

Dementia Spousal Caregiving

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Ann Arbor, MI, USA.Email: fujohnso@umich.edu**Abstract**

Introduction: Dementia family caregiving has been linked to depression, anxiety, insomnia, and other negative mental health symptoms, particularly among spousal caregivers who are most likely to have higher levels of caregiving hours. Further, depressive symptoms often present differently based on caregiver race and ethnicity. This study aimed to examine the association between spousal caregiving hours and self-reported depressive symptoms as well as identify any racial/ethnic disparities in depression self-reporting.

Method: Data was drawn from Wave 9 (2008) of the Health and Retirement Study and included 10,120 participants. Linear regression was used to evaluate the relationships between caregiving hours and depression symptoms. Further, a negative binomial model was used to test whether race/ ethnicity moderated the relationship between caregiving hours and self-reported depressive symptoms.

Results: As expected, self-reported depressive symptoms increased as caregiving hours increased (1.65, SD = 2.02, $p < 0.01$). Among the racial and ethnic groups evaluated, Latinx participants experienced the highest levels of depressive symptoms relative to caregiving hours.

Discussion: Dementia affects families. Care and consideration of the family are as important as the care of the individual affected by a dementia-related diagnosis. Depression is a serious anticipated mental health outcome linked to dementia family caregiving responsibilities. As such, there is a need for increased culturally responsive professional screening and treatment for depression among family caregivers. Relatedly, primary care providers play an important role in identifying patients serving as family caregivers and offering necessary supports and referrals.