

Methods: A randomized controlled trial was carried out from January 2023 to April 2024 in Brazil. A total of 162 individuals were randomly allocated to an intervention group (IG) (n = 77) or a control group (CG) (n = 85). The IG had free access to the iSupport-Brasil platform for three months. Simultaneously, the CG participants were provided with a link to access the Brazilian Alzheimer's Association website and a copy of the "Care Guide for Older People", published by the Brazilian Ministry of Health. Pre- and post-intervention assessments were carried out using measures of burden (a single-item Burden Scale and the Zarit Burden Interview – ZBI), and of anxiety and depressive symptoms (Hospital Anxiety and Depression Scale - HADS).

Results: Based on an intention-to-treat analysis, a reduction in anxiety symptoms was observed for the IG (p = 0.02). Based on a per-protocol analysis, significant reductions in burden (p <0.01) and anxiety symptoms (p < 0.01) were found for the IG. No significant effects were found for depressive symptoms, although scores decreased. For the CG, the regression model indicated that, on average, burden and depressive symptoms worsened somewhat, but this result was not statistically significant.

Conclusions: The iSupport-Brasil program was effective in reducing perceptions of burden and anxiety symptoms among informal caregivers in Brazil. Therefore, we recommended that informal caregivers of people living with dementia use this program to help them broaden their interpersonal coping strategies and improve their emotional health, in addition to using mainstream long-term care support services.

P26: Variables associated with having psychosocial and healthcare needs among unpaid carers in Chile: Data from the National Disability and Care Dependence Survey (ENDIDE) 2022

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Background: There is a dearth of research on the health and psychosocial support needs of unpaid carers in low- and middle-income countries, where approximately 80% of all people living with a disability or functional impairment and who may need support with their activities of daily living currently reside.

Objectives: To explore the variables associated with having the perception of psychosocial or health support needs among a sample of unpaid carers of people living with a disability and/or functional impairment in Chile.

Methods: This is a cross-sectional analysis of a nationwide, population-based survey involving sociodemographic, care, and mental health related data of 1,900 individuals aged 13 and older who reported being the primary carer for someone with care needs in their household (adults or older persons). Univariate and multivariate logistic regression analyses were used.

Results: Being widowed/divorced, providing more hours of care, more personal care tasks, with an increased level of perceived difficulty, were independently linked with higher odds of having psychosocial or health support needs. Experiencing (most of the time) low interest/depressive mood, low energy, and anxiety, were associated with 0.6-, 0.9-, and 0.7-times higher odds of having unmet psychosocial and healthcare needs, respectively, compared to experiencing these a few times. Having low sense of control most of the time led to 2.6 higher odds of having psychosocial or health support needs compared to those who felt this way only a few times.

Conclusions: Variables related to the care provision and mental health, which could be improved with the receipt of more formal support, were the strongest factors related with unmet psychosocial and healthcare needs.