

part of the content. The workshop was designed to be an engaging learning opportunity. A total of 4 workshops have been conducted in various community settings. **Results:** Evaluation survey results from 36 participants from different community agencies indicated a high level of satisfaction with the workshop content. Feedback also indicated that the workshop helped in building awareness about thinking about dementia and their caregiving role in a different way and learning about different strategies that focussed on joyful and humorous experiences. Agencies have increased their requests for the Social Worker to deliver this workshop for their clients emphasizing the need for further research on the impact of the workshop on caregiver outcomes and the need for exploring strategies for living well with dementia and building resilience. **Conclusions:** Increasing role demands and stressors impact caregiving and take a toll on caregiver health. This program focuses on the positive and protective factors of caregiving including: joy, laughter and humor. The emphasis is on building protective factors and increasing resiliency and better coping in spite of all the stressors in the caregiving journey. This program aims to enhance the knowledge of participants with newer strategies to deal with the caregiving roles and demands. [1] Schulz, R., & Martire, L. M. (2004). Family Caregiving of Persons With Dementia: Prevalence, Health Effects, and Support Strategies [Abstract]. *The American Journal of Geriatric Psychiatry*, 12(3), 240-249.

**O3-06-05 TESTING A WEB-BASED APPLICATION TO HELP INFORMAL CAREGIVERS MANAGE BEHAVIORS IN PERSONS WITH DEMENTIA: WECAREADVISOR™**

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**Background:** Disruptive behaviors in persons with dementia (PwD) are almost universal, are associated with increased health care utilization and nursing home placement and cause upset and burden to families. The purpose of this study was to test a customized, easy-to-use, web-based tool (WeCareAdvisor™) for family caregivers that enables them to assess, manage and track behavioral symptoms and their contributing factors, and provides tailored strategies for in-home, non-pharmacologic behavior management. **Methods:** Informal caregivers of PwD living at home were randomly assigned to WeCareAdvisor™ or a waitlist control. Caregivers were provided with iPads loaded with the WeCareAdvisor™ for a one month time period. Interviews were completed at baseline, at one month and for the control group at two months. Data were also collected on use of WeCareAdvisor™ on a dashboard. **Results:** To date 20 caregivers have participated in the WeCareAdvisor™ study. Most were female (n=15, 75%), Caucasian (n=14, 70%) and an average age of 63.5 years (sd=15.3). Caregivers were fairly evenly split between adult children (n=11, 55%) and spouses (n=9, 45%). The average age of the PwD was 79.7 years (sd=7.7) and eleven (55%) were female. Caregivers logged into the WeCareAdvisor™ a total of 241 times (mean=12.7 log-ins per caregiver, sd=6.8, range 0-26). There were 138 sessions started (mean=7.3, sd=4.1, range 0-17). Sessions covered a range of 13 different behaviors. Behaviors with the most sessions were Agitation (n=29, 21.0%), Toileting (n=25, 18.1%, note: one caregiver created 14 toileting sessions), Motor

Disturbance (n=18, 13.0%), and Anxiety (n=14, 10.1%). Overall, caregivers found the WeCareAdvisor™ useful, “it is a fantastic tool”, gives “the overall feeling of support”, “I wish I had this a long time ago.” Caregivers have also provided valuable feedback on functionality and content (e.g. prompt for evaluate stage does not stand out, more engaging, more explanation of terms, search function). **Conclusions:** Caregivers living at home have found the WeCareAdvisor™ to be a useful tool for helping manage behaviors and find information. Future studies should examine the usability of the tool with formal care providers and in other settings such as long-term care, adult day care centers, and physician’s offices.

**O3-06-06 PSYCHOMETRIC VALIDATION OF A NOVEL SCORING ALGORITHM FOR THE ZARIT CAREGIVER INTERVIEW FOR ALZHEIMER’S DISEASE (ZCI-AD)**

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**Background:** Given an increased incidence of moderate AD, impact on caregivers and their experiences need to be better understood. The Zarit Burden Interview (ZBI) is an established tool assessing self-reported impact of dementia on the caregiver. Despite proposition of various models for an underlying factor structure, a dominant approach has not emerged. We sought to confirm and validate a novel scoring algorithm for a modified 30-item ZBI, the ZCI-AD, in moderate AD dementia. **Methods:** Data from the Mayflower RoAD study (NCT01677754) were utilized for the analyses. 542 patients in 12 countries received sembragiline 1 mg, 5 mg, or placebo, for 52 weeks. Patients were aged ≥50 years, had moderate AD dementia (MMSE score 13–20) and were treated with AChEIs with/without memantine. Confirmatory factor analysis (CFA) was used to test a revised conceptual framework, informed by qualitative research and expert opinion. The resulting scoring algorithm was psychometrically assessed to evaluate reliability, construct validity and ability to detect change. **Results:** CFA confirmed the construct of the conceptual framework of the ZCI-AD, with 9 domains of a supra-domain ‘Humanistic Impact’ formed of Physical, Emotional, Social and Daily-Life sub-domains, and additional domains of Exhaustion, Dependence, Worry and Role Perception (CFI=0.91). Test-retest reliability was good for the Humanistic Impact Total Score (ICC=0.75), and for other scores (ICC between 0.61 and 0.71). All scores showed statistically significant discrimination of groups based on Global Deterioration Scale (severity of cognitive dysfunction) and BEHAVE-AD (global rating of behavioral symptoms). Very little association was observed with patient measures of disease status. All scores, except Dependence, showed sensitivity to change based on caregiver-rated change in overall experience of caregiving. **Conclusions:** The 9-domain ZCI-AD is a valid, reliable and responsive tool that comprehensively assesses caregivers’ experiences. Additional evaluations will be conducted to assess cross-cultural validity, to interpret ZCI-AD scores and to validate the Humanistic Impact domain using Rasch analyses. These domain scores represent an important advance in the evaluation of impact on those caring for people with AD dementia by more fully characterizing caregiver experiences. Such evaluation is important to fully understand the societal impacts and costs of AD.