

EXECUTIVE SUMMARY

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INTRODUCTION

The following Executive Summary provides an overview of the evaluation findings of the *Kinto Care Coaching* intervention for family/friend informal caregivers. Caring for individuals living with dementia presents unique challenges for caregivers, including changing roles and responsibilities, financial concerns and planning, increased emotional and health strains, and decreased well-being. Research has found significant benefits from caregivers who participate in evidence-based programs. However, many of these programs are not scalable nor sustainable outside of a research context. To date, few studies have leveraged technology to address this issue for engaging and intervening with informal family and friend caregivers. The *Kinto Care Coaching Intervention* is an innovative program that uses technology via a mobile app to address the needs of informal caregivers of persons living with dementia.

STUDY OVERVIEW

A randomized controlled trial research design was used to examine the efficacy of the *Kinto Care Coaching Intervention*. Participants in the intervention condition received the *Kinto Care Coaching Intervention* that uses technology via a mobile app to implement the 6-week structured protocol. Participants randomly assigned to the waitlist control condition were eligible to receive a modified version of the intervention after completion of the study.

Outcomes were assessed across time that included both short-term and long-term impacts and included: Time 1 (Baseline); Time 2 (after program completion); and Time 3 (45 days after Time 2) and included the following outcomes: Unmet Needs, Unmet Needs Distress, Financial Self-Efficacy, Dyadic Relationship Strain and Role Captivity, Emotional Health Strain, Caregiver Mastery, Personal Gain, Loneliness, Caregiver Burden, Anxiety Symptoms, Depressive Symptoms, IADL/PADL Difficulty, IADL/PADL Distress, Cognitive Difficulty, Cognitive distress, Behavioral Frequency, and Behavioral Distress. A total of N=329 participants, n=137 participants in the intervention condition and n=192 participants in the waitlist control condition, completed the protocol and were included in the analyses for assessing efficacy.

Participants on average were 55.75 years old (SD=13.04) and the majority were female (76.9%), Caucasian (70.8%), married (67.2%), and heterosexual (89.7%). Most participants worked part- or full-time (62%), had a bachelor's or post/professional degree (70.2%), and had yearly incomes of \$75,000 or more (53.5%). Participants primarily provided care to a parent/in-law (57.4%) or a spouse/partner (26.4%) with the majority of individuals with dementia residing in their own home (57.1%). Most caregivers were providing care between 2 and 5 years (40.4%) and were providing 40 or more hours a week in care (35.9%). Most participants were caring for an individual with Alzheimer's disease (56.8%)

RESULTS

Overall significant group differences between the intervention and the waitlist control conditions across time were found for the following outcomes:

- Decreased Unmet Needs
- Decreased Unmet Needs Distress
- Increased Financial Self-Efficacy
- Decreased Dyadic Relationship Strain and Role Captivity
- Decreased Emotional Health Strain
- Improved Caregiver Mastery
- Decreased Caregiver Burden

- Decreased Symptoms of Anxiety
- Decreased Behavioral Frequency
- Decreased Behavioral Distress

For the majority of outcomes, significant change occurred from Time 1 to Time 2 with maintenance (or no change) from Time 2 to Time 3. For the outcomes Unmet Needs, Unmet Needs Distress, and Financial Self-Efficacy, significant change occurred from Time 1 to Time 2 and from Time 2 to Time 3 indicating continued improvements.

The following outcomes were not found to be statistically significant between the intervention and waitlist control conditions: Personal Gain, Loneliness, Symptoms of Depression, Difficulty with IADLs/PADLS, Distress with IADLs/PADLs, Difficulty with Cognition, or Distress with Cognition.

CONCLUSIONS

The *Kinto Care Coaching* program was found efficacious across multiple key outcomes for family/friend caregivers. The following components of the program were thought to contribute to the success of the intervention and included: 1) program content that specifically addressed financial aspects of caregiving along with overall caregiving concerns and issues; 2) on-going interactive features that facilitated caregiver engagement and provided support; and 3) the use of technology for program implementation. Overall, *Kinto Care Coaching* was found to be an evidence-based program that represents a scalable and low-cost approach for improving the lives of informal caregivers.