



Promoting Successful Aging  
in Detroit and Beyond



INSTITUTE OF GERONTOLOGY



Saturday, Oct. 15

2022

9 am - Noon (EST)

Free On-line  
Conference for  
Family Caregivers



**Keynote**  
**9:10-10:10 am**

*Finding Balance:  
Confidence & Wellness in  
Caregiving*

**Rosanne DiZazzo-Miller,  
PhD, OTRL, CDP, FMiOT**  
Associate Professor &  
Director, Division of  
Health Sciences Mentoring  
Program, Wayne State  
University

Far too many caregivers of people with dementia are sent home with a diagnosis and little to no training on the progression of the disease. This presentation will provide an overview of the daily challenges faced by most caregivers followed by a discussion on the critical role of confidence and wellness in caregiver well-being.



**10:15-11:15 am**

*“What’s your style?”  
How Your Caregiving Style  
Impacts the Care You Provide  
& Your Own Well-being*

**Amanda Leggett, PhD,  
FGSA, Assistant Professor,  
Institute of Gerontology &  
Department of Psychology,  
Wayne State University**

Each caregiver tends to have their own style of providing care. Dr. Leggett will present research on the different cognitive and behavioral approaches caregivers use to help persons living with dementia. Once you know your style, you’re better positioned to communicate needs, resolve conflict and appreciate other approaches. She will also discuss how caregiving style can impact well-being and stress.



**11:15-11:50 am**

*Tech Advances in  
Virtual Care Bring the  
Doctor to You*

**Joel Whitbeck Director  
of Virtual Primary Care,  
Henry Ford Health  
System**

Caregivers of relatives or friends with special needs know how difficult it can be to make visits to the doctor. With the help of TytoCare, an Henry Ford Virtual Exam kit, doctors can provide expert care to homebound patients during a virtual care visit.

TytoCare is a handheld device that securely connects to the patient’s Henry Ford MyChart electronic medical record. Tools that easily attach to the device allow the doctor to look inside ears, listen to the lungs and heart, take the temperature, look down the throat and more.

To receive more information of interest to you:

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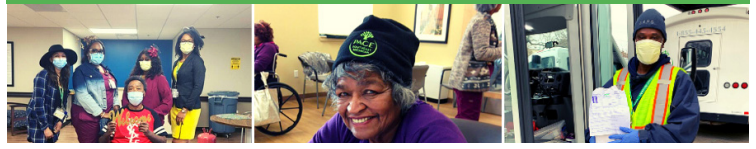
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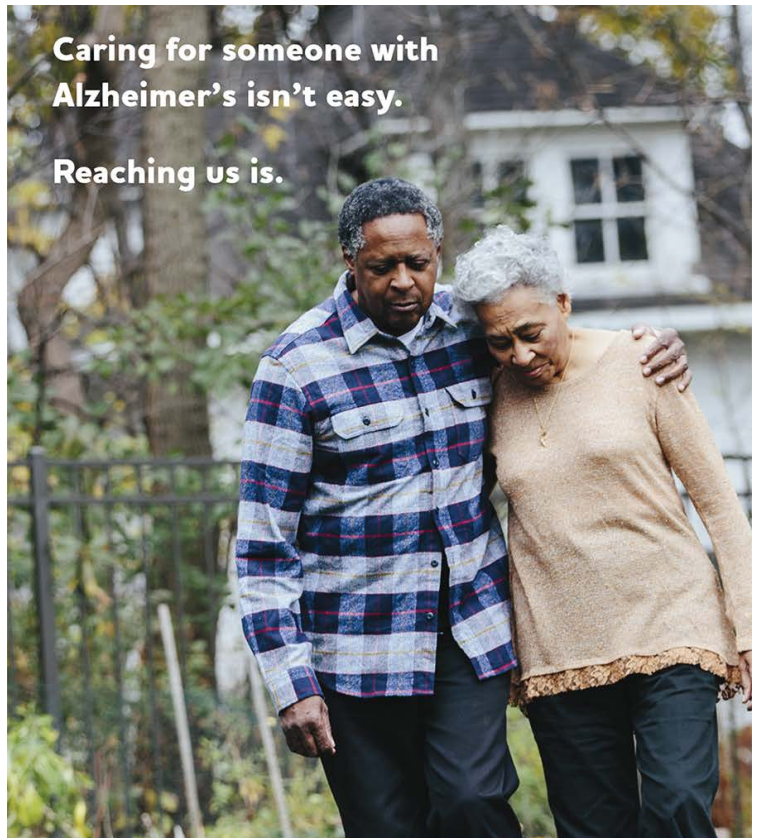
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As a PACE Southeast Michigan participant, all health care services are provided and arranged by your personal health care team. PACE participants may be fully liable for the costs of medical services from an out-of-network provider or without prior authorization with the exception of emergency services.

**Caring for someone with  
Alzheimer's isn't easy.**

**Reaching us is.**



If you care for someone with Alzheimer's disease, memory loss or dementia, you are not alone. We're here day or night — whenever you need us — offering reliable information and support.

Free 24/7 Helpline: **800.272.3900**

Alzheimer's and Dementia Caregiver Center: [alz.org/care](http://alz.org/care)

alzheimer's  association®

# Support for caregivers like you



## Contact the Henry Ford C.A.R.E. Program<sup>SM</sup>

*(Caregiver Assistance Resources and Education Program)*

Support groups and classes are being offered virtually with the option to join by phone, tablet, iPad, or computer.

### Contact us by:

[henryford.com/familycaregivers](https://www.henryford.com/familycaregivers)

Toll free number: 866.574.7530

Email: [CaregiverResources@hfhs.org](mailto:CaregiverResources@hfhs.org)

Join our Facebook group, "Henry Ford Health Family Caregivers," and become part of an online community of caregivers.



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OF MICHIGAN

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Presbyterian Villages of Michigan (PVM) is committed to providing excellent services to the elders we serve, their families and to each other. Our vision of *service excellence* includes four core values: respect, relationships, listening, and accountability. These values serve as a standard against which every action and thought can be measured. The *service excellence standards* show our commitment to make PVM a great place to live and work. To find out more about our locations please call 248-281-2020 or visit our website at

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Assisted Living & Memory Care  
Communities

ANNUAL ONE-OF-A-KIND CONFERENCE | 3.5 CREDITS



SAVE THE DATE  
Nov. 11, 2022

This conference brings together healthcare professionals, caregivers and those living with Alzheimer's into a shared conversation



## A Meaningful Life with Alzheimer's Disease

**How to Assess Pain within Cognitively Declining Individuals**  
Linda Keilman, DNP, RN, GNP-BC, FAANP

**Cognitive Decline in time of COVID and Social Isolation**  
Irving Vega, PhD

**Caregiver: Walking in My Shoes**  
Jim Mangi, Alzheimer's Caregiver

Learn about state-of-the-art research, treatments and caregiving options for those living with cognitive decline. This is a collaboration between the WSU, Institute of Gerontology and the Greater Michigan Chapter of the Alzheimer's Association.

alzheimer's association®  
MICHIGAN CHAPTER

[www.iog.wayne.edu](http://www.iog.wayne.edu)

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**Special Offer!**

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when you complete the setup of your Virtual Exam Kit.



## Seeking Volunteers for Memory Research

Wayne State University is conducting a study to better understand potential biomarkers that may predict cognitive loss and even the earliest signs of Alzheimer's disease.

We are seeking African American participants both male and female, ages 65 and over. Eligible volunteers will undergo:

- Clinical Neurological Assessments
- Memory Testing
- Electro-Encephalogram Testing (EEG) (Recordings of tiny electrical signals from the top of the head.)

Contact the ELeCtra Study at (313) 577-1692 or send an email to [voyko@wayne.edu](mailto:voyko@wayne.edu)



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[jslmi.org](http://jslmi.org)



People of all faiths and beliefs are welcome.



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or call **313-446-4444**

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## The WALLET Study: A Study of Memory Change and Money Management

The IOG study – WALLET (Wealth Accumulations & Later-life Losses in Early cognitive Transitions) – is recruiting men and women age 60 and older who manage their own household finances, but feel like their memory is slipping. All screenings done remotely.

Questions?  
Contact Vanessa at  
313-664-2604 or  
vrarai@wayne.edu

Participants will be **compensated**

- All financial records will be de-identified and information kept **confidential**
- Interviews will take place **over the telephone**



**Peter Lichtenberg, PhD**  
Principle Investigator  
and Director of the  
Institute of Gerontology  
Wayne State University

 **ioG Institute of Gerontology**

## Join us at the Michigan Alzheimer's Disease Center

*The Michigan Alzheimer's Disease Center at the University of Michigan is committed to memory and aging research, clinical care, education, and wellness.*

The Center collaborates with other research institutions across the state including Wayne State University and Michigan State University, as well as local outreach organizations including the Alzheimer's Association to enhance groundbreaking research efforts and community education. The Center is also one of 31 other National Institutes of Health-funded Alzheimer's Disease Research Centers across the country.

### Interested in getting involved in research studies?

Please call Kate Hanson at 734-936-8332 or visit [alzheimers.med.umich.edu/research](http://alzheimers.med.umich.edu/research) for a list of currently enrolling studies.

### Interested in learning about upcoming educational events?

To stay informed of upcoming events, please email Erin Fox at [eefox@med.umich.edu](mailto:eefox@med.umich.edu) to subscribe to our monthly e-newsletters.

### Interested in learning about our brain donation program?

Please call Matthew Perkins at 734-764-7648 or visit [brainbank.umich.edu](http://brainbank.umich.edu).

### Interested in learning more about our wellness programs?

Please call Ashley Miller at 734-615-8293 or visit [alzheimers.med.umich.edu/wellness](http://alzheimers.med.umich.edu/wellness).

### Interested in learning about our Lewy body dementia programs?

Please contact Renee Gadwa at 734-764-5137 or visit [alzheimers.med.umich.edu/lbd](http://alzheimers.med.umich.edu/lbd).

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Michigan  
**ADRC**

[alzheimers.med.umich.edu](http://alzheimers.med.umich.edu)

734-936-8803

[UM-Ask-MADC@med.umich.edu](mailto:UM-Ask-MADC@med.umich.edu)

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- Crisis care/Continuous care
- General In-patient care

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- Patient's Physician
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- Hospice Medical Director
- Experienced Nurses
- Social Workers
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## 9 Online Tools That Help You Stay Safe From Fraud

These services help you safeguard your identity, finances and personal data

by Joe Eaton, AARP, April 1, 2021 | Comments: 2



GETTY IMAGES

### 1. Take a financial vulnerability survey

The Wayne State University Institute of Gerontology has developed an online financial vulnerability survey, at [OlderAdultNestEgg.com](http://OlderAdultNestEgg.com), to help older Americans evaluate decision-making. Through its SAFE program, the service also offers one-on-one coaching to help users

**AARP** recommends using  
 WSU Institute of Gerontology  
 Financial Vulnerability Survey as a first step  
 to safeguard your identity, finances and  
 personal data. Take a survey today! Visit:  
[www.OlderAdultNestEgg.com/  
 for-older-adults/](http://www.OlderAdultNestEgg.com/for-older-adults/)

QUIZ  
 Surprise You

10 Things in Your Wardrobe to Never  
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Use the FVS Today  
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 financial-vulnerability-survey/](http://www.OlderAdultNestEgg.com/for-older-adults/financial-vulnerability-survey/)



## *Finding Balance: Confidence & Wellness in Caregiving*



Associate Professor & Director, Division of Health Sciences Mentoring Program, Wayne State University

Far too many caregivers of people with dementia are sent home with a diagnosis and little to no training on the progression of the disease. This presentation will provide an overview of the daily challenges faced by most caregivers followed by a discussion on the critical role of confidence and wellness in caregiver well-being.

## Finding Balance: Confidence & Wellness in Caregiving

Rosanne DiZazzo-Miller, PhD, OTRL, FMIOTA

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### Overview

- Research findings and limited caregiver resources and training
- The role of confidence in caregiving
- The importance of wellness amid caregiving
- Wellness practices
- Research opportunities
- Mindfulness meditation

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### Pop Quiz

#### Caregiver Wellness Quiz

Caregiving can take its toll on your health and wellness. It's important that you stay in touch with your own feelings and reach out for help if you need it. Take this quiz to reflect on how you're feeling about the level of stress in your life.

	Never	Sometimes	Often	Almost Always
I find it difficult to balance work, family and caregiving responsibilities	0	1	2	3
I have conflicts with my friends, family members or care recipient	0	1	2	3
I worry that I'm not doing a good job as a caregiver	0	1	2	3
I feel guilty	0	1	2	3
I feel anxious	0	1	2	3
I feel sad and cry periodically	0	1	2	3
with sleep	0	1	2	3
I experience chronic neck or back pain	0	1	2	3
I have tension headaches	0	1	2	3

\*This checklist has been reprinted with permission from Caregivers Nova Scotia.

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### Quiz Scoring

**Your Score**

- 0-10 You are probably managing well. Remember that it's still important to think about ways of preventing stress from building up.
- 11-15 You may need to seek out some additional support. Try to identify the things that are causing you stress – you may not be able to change all of them, but there may be areas where you can ask for help or make changes to relieve some of your stress.
- 16-19 You may be experiencing caregiver distress and your responsibilities may already be taking a toll on your physical and emotional well-being. It is important that you talk to your doctor or healthcare professional, a family member, friend, or join a support group to help reduce your level of distress.
- 20+ You may be experiencing caregiver burnout. To protect your physical and mental health, it is important that you talk to your family doctor or healthcare professional today about your stress. You may also want to talk with family or friends or join a support group.

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### Research Findings

- The statistics are staggering – we all know them
- Different types of programs
- Activities of daily living (ADLs)
- Findings
  - Knowledge
  - Quality of life
  - Confidence...

**Family Caregiver Training Program (FCTP): A Randomized Controlled Trial**

Rosemary Stacey-Miller, Anne Whittier, Dennis J. Whelan, May L. Davidson

**OBJECTIVE:** The purpose of this study was to evaluate the effectiveness of the Family Caregiver Training Program (FCTP) for caregiver stress and confidence.

**DESIGN:** A randomized controlled trial was conducted in a community setting.

**SETTING:** The study was conducted in a community setting.

**PARTICIPANTS:** The study included 100 family caregivers of people with dementia.

**MEASUREMENTS AND MAIN RESULTS:** The study found that the FCTP significantly reduced caregiver stress and increased caregiver confidence compared to the control group.

**CONCLUSIONS:** The FCTP is an effective intervention for reducing caregiver stress and increasing caregiver confidence.

**The Role of Confidence in Family Caregiving for People with Dementia**

Rosemary Stacey-Miller, Frederick G. Preiner, and Dawn E. Adams

**OBJECTIVE:** The purpose of this study was to evaluate the role of confidence in family caregiving for people with dementia.

**DESIGN:** A cross-sectional study was conducted in a community setting.

**SETTING:** The study was conducted in a community setting.

**PARTICIPANTS:** The study included 100 family caregivers of people with dementia.

**MEASUREMENTS AND MAIN RESULTS:** The study found that caregiver confidence was significantly associated with caregiver stress and quality of life.

**CONCLUSIONS:** Caregiver confidence is an important factor in family caregiving for people with dementia.

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### Research Findings

- ADL Knowledge
- Confidence
- Quality of Life – Physical Health

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### Confidence

- Both the control and intervention improved
- Both returned to pretest scores 3 months post
- Why?
- Impact on performance



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### Caregivers of Aging with Chronic Conditions

**Caregiver Lived Experiences: "This Was My Life, My New Life"**  
Hickney, C., Davis, D., Bell, P., & Davis, R.  
Mentore East, M.E. MS, COTA, RCH, Prolactin, F.D., PhD, PT & Suzanne Miller, R. PhD, OTR,  
Department of Health Services, Cleveland State University, Cleveland, Ohio, 44115

Introduction	Method	Results (Thematic Analysis)
<p><b>Introduction</b></p> <p>The purpose of this study was to explore the lived experiences of caregivers of aging adults with chronic conditions. The study was conducted using a phenomenological approach. The participants were caregivers of aging adults with chronic conditions. The study was conducted using a phenomenological approach. The participants were caregivers of aging adults with chronic conditions.</p>	<p><b>Method</b></p> <p>The study was conducted using a phenomenological approach. The participants were caregivers of aging adults with chronic conditions. The study was conducted using a phenomenological approach. The participants were caregivers of aging adults with chronic conditions.</p>	<p><b>Results (Thematic Analysis)</b></p> <p>The study identified several themes related to the lived experiences of caregivers of aging adults with chronic conditions. The themes were: 1. The impact of chronic conditions on the caregiver's life. 2. The challenges of caring for an aging adult with chronic conditions. 3. The importance of social support for caregivers. 4. The need for more resources and services for caregivers.</p>

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### Seven Areas of Caregiver Wellness

1. Physical wellness
2. Emotional wellness
3. Spiritual wellness
4. Social wellness
5. Vocational wellness
6. Intellectual wellness
7. Environmental wellness

**YOU DO NOT  
DECIDE  
YOUR FUTURE.  
YOU DECIDE YOUR  
HABITS  
AND YOUR HABITS  
DECIDE YOUR  
FUTURE.**

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### Physical Wellness

1. Exercise regularly
2. Eat a well-balanced diet and healthy weight
3. Sleep
4. Recognize signs of illness



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### More on Walking...

1. Maintains weight and loses body fat
2. Prevents/manages conditions
3. Improves cardiovascular fitness
4. Strengthens your bones and muscles
5. Improves muscle endurance
6. Increases energy levels
7. Improves mood, cognition, memory and sleep!
8. Improves balance, coordination
9. Strengthens immune system
10. Reduces stress and tension



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### More on Sleep...

1. Be consistent, even on weekends
2. Keep a quiet, dark, cool bedroom
3. Remove electronic devices
4. Limit exposure to bright lights
5. Avoid large meals, caffeine and alcohol before bedtime
6. Exercise during the day



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**Emotional Wellness**

1. Stress management
2. Power of positive
3. Feelin' emotions
4. Balancing act
5. Find your bliss



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**Spiritual Wellness**

1. Spend time alone (meditation & mindfulness)
2. Be present
3. Find meaning in life events
4. Live your beliefs



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Pharmacy and Health Sciences

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**Social Wellness**

1. Nurture and strengthen friendships
2. Expand social network
3. Meet new people, offer your friendship to others



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### Vocational Wellness

- 1. Engage in goal-oriented activities and work that bring satisfaction
- 2. Contribute your unique skills and talents
- 3. Remain active and productive
- 4. Find a supportive employer



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### Intellectual Wellness

- 1. Learn a new skill/take a class
- 2. Read
- 3. Play brain games
- 4. Listen to music or learn how to play an instrument
- 5. Spend time with people who challenge your intellect



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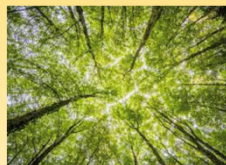
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### Environmental Wellness

- 1. Sounds a little cheesy but...become one with the Earth :)
- 2. Recycle, plant, garden
- 3. Enjoy the outdoors, fresh air, sunshine and rain
- 4. Feel grounded



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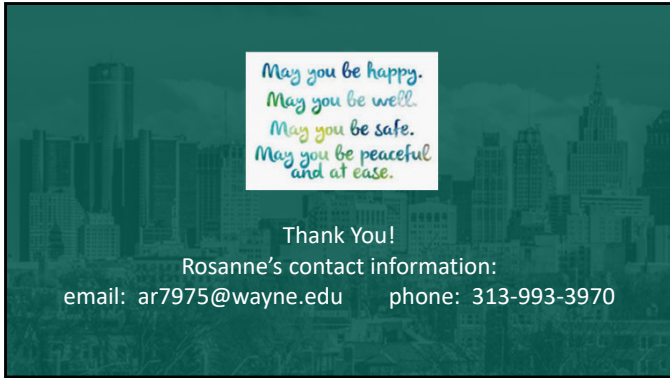
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## *What's your style? How Your Caregiving Style Impacts the Care you Provide and Your Own Well-being*



Assistant Professor, Institute of Gerontology & Department of Psychology, Wayne State University

Each caregiver tends to have their own style of providing care. Dr. Leggett will present research on the different cognitive and behavioral approaches caregivers use to help persons living with dementia. Once you know your style, you're better positioned to communicate needs, resolve conflict and appreciate other approaches. She will also discuss how caregiving style can impact well-being and stress.

**“WHAT’S YOUR STYLE?”**

**HOW CAREGIVING STYLE IMPACTS  
THE CARE YOU PROVIDE &  
YOUR OWN WELL-BEING**



MICHIGAN MEDICINE  
UNIVERSITY OF MICHIGAN  
DEPARTMENT OF PSYCHIATRY

Amanda Leggett, PhD, FGSA  
Assistant Professor  
Institute of Gerontology and  
Department of Psychology  
Wayne State University



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### Acknowledgments

- National Institute on Aging  
K01AG056557, 3K01AG056557-04S1, P30AG053760
- Mentors:
  - Helen Kales, UC Davis
  - Laura Gitlin, Drexel University
  - Cathleen Connell, UM Public Health
  - Myra Kim, UM Psychiatry
  - Mike Elliott, UM Biostatistics
  - Nancy Hodgson, UPenn
  - Daphne Watkins, UM Social Work
- Research assistants:
  - Benjamin Bugajski
  - Brianna Broderick
  - Breanna Webster
  - Elaina Baker
  - Hannah Lee



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Frank, an 86-year old living with dementia, insists that his grandson Kevin is stealing from him and gets combative when Kevin comes to visit, throwing a pillow across the room.

*Which of the following best reflects how you would manage this care situation?*



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You go pick up the pillow and take it back to Frank. You've taken all of Frank's care on your shoulders and seem to take care of things without getting too emotionally involved. You tell Frank that Kevin didn't steal anything from him and start a separate conversation with Kevin.

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You remember this happening last month and that trying to reason with Frank didn't work. Instead you try to dissipate the situation by telling Frank that you and Kevin are going to the kitchen to make a snack and use the snack as a diversion for Frank. In the kitchen you suggest to Kevin that it might be better to prevent this from happening in the future by visiting Kevin at his house, rather than him coming to you. You're not worried and know you'll be able to figure out a solution if this strategy doesn't work.

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You are frustrated when Frank again accuses Kevin. Kevin is a wonderful grandson and you just don't understand why Frank keeps reacting this way. You tell Frank that Kevin would never steal from him and that he needs to stop lying and go pick up the pillow. You feel your blood pressure going up and are not sure how much more of this behavior you can take.

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You exclaim, "What! What did he steal from you?" and immediately feel guilty for your reaction as you realize the dementia is impacting his beliefs. But when Frank can't give you a response for what was stolen, you feel helpless and don't know what to do. You try to trial and error some solutions but keep getting stuck and wish you had some support for how to handle the situation.

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You go to comfort Frank and rub his back to help him calm down. You think about how stressed you would be if you thought someone was stealing from you and try your best to empathize with Frank. You tell him that you remember seeing the "stolen" item and suggest that you look for it together, including Kevin in the search.

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BACKGROUND

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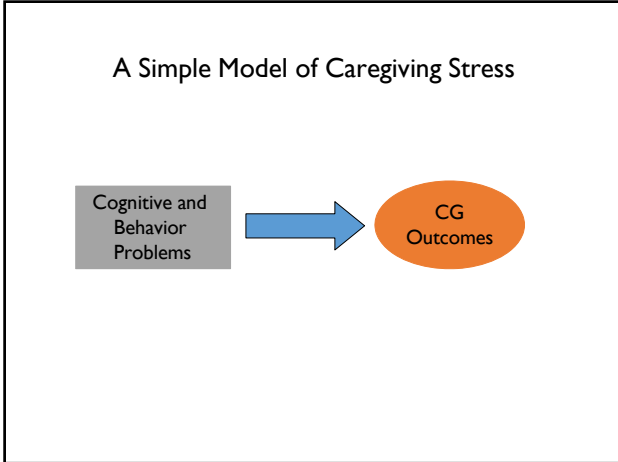
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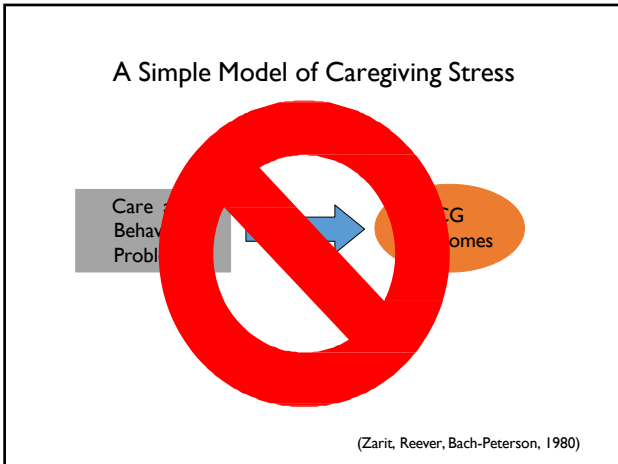
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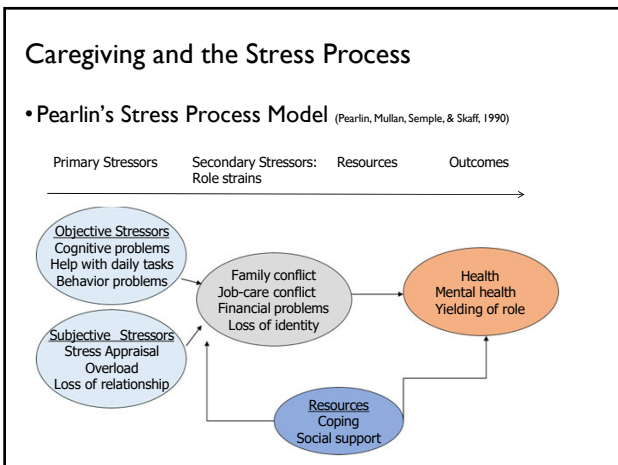
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### Caregiving Styles

- Baumrind's (1978) seminal work on parenting styles
- Do family CGs for PWDs have care management styles?

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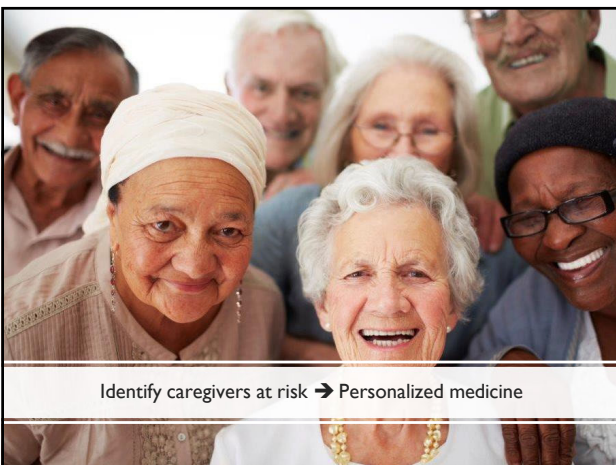
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### Methods

- Participants (N=100)
  - Held primary responsibility of care
  - Unpaid
  - Within 60 miles of Ann Arbor
  - PWD not living in a nursing home or assisted living facility
  - PWD life expectancy > 6 months
- Baseline interviews conducted in 2018
  - lasted an hour and a half
  - at homes or a public place (e.g. coffee shop)

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### Sample Characteristics

Demographics

Variable	Mean (SD), Proportion
Age (Range: 20-90)	63.7 (16.1)
Female	74%
<b>Race</b>	
White	80%
Black	12%
Other	6%
Refused	2%
<b>Education</b>	
Less than college	28%
College	27%
Post-graduate	45%

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### Sample Characteristics

Care Context

Variable	Mean (SD), Proportion
Months of care provision (Range: 4 – 220)	55.3 (43.1)
Hours of weekly care (Range: 1 – 98)	54.3 (37.2)
<b>Relation to PWD</b>	
Spouse	59%
Adult child	27%
Other	14%
CG and PWD live together	75%
<b>PWD Diagnosis</b>	
Alzheimer's	52%
NOS	20%
LBD/Parkinson's	16%
Other	12%

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## CAREGIVING STYLES

Qualitative Approach

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### Qualitative Interview

- Can you tell me about a care related challenge you've had recently?
- Why was this challenging?
- Can you walk me through how you handled or responded to that challenge?
- What values or beliefs do you hold that play into care decisions that you make?



- Rigorous and accelerated data reduction technique (RADaR) (Watkins, 2017)

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### Most commonly reported care challenges

Care Challenge	Primary Frequency (% of Total)	Secondary Frequency (% of Total)
<b>BPSD</b>	51 (45%)	16 (21%)
Agitation	25	9
Delusions	6	1
<b>Cognitive decline</b>	21 (18%)	26 (33%)
Executive dysfunction	10	11
Memory	9	14
<b>ADLs (ex. eating)</b>	17 (15%)	16 (21%)
<b>IADLs (ex. shopping)</b>	0	6 (8%)
<b>Care coordination</b>	11 (10%)	5 (6%)
<b>Medical care (ex. fall)</b>	7 (6%)	5 (6%)
<b>Struggle with decline/autonomy</b>	6 (5%)	4 (5%)
<b>No challenge</b>	1	--
<b>Total care challenges</b>	114	78

Note. BPSD= behavioral and psychological symptoms of dementia; ADL=activities of daily living; IADL = instrumental activities of daily living

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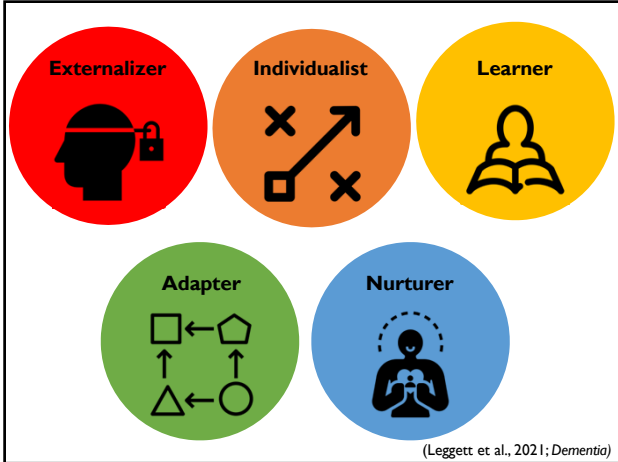
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**The Externalizer (N=14)**  
*"I'll say, 'if you think you're punishing me, you're only punishing yourself'" (ID 172)*

Superficial understanding of dementia Rigid, inflexible approach to care Focuses on stress to self rather than impact to CR

Helpless, frustrated Respond with anger Attempts to pull the CR back into the CGs lived experience

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*"Sometimes if I say no, no that didn't happen –everybody's told me 'don't argue', ... [but] I just don't like letting it go... we get home and I **don't** know if she tries to lie about it or what... she'll act like that never even happened."*

(ID 107)

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**The Individualist (N=15)**  
 “You just live through it, you just do it” (ID 164)



Direct, linear approach to care



Emotionally removed in their discussion of care challenges



“just do it”



Uses preventative actions to manage care



Managing well without many challenges

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“Go there and do it. Remember when I told you, that is part of my responsibility? That’s what you have to do.”

**Interviewer:** Have you figured out any strategies that have made it easier for you over time? Have you changed your approach?

“No, just go there and do it.”

ID 190



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**The Learner (N=35)**  
 “So as you go along, you stumble on a few things – but stumble it is” (ID 124)




Trying to address care challenges and learning as they go, but often getting stuck




On a spectrum between maladaptive and adaptive care strategies and practices



Recognized a need to change their approach



Use trial and error to find a solution to care challenges



Emotional range-tempering, guilt, empathy, helplessness

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“I’ll just have to tell her “there’s something wrong, look at your feet...**Take a deep breath.** [laughs] and just, okay “**she’s not doing this on purpose**”.

ID 133

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### The Adapter (N=17)

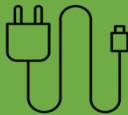
“**Always expect the unexpected**” (ID 142)



Large variety of utilized strategies



Emotional homeostasis



Accrued adaptability-learned from past mistakes



Positive and negative engagement strategies

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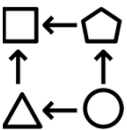
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“A lot of it is just **hiding a lot of her hair care stuff.**We hide her bobby pins, hide her hair brushes, combs – somehow she still finds them – and just kind of, trying to **remind her that it’s in a couple days,** not now. Or **pretending that we did her hair,** that works really well too – just like blowing some like hot air on her hair, she falls for that one almost all the time”

ID 101



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**The Nurturer (N=15)**  
**"I value making the most of what is present rather than what is lost"** (ID 170)




Focuses on impact on CR more than stress to self




Positive affect toward care and the disease



Understanding of dementia, mastery, natural adaptability



Enters into CRs lived experience to address challenge



Comforts CR, teamwork

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**"I value her as a person, I value her life, ... I try to make her life still be useful to her and fulfilling, I've got her painting pictures... they aren't masterpieces but she seems to be enjoying it and we'll put on music, she likes Barbara Streisand... because I think she wants to be alive and she wants to be present so I'm trying to do what I can to help her there."**  
 ID 109

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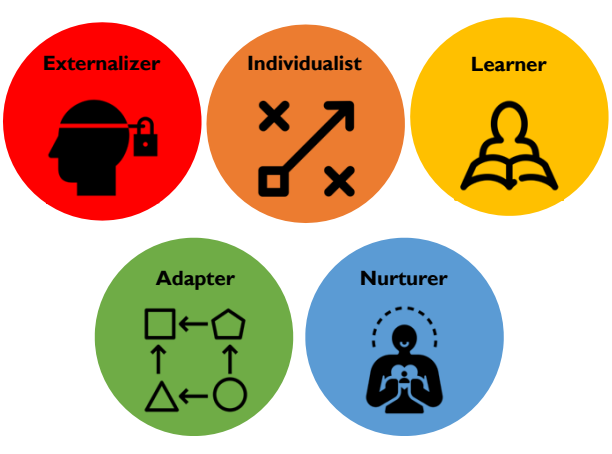
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**Externalizer**

**Individualist**

**Learner**

**Adapter**

**Nurturer**

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100% Caucasian American  
Significantly older  
Most Spouses  
CR's have the most BPSD  
Significantly greater cortisol output (AUC) than Nurturers  
Greatest burden  
Greatest BPSD distress  
Lowest PLWD quality of life



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33% report difficulty paying for their living expenses  
Providing care for the least amount of time (44 months on average)  
Greatest upset about assisting with ADL/IADLs  
Least CG burden  
Lowest PWD quality of life



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81% were Female  
40% were taking an anti-depressant or anti-anxiety medication  
PWDs had the lowest DSRS severity  
Had the least BPSD distress



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Provided care on average for 7 years  
65% had a post-graduate degree  
70% used formal care services  
31% non-White  
Had PWDs with the greatest DSRS severity  
In the middle on outcomes

A diagram consisting of four geometric shapes: a square, a pentagon, a triangle, and a circle. Arrows point from the square to the pentagon, from the triangle to the circle, and from both the pentagon and the circle back to the square.

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60% were employed  
Significantly lower cortisol output (AUC)  
Significantly lower distress related to BPSD and ADL/IADLs  
Significantly higher PWD quality of life [than Externalizers]

An icon of a person with their arms crossed, with a dashed circle around their head, suggesting a focus on the individual or their mental state.

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MODIFYING OUR APPROACH  
BY CAREGIVING STYLE

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Externalizers


- **Strengths:**
  - Trying really hard to meet the needs of CRs with difficult behaviors.
  - Good at expressing the challenges they face.
- **Tips**
  - You are not alone- other CGs face similar challenges and can support you.
  - Acknowledge that “the pipes are corroding” with dementia- a disease process is taking place.
  - **Respite/Adult Day Service**
  - Have a plan in place for a crisis- advance planning can decrease some stress in the moment.

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Individualists


- **Strengths:**
  - Observant; keep great records of the CR’s symptoms and behaviors which may be helpful at clinic visits.
  - Usually effective at getting things done.
- **Tips**
  - Don’t “miss the forest for the trees”- consider humanity of the situation and personhood of the CR- not just the tasks to be accomplished.
  - **Self care**- don’t put all responsibilities on yourself- share some responsibilities or consider a formal service
  - **Pleasant activities**- working on a puzzle, going for a walk, looking through a photo album.

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Learners


- **Strengths:**
  - Growing in their understanding and approach to dementia
  - Willing to accept help and try new ways of managing care
- **Tips**
  - **Behavioral intervention** such as WeCare that can help identify different ways to manage care challenges.
  - **Support Groups** -discover new approaches to care, problem solve, and acknowledge that they are not alone.
  - Trial and error is part of the learning process.
  - Guilt and empathy are common emotions experienced by CGs- talking to a professional or **counselor** may be helpful.

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### Adapters



- **Strengths:**
  - Understand dementia well
  - Have acquired many behavioral strategies
- **Tips**
  - Don't miss the joy in care! Look for growth and positive moments
  - Humor is helpful medicine. It is ok to express emotion.
  - Acknowledge that you're doing a good job- consider walking alongside another CG who is struggling

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### Nurturers



- **Strengths:**
  - Focus on what is still left- the remaining capabilities of the CR- and on ways they have grown in the care role.
- **Tips**
  - **Self-care-** Don't forget to care for yourself!
  - **Respite care-** Remember to take breaks.

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Thank you!

- Much appreciation to my mentors, research assistants, the NIA, and my research participants

*“There are only four kinds of people in the world- those who have been caregivers, those who are caregivers, those who will be caregivers, and those who will need caregivers.”*

-Rosalynn Carter

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## *Tech Advances in Virtual Care Bring the Doctor to You*



Director of Virtual Primary Care  
Henry Ford Health System

Caregivers of relatives or friends with special needs know how difficult it can be to make visits to the doctor. With the help of TytoCare, an Henry Ford Virtual Exam kit, doctors can provide expert care to homebound patients during a virtual care visit. TytoCare is a handheld device that securely connects to the patient's Henry Ford MyChart electronic medical record. Tools that easily attach to the device allow the doctor to look inside ears, listen to the lungs and heart, take the temperature, look down the throat and more.

# Henry Ford Virtual Exam Kit for Care Givers



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## Patient Story

The mother of a 30-year-old Henry Ford patient with autism purchased a Tyto device. Shortly after that, the patient became ill with sore throat, ear redness, and congestion. Mother decided to have an On Demand video visit using her Henry Ford Virtual Exam Kit. During the video visit, mother stated the patient became uncooperative and threw a "temper tantrum." Once the patient calmed down, the visit was completed.

Mother stated, "This is a life changing technology for her and her son as well as the clinic staff." She explained there are times her son can become aggressive during his tantrums. The ability to have a doctor's appointment virtually keeps everyone safe.

During our discussion, the mother said she originally purchased the device for her father who has Alzheimer's. She stated that this device is great for anyone that has children or cares for adults with disabilities or mobility concerns.



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## What is the Henry Ford Virtual Exam Kit?

- The Henry Ford Virtual Exam kit is a small handheld device that is used from home to enhance a virtual visit with your Henry Ford doctor.
- The device has several attachments that enable your doctor to conduct many exams that previously required an office visit, including:
  - Listen to heart sounds
  - Listen to lungs sounds
  - Observe heart rate
  - View inside of the ear canal
  - Examine throat
  - Skin examination
  - Built-in thermometer
  - Pulse oximeter attachment




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### Who can use the device?

- Anyone in your home or extended family can use the device. So, one device per household is all you need.
- Henry Ford Health is currently the only Health System in southeastern Michigan that provides virtual care using the Tyto device.
- Henry Ford offers a 24/7, 365 Video Visit On Demand service. This means that in the middle of the night, if you have medical concerns, you can now connect with a Henry Ford doctor and have a comprehensive exam.

HENRY FORD HEALTH



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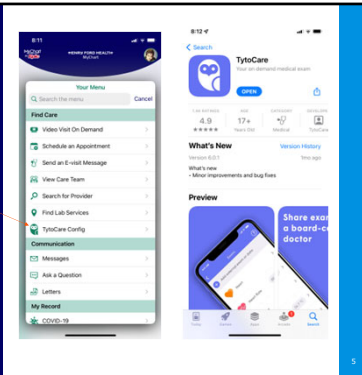
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### How does the Henry Ford Virtual Exam Kit work?

The Henry Ford Virtual Exam Kit securely connects to your Henry Ford Health MyChart account.

- The Henry Ford Virtual Exam Kit securely connects to your Henry Ford Health MyChart.
- Using a tablet or smart phone login to the patients MyChart and click the "Tyto Config" icon.
- This will prompt you to download the Tyto App.
- Once the App is downloaded you will be able to pair your device and connect.

HENRY FORD HEALTH



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### Live Demo

HENRY FORD HEALTH

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