Family/Lay caregiving

## Inclusive support: Addressing the needs of black family caregivers of persons with dementia

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## Abstract

Background: Family caregivers of Black older adults with Alzheimer's disease and/or related dementias (ADRD) have an increased risk, compared to White family caregivers, for developing ADRD themselves and premature death. An effective minority family caregiver support intervention may be designed, or current program appropriately modified, by understanding the relationships between family caregiver support needs, health challenges, and predominantly used coping strengths.

Method: A cross-sectional sample of Black family caregivers living in southeastern Michigan (n=56) completed a survey comprised of a demographic tool, and multiple assessment measures including, the Promise Global Health Scale, the Personal Resource questionnaire, the Revised Scale for Caregiving Self-Efficacy, and the Coping and Adaptation Processing Scale. Descriptive statistics and Spearman correlation coefficients were used to identify the prevalence of population health concerns and the relationships between particular health outcomes and caregiving strengths.

Result: More than 90% of the sample were educated Black women over the age 50 caring for parents (36%), grandparents (5%), Spouses (20%), children (14%), and other relatives (18%). The most common care recipient diagnoses included dementia nonspecified (52%), Alzheimer's disease (20%), and vascular dementia (13%). The average body mass index for the caregivers was 31.7 indicating a high prevalence of obesity. Related caregiver health concerns included hypertension (70%) and diabetes (22%). Adaptive coping by caregivers was significantly associated with positive physical health (p = 0.000), mental health (p=0.001), perceived social support (p=0.001) and selfefficacy for controlling upsetting thoughts (p=0.014). The predominant coping strategies used by the sample were spiritual coping, information gathering, and drawing upon past experiences.

Conclusion: Family caregiver support programs that are designed to target Black adults may be enhanced through an increased focus on health promotion-particularly weight and disease management. Programs should also consider supporting caregivers in developing effective coping strategies in alignment with their preferred ways of coping, including an increased focus on spirituality, optimizing information sourcing, and utilizing effective past strategies.