# Caregiver Intervention Research: Now and into the Future

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# Objectives Key frameworks Progress to date Emerging recommendations





# **Key Frameworks**





### Direct and Indirect Pathways for Nonpharmacological Interventions SupportingFamily Caregivers and Persons Living with Dementia



## Direct and Indirect Pathways for Supporting Family Caregivers and Persons Living with Dementia





Gitlin & Hodgson, 2015 Gitlin & Hodgson (2018) Better Living with Dementia: Implications for Individuals, families , Communities and Society, Academic Press



### **Pathway for Supporting Formal Caregivers**



# **Progress to Date**





# **Categories of Searches**

- 1. Meta analyses and systematic reviews of efficacy trials concerning nonpharmacological intervention effects for:
  - Formal caregivers
  - Family caregivers
- 2. Meta analyses and systematic reviews concerning impact of dementia drugs on caregivers
- 3. Individual studies of translation, effectiveness and pragmatic trials
- 4. Published protocols of trials to understand near future interventions and their outcomes
- 5. Global perspective
  - Asia
  - Latin America
  - Europe
- 6. Reports:
  - National research summit recommendations
  - NASEM Family caregiver report



CONSIDERATIONS -Setting -Disease stage -Type of intervention -Intervention characteristics

### **Non-pharmacological Interventions for Family Caregivers**

Onken et al, (2014) Re-envisioning Clinical Science Unifying the Discipline to Improve the Public Health, Clinical Psychological Science, vo. 2, p. 22-34.



# **Emerging Recommendations**





Emerging Areas for Research Recommendations	
Domain	Example
Improve clinical relevance of trials	<ul> <li>Examine mechanisms or why interventions have positive effects</li> <li>Evaluate dose-response relationships and long term effects</li> <li>Link intervention to disease stage</li> <li>Evaluate cost and willingness to pay</li> <li>Determine and report clinical significance</li> </ul>
Adequately describe interventions to enable reproducibility, replication, adaptation, widespread adoption	<ul> <li>Identify theory base guiding intervention</li> <li>Describe interventionist characteristics</li> <li>Detail number of sessions, duration and length of intervention</li> <li>Describe role of family caregiver in delivering intervention or supporting use of strategies for person with dementia</li> <li>Describe treatment fidelity plan and adherence rates</li> <li>Describe type of blinding applied to trial</li> </ul>
Examine outcomes of relevance to different stakeholders	<ul> <li>Derive consensus in the field as to set of outcome measures for cross-study comparisons</li> <li>Consider use of objective (performance-based), biological and subjective measures</li> </ul>
Enhance study designs	<ul> <li>Locate design to stage model</li> <li>Mediation (mechanisms of action)</li> <li>Use pragmatic trial designs, hybrid designs and/or mixed methods for effectiveness and implementation</li> <li>Standardize attention control groups used across studies to address attention, attrition</li> <li>Examine long-term treatments and treatment effects</li> </ul>
Target & tailor to caregiver needs, lived experience, readiness, style, dementia stage, persons needs, and families from different race/ethnic groups	<ul> <li>Address broader range of needs and for different stages, preferences, values</li> <li>Examine dyadic relationships and which types of interventions impact carer and person;</li> <li>Move beyond isolating primary caregiver and examine informal networks, family decision-making</li> </ul>
Engage in implementation science	<ul> <li>Move evidence to real world settings using hybrid and pragmatic trial designs</li> <li>Test implementation strategies for wide scale implementation/dissemination</li> <li>Examine issues related to sustainability and scalability</li> <li>Identify barriers to access for race/ethnic groups</li> </ul>
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