

The New York University Counseling and Support Intervention for Caregivers: An Evidence-Based Intervention for Caregivers of People with Alzheimer's Disease

Background:

The focus of the New York University (NYU) Counseling and Support Intervention for Caregivers is to diminish the negative impacts and increase the positive supportive elements of family caregiving. This is achieved through a combination of individual counseling and additional support interventions, such as support groups and the availability of ad hoc counseling.

Published articles provide evidence-based information that this intervention: (1) decreases caregiver depression, (2) decreases negative caregiver appraisals of behavior problems in the person with dementia, and (3) delays nursing home placement of the person with dementia. Thus far, the NYU Counseling and Support Intervention has proven effective for spouse caregivers. It is currently being tested with adult children caregivers.

Intervention:

The NYU Counseling and Support Intervention began in 1987 and has gone through two phases. From 1984 to 1991, 206 participants were recruited, and from 1991 through 1997, an additional 200 participants were recruited for a total sample size of 406.

All participants were spouse caregivers of persons with a clinical diagnosis of Alzheimer's disease. The participants were required to be primary caregivers of their spouses and to have at least one relative living in the New York City metropolitan area. After a baseline assessment of each spouse caregiver, they were randomly assigned to participate in either the enhanced treatment group that received the intervention or the control group that received usual care.

The enhanced treatment group received treatment through three approaches: (1) individual and family counseling sessions that took place within the first four months of enrollment, (2) weekly support groups, and (3) "ad hoc counseling" that allowed an ongoing availability of counselors over the telephone and could be used by participants and other family members at their determination. Each participant in the enhanced treatment group received all three components of the intervention. The intervention was not time-limited and is available to participants and their families indefinitely.

Usual care was defined as normal counseling services offered to all families at the NYU Aging and Dementia Research Center, including information about resources and advice as it was requested. Control group participants were free to use other assistance, and some made frequent use of ad hoc counseling.

Evidence for Effectiveness:

The impact of this intervention on depression, caregiver appraisals of behavior problems, and delay in nursing home placement has been published in major scientific journals.

The NYU Counseling and Support Intervention has a significant impact on decreasing depressive symptoms in spouse caregivers. These changes were first detected at the one year follow-up assessment and were still apparent three years after enrollment. Few intervention studies have demonstrated an effect on depression beyond one year. Since a positive impact on depression symptoms was not detected at the four month follow-up but was detected from the one year through three year follow-up, researchers suggest that the benefit of the intervention is fully recognized once participants receive all three components of the intervention. The sustained effects may be due to the intervention's flexibility, emphasis on skill building, and focus on the development of additional coping resources.

During the study period, the number of behavior problems reported in persons with dementia increased for both the treatment and control groups due to disease progression. However, the intervention had a marked impact on reducing the spouse caregivers' negative appraisals of these behavior problems. The treatment group appraised behaviors less negatively, while the control group appraised behaviors more negatively over the study period. This suggests that the intervention provides spouse caregivers with greater tolerance for patient memory and behavior problems through the development of successful coping mechanisms.

Most recently, it has been found that receiving the NYU Counseling and Support Intervention leads to delayed nursing home placement of the person with dementia. Data analyses suggest that the median delay in placement is 557 days, or approximately 1.5 years. This extends a result found in 1996 that studied the first 206 participants in intervention and found a median delay of 329 days. Importantly, delaying nursing home placement of the person with Alzheimer's disease did not diminish caregiver well-being. Data indicates that participants were, in fact, able to keep their spouses at home longer as a result of improvements in the participants' well-being.

For more information about the NYU Caregiver Intervention, contact Mary Mittelman, Dr.P.H. at mary.mittelman@med.nyu.edu or by visiting her website at <http://aging.med.nyu.edu/adrc/about/staff/mittelman.html>.

Resources for Replication:

In 2002, NYU researchers published a manual entitled *Counseling the Alzheimer's Caregiver: A Resource for Health Care Professionals*, which describes specific strategies health care professionals can use to support caregivers of people with Alzheimer's Disease. The manual covers issues ranging from diagnosis to end of life.

Publications:

Mittelman, M.S., Haley, W.E., Clay, O.J., & Roth, D.L. (2006). Improving caregiver well-being delays nursing home placement of patients with Alzheimer's disease. *Neurology*, *67*, 1592-1599.

Mittelman, M.S., Roth, D.L., Coon, D.W., & Haley, W.E. (2004). Sustained benefit of supportive intervention for depressive symptoms in caregivers of patients with Alzheimer's disease. *American Journal of Psychiatry*, *161*, 850-856.

Mittelman, M.S., Roth, D.L., Haley, W.E., & Zarit, S.H. (2004). Effects of a caregiver intervention on negative caregiver appraisals of behavior problems in patients with Alzheimer's disease: Results of a randomized trial. *Journal of Gerontology: Psychological Sciences*, *59B*, P27-P34.