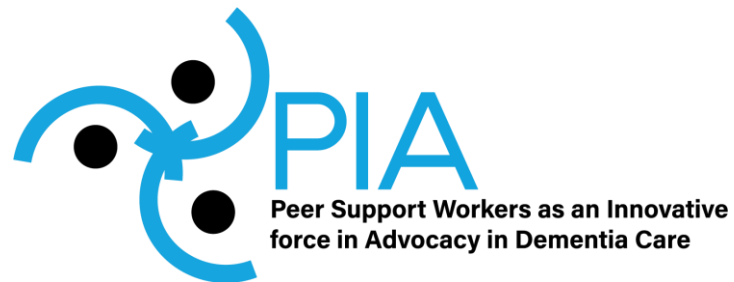


# Peer Support Workers as an Innovative force in Advocacy in dementia care



2021-1-NO01-KA220-ADU-000026860



Co-funded by the  
Erasmus+ Programme  
of the European Union



- 1) Introduction in dementia (general definition and prevalence)**
- 2) 5 keys to have in mind about dementia (dementia friends' program)**
- 3) The role of PSW in dementia care -Countries specific issues**
- 4) Significant issues for people living with dementia e.g. legal pending issues, human rights, and practical activities (reflective techniques, active listening, role playing)**

# Agenda



## // Objectives\_Module 1:

- Basic information about dementia
- Recognize its different types
- Early symptoms
- Risk factors
- Progression to dementia and dementia stages

# Learning material

Introduction to Dementia

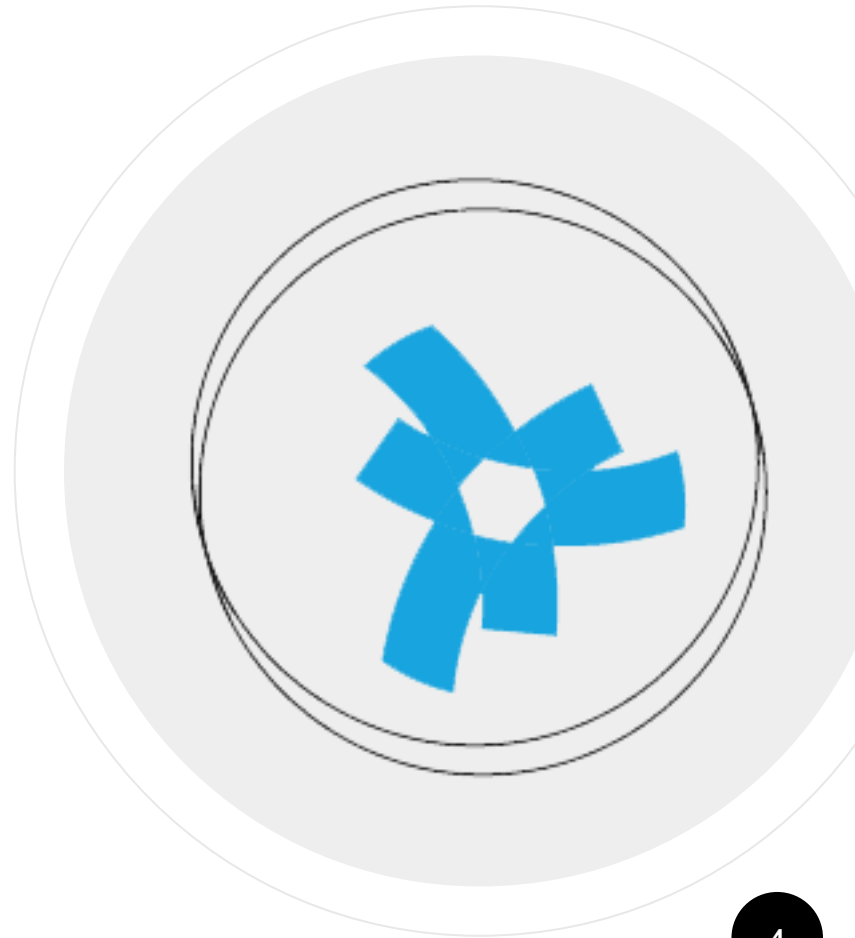
Dementia prevalence

Risk factors to Dementia

Dementia early symptoms

Different types of Dementia

Progression to Dementia- Different stages

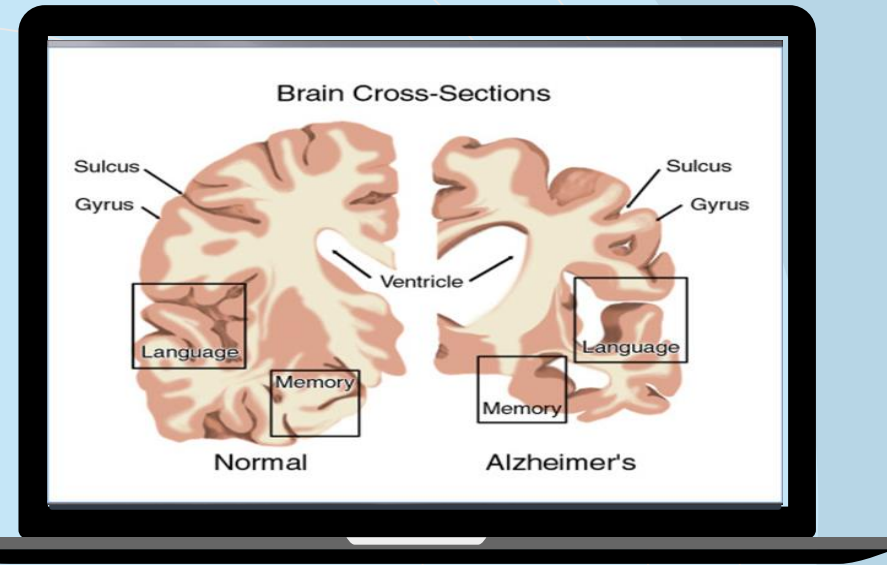


# Dementia Definition

The term dementia refers to an acquired deficit of cognitive function(s), which may include complex attention, executive ability, learning and memory, language, visuospatial-perceptual ability, praxis and social cognition.

The cognitive deficits may or may not be accompanied by behavioral disorders and must be sufficient to interfere with functional independence.

(Sorbi, 2012 EFNS Guidelines)

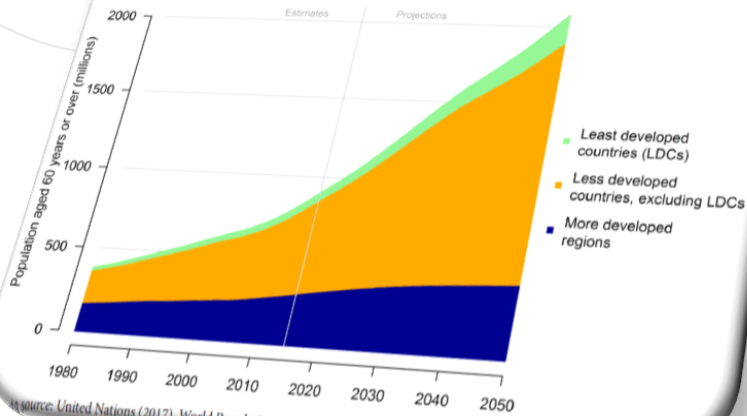


# Dementia can affect

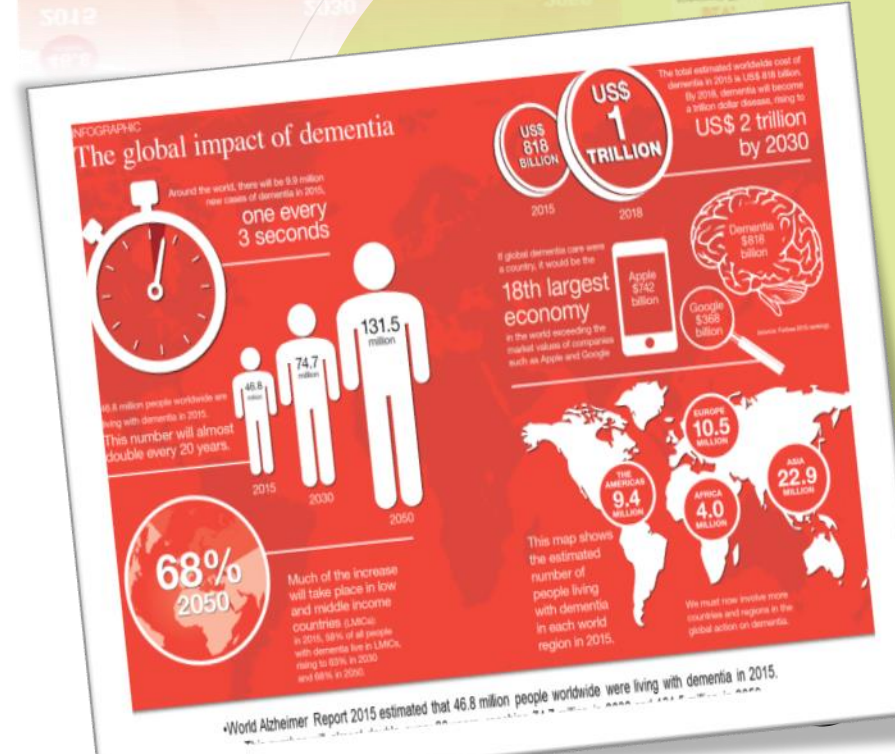
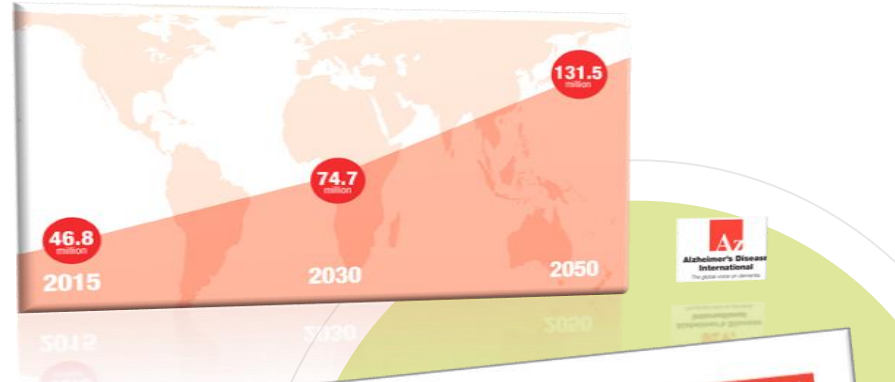
- Memory/Attention
- Insight and awareness
- Ability to plan and make decisions
- Information processing, comprehension
- Learning ability
- Language skills
- Independent living
- Inhibition and organisation skills
- Orientation and visuospatial skills
- Recognition and perception
- Behaviour/Mood/Stress
- Control mechanisms including emotions
- Motivation/Initiation

# Dementia prevalence

Figure 1.  
Number of persons aged 60 years or over by development group,<sup>1</sup> from 1980 to 2050



Source: United Nations (2017), World Population Prospects: the 2017 Revision.



# Dementia now

- Dementia affects 5,4% of people 65<
- 50.000.000 PwD worldwide
- 10.500.000 PwD in Europe
- 200.000 PwD in Greece

**WHO 2015**  
**ADI World Alzheimer Report 2015**  
**ADI World Alzheimer Report 2015**  
**ADI Dementia Greece Report 2012**

It is estimated that in 2030 it will reach 276,000 people and in 2050 365,000 people





# 10 warning signs of dementia



## Early signs of Dementia Symptoms

### World Alzheimer's Month 2021

If these signs are new, they may be a sign of dementia.  
Dementia is not a normal part of ageing.

Speak to your doctor or contact your dementia and Alzheimer association.



prescription

Nutrition, health indexes, physical status,  
natural products

B amyloid,  
neurotrophical  
factors

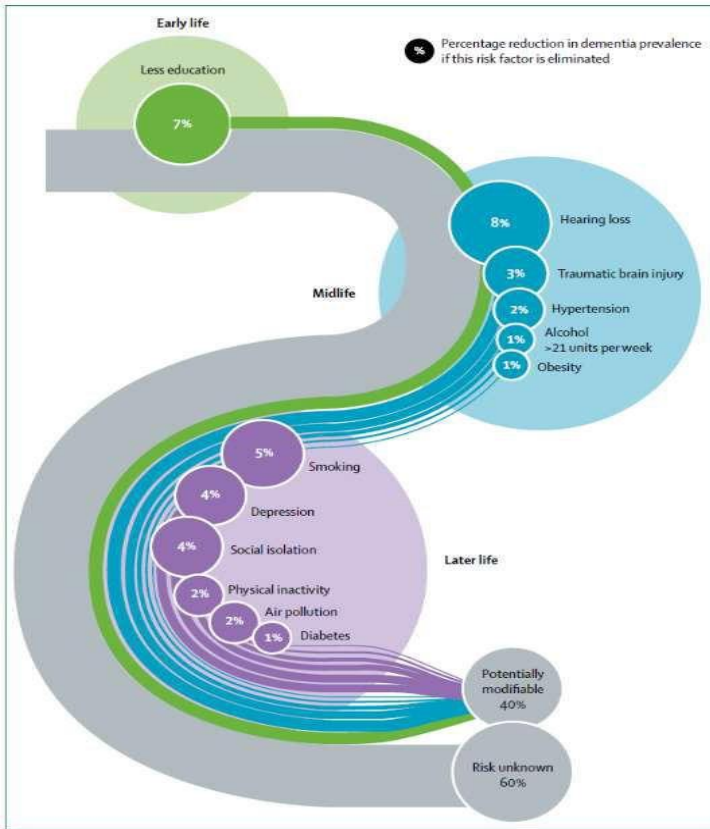
Next goals

Risk factors' reduction  
Nonpharmacological  
interventions



Risk factors are like a cocktail!

# Dementia prevention, intervention, and care: 2020 report of the *Lancet* Commission



## Prevention potential $\approx$ 40% 12 modifiable risk factors

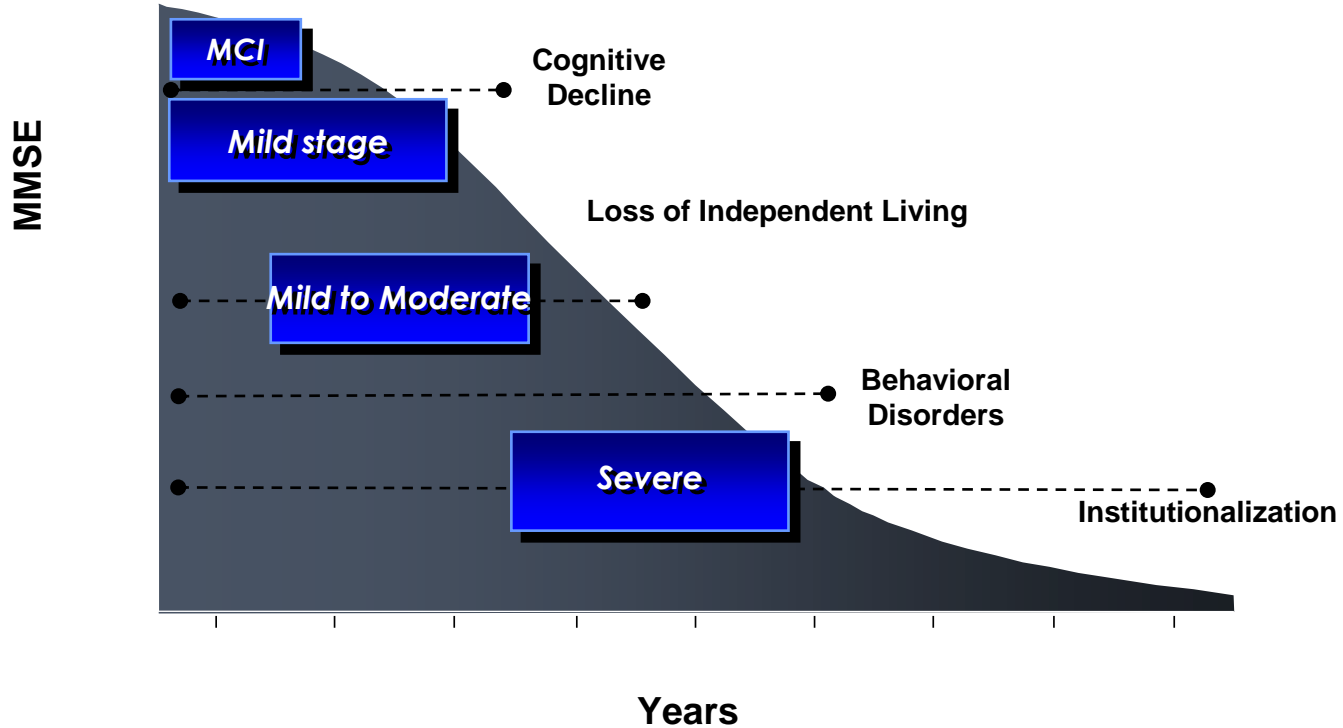
1. Diabetes
2. Hypertension
3. Obesity
4. Lack of physical exercise
5. Depression
6. Smoking
7. Low education
8. Hearing loss
9. Traumatic brain injury
10. Alcohol consumption
11. Social isolation
12. Air pollution

## Modifiable risk factors

Nutrition  
Education  
Physical exercise  
Cognitive training  
Social activity

*Livingston et al., Lancet*  
2020


# AD progress



# REVERSIBLE DEMENTIAS



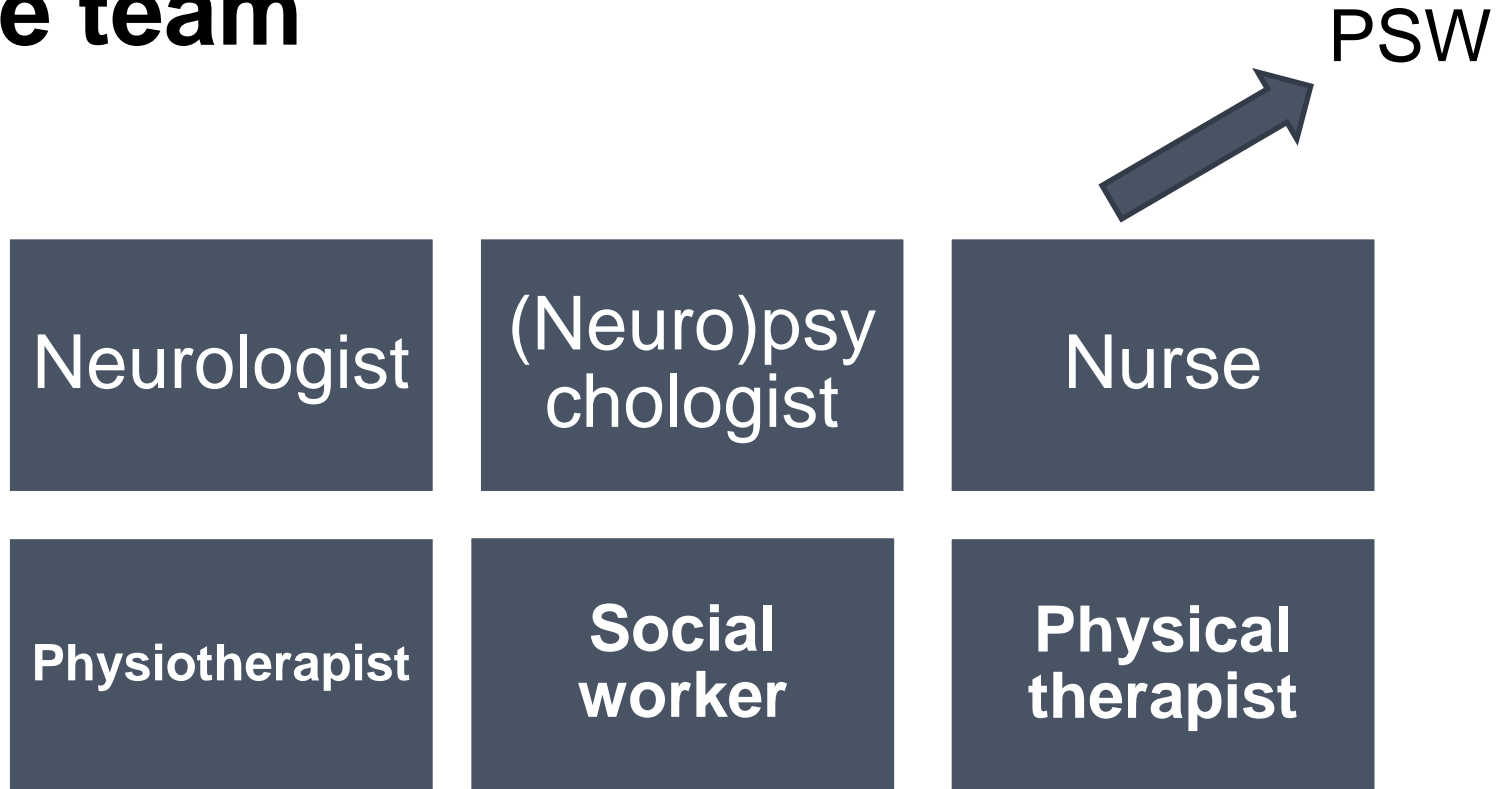
- D Drugs, Delirium
- E Emotions and Endocrine Disorders
- M Metabolic Disturbances
- E Eye and Ear Impairments
- N Nutritional Disorders
- T Tumors, Toxicity, Trauma to Head
- I Infectious Disorders
- A Alcohol, Arteriosclerosis



**Early diagnosis  
prerequisites:**

**Cooperation between  
patient  
caregiver  
whole family  
GPs  
neurologists/psychiatrists  
psychologists/neuropsychologists  
social services**

# Care team





## Benefits from early diagnosis

- Care planning
- Nonpharmacological interventions
- Life changes (nutrition, physical exercise)
- Quality of life modifications
- Social support
- Institutionalization delay
- Reduction in dementia /care costs



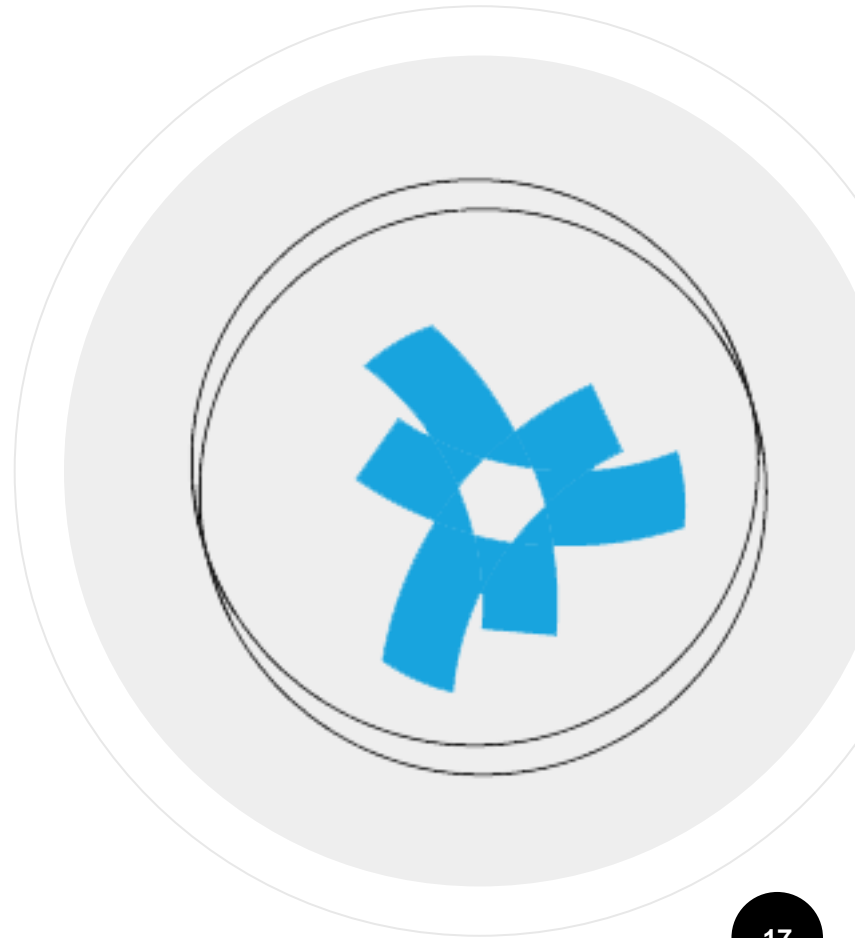




# The economist

## 27.08.2020

No country has found a sustainable way to finance dementia care





## Holistic treatment in dementia care

**Biological-Genetic domains (risk factors' control, medication, prescription)**

**Cognitive (cognitive training) and mood (psychotherapeutic techniques)**

**Social domain (dementia awareness, education, caregivers' support) – Dementia Friendly communities- The role of PSW**



# Who are the informal caregivers?

*An informal carer is a person who - usually - provides unpaid care to people with chronic illness, disability or other long-term health or care needs, outside of a professional or formal setting.*

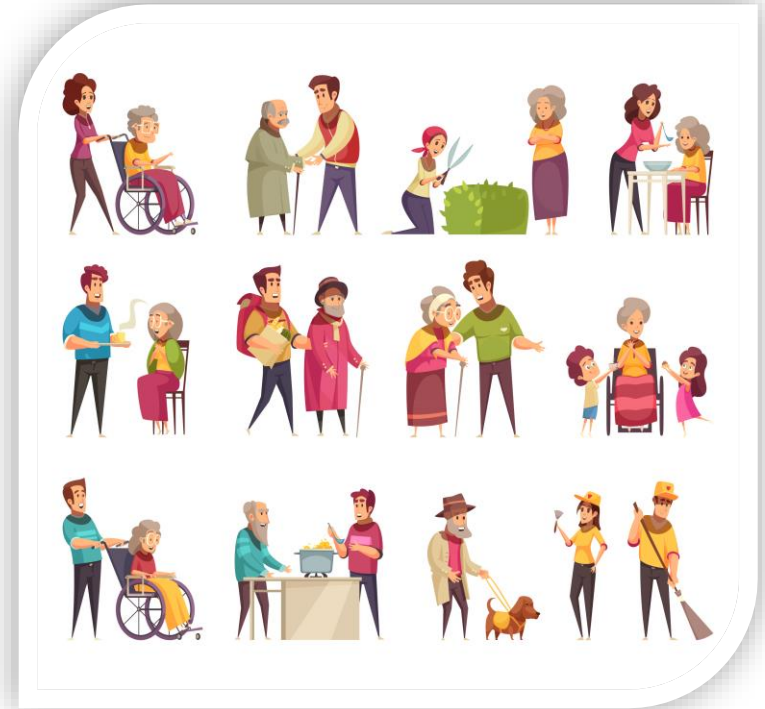
(Definition from Eurocarers)

The carer is a special figure who often stays discreetly in the shadow, who is organized to meet the care needs of loved ones, who are no longer autonomous and who experience a very significant emotional and psychosomatic burden that inevitably affects all dimensions of life.

# Who are the informal caregivers?

Family caregivers are an invisible resource, a silent army consisting of children, husbands, wives, parents or just friends who, free of charge and outside the professional sphere, care and help the elderly and disabled people who cannot live independently.

Informal carers in Europe provide more than 80% of all care and are twice as many as professional carers. The economic value of the informal unpaid caregiver ranges from 50% to 90% of the total cost of care provided by professionals.



It's my duty. I just have to do it.

It's my choice.

Taking care of your loved one is a life experience, it brings me great satisfaction.

Taking care of someone I love makes me proud.

I need a break:  
I'm exhausted.

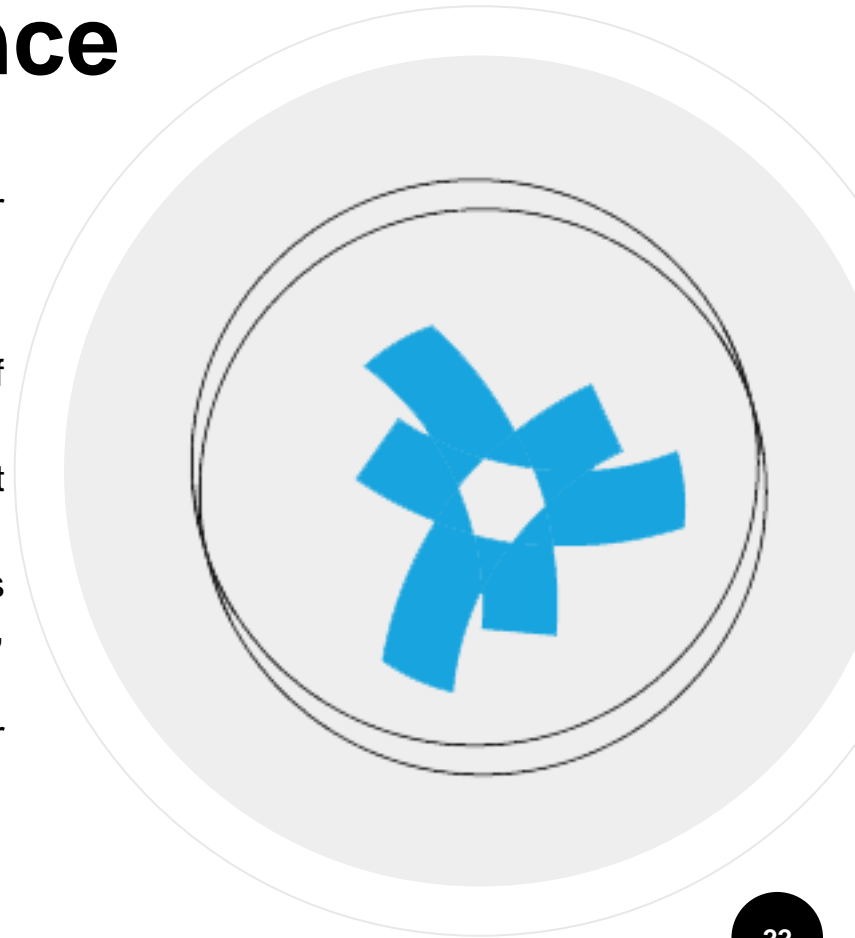
A heavy burden I'd rather share.

I do not have an other choice. It is not right!!!

# The value of experience

Experiential knowledge is the fundamental value of peer support practices such as:

- ❑ fruit of the experience of discomfort and its awareness.
- ❑ favors the personal, social and cultural development of those who know it.
- ❑ is the main tool for providing comparison and support to those living in a state of psychological distress.
- ❑ it is accompanied by other founding values such as empathy, listening, responsibility, competence, reliability.
- ❑ Improve communication skills with professionals, other family members and institutions.





## **// Objectives\_Module 2:**

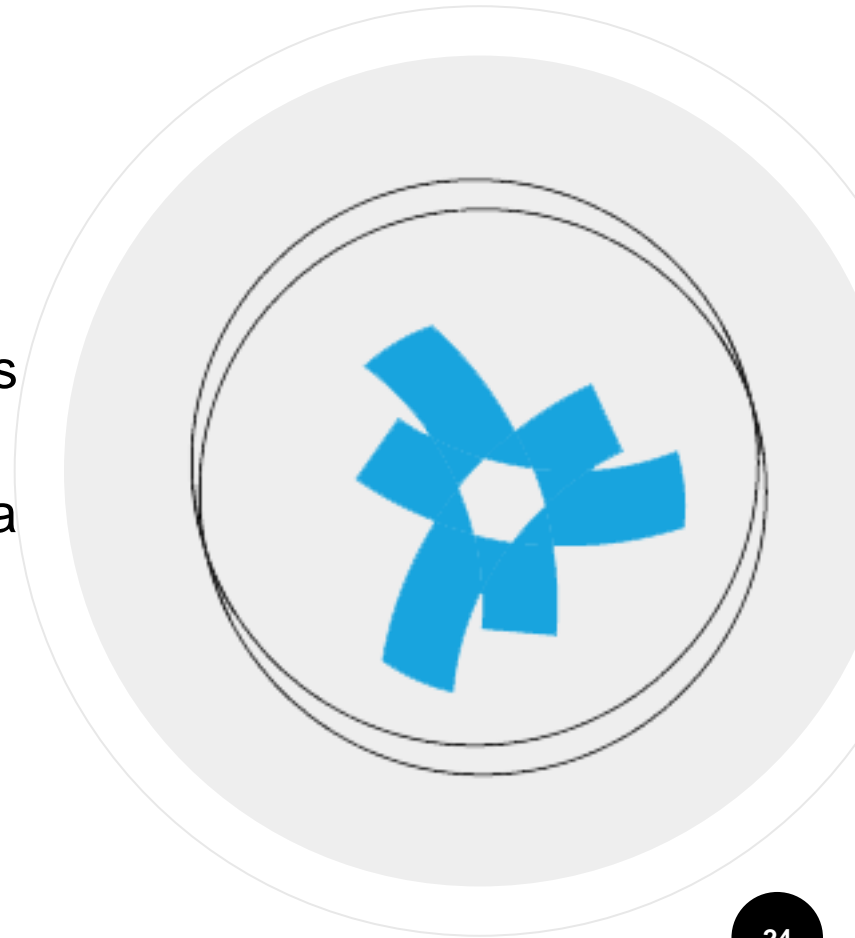
- **Dementia Friends program**
- **Enroll in the Dementia Friends program**

# Learning material

Introduction in Dementia Friends program

5 key messages about Dementia Friends program

Activities concerning Dementia Friends

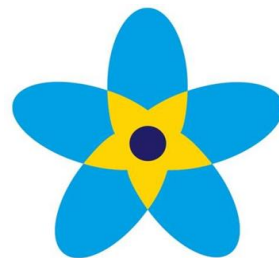




# What is the first word that comes to mind when you hear the word "dementia"?

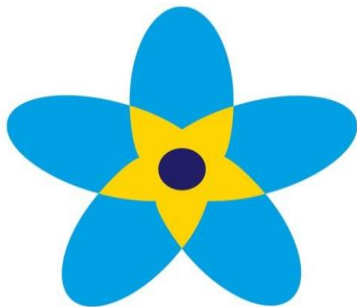
**Are these words overwhelmingly positive or negative? :**

- 1. The way society treats dementia**
- 2. It is important to change these perceptions**
- 3. Dealing with fear / stigma of dementia**
- 4. Become Dementia Friends**



**Dementia  
Friends  
Greece**

A Panhellenic Federation of Alzheimer's  
Disease and Related Disorders Initiative



# Dementia Friends Greece

A Panhellenic Federation of Alzheimer's  
Disease and Related Disorders Initiative

Social action

Local  
Alzheimer  
association  
agencies

Increasing  
Dementia  
awareness

Support PwD  
in their local  
community

Creating  
Dementia  
friendly  
communities

Become a  
Dementia  
Friend

Dementia  
friendly actions



1	Dementia is not
2	Dementia is caused by
3	A common type of dementia is
4	Dementia is progressive means that
5	Alzheimer's disease early symptom is
6	Dementia is not only
7	Dementia can also affect
8	People living with dementia can
9	Someone in the world progress to Dementia
10	It is possible
11	Each person is
12	Dementia Friends program aim to

12	convert understanding to action
1	part of normal ageing
8	still communicate effectively
4	the symptoms are gradually deteriorated
7	humans' perception
11	beyond dementia diagnosis
9	every three seconds
10	for someone who lives with dementia to live well
2	Diseases of the brain
3	Alzheimer's Disease
5	working memory decline
6	about losing your memory

# Five key messages

**1 Dementia is not part of normal ageing**

**2. Dementia is caused by diseases of the brain**

**3. Dementia is not just a lack of memory**

**4. It is possible to live well with dementia**

**5. The individual is more than the diagnosis of dementia**



**If we live many years will we  
all get dementia?**

**From what age is it "normal"  
to forget?**

**Do all seniors forget?**



62% of health professionals still believe that dementia is part of normal aging



2 in 3 people believe that dementia is caused by normal aging

ADI 2019 global survey  
[www.alz.co.uk/worldreport2019](http://www.alz.co.uk/worldreport2019)

Alzheimer's Disease  
International  
The global voice on dementia

**1<sup>ST</sup> key message:**  
**Dementia is not part of normal ageing**

## *Dementia*

Description of symptoms of a large group of diseases

They cause a gradual decline in a person's general mental function

It affects the daily functionality of the individual

**2<sup>ND</sup>  
KEY MESSAGE:**  
*Dementia is not  
only about losing  
your memory*

They vary from day to day

**2nd key message:**



**Dementia is not only about losing your memory:**

- **Memory**
- **Concentration / planning / decision making / problem solving**
- **Language**
- **Orientation/ visuospatial skills**
- **Mood/ Behavior**





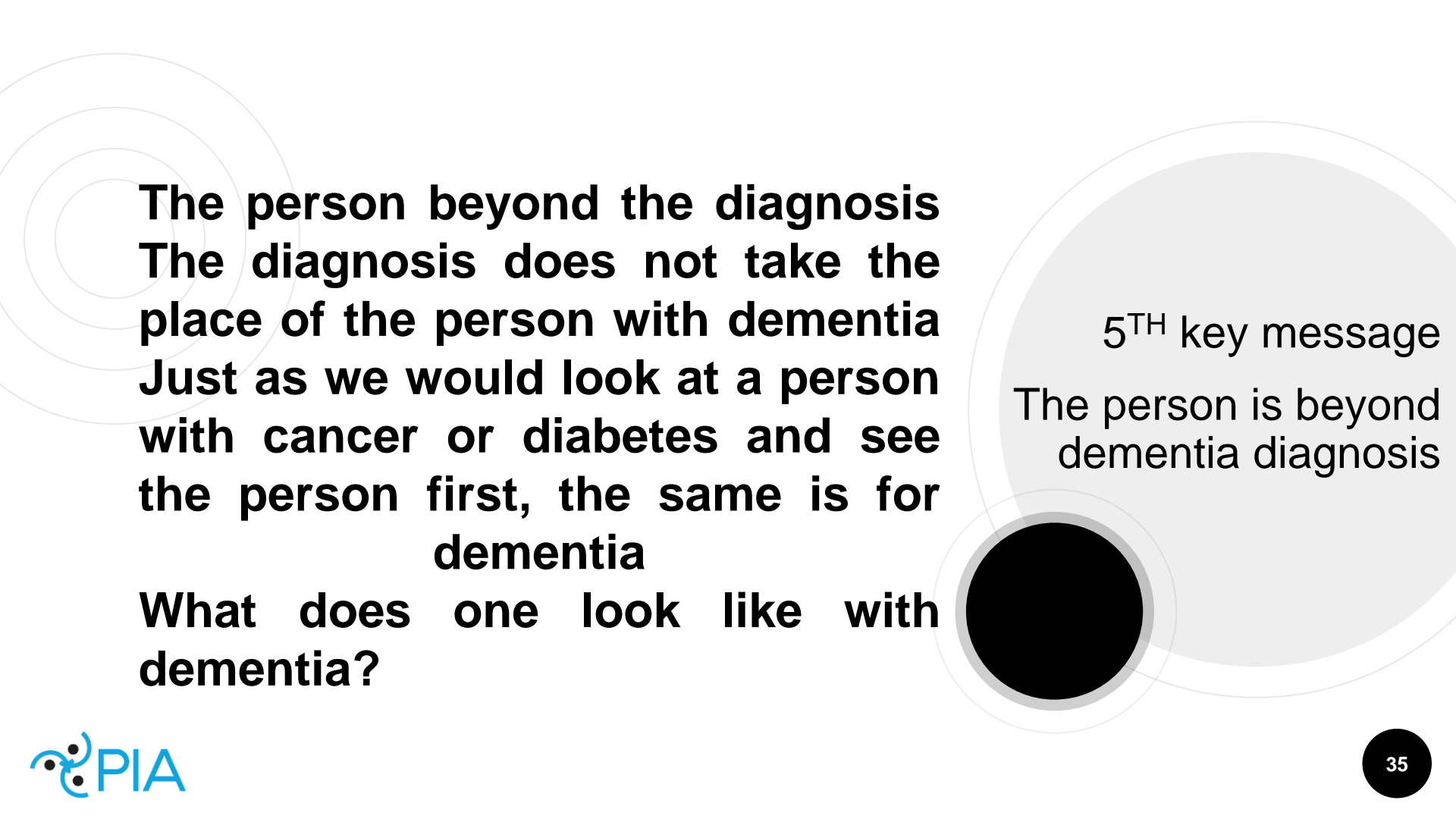
**3<sup>RD</sup> KEY MESSAGE:  
DEMENTIA IS  
CAUSED BY BRAIN  
DISEASES**

Alzheimer's disease  
Lewy body spectrum  
Vascular  
Fronto-temporal  
Korsakoff's psychosis  
Down Syndrome  
Huntington's  
Creutzfeldt-Jakob's  
Progressive supra-nuclear  
Palsy  
AIDS

4<sup>TH</sup> key message:  
It's possible to live  
well with dementia



**Ability for work / social contacts**  
**It depends on the circumstances of the individual's condition**  
**Living well means different things to different people**  
**Dementia brings challenges Despite all the challenges**



**The person beyond the diagnosis  
The diagnosis does not take the  
place of the person with dementia  
Just as we would look at a person  
with cancer or diabetes and see  
the person first, the same is for  
dementia**

**What does one look like with  
dementia?**

5<sup>TH</sup> key message

The person is beyond  
dementia diagnosis



**Principles of creating environments that are friendly to dementia**

**Use strategies to compensate for disability**

**Maximize independence, strengthen personal identity and self-esteem**

**Take care of caregivers / caregivers as well**

**Be problem-oriented and understanding**

**Welcome caregivers to the local community**



## **// Objectives\_Module 3:**

- **The role of PSW in dementia care**

# Learning material

- Peer Support Workers' characteristics
- Roles
- Characteristics
- Why become a PSW
- Countries specific issues

**Is someone who provides support**, both social as well as emotional, to People living with dementia (PwD). However, PSW can also be involved in various health care settings.

This kind of support is **delivered through various ways** e.g direct communication and immediate care provision, participating in home care needs, providing practical assistance in various dementia services, and/or organizing various dementia awareness activities, and social events, such as Alzheimer cafes etc

The PSW aims to promote and increase a sense of optimism, solidarity, hope and mutuality with the PwD.

## Who is a Peer Support Worker (PSW)?

# ACCORDING TO NATIONAL HEALTH SYSTEM IN UK:



They can use their own lived experience to connect with people and help them by giving them a sense of hope and wellbeing



They can support people to gain a sense of control over their lives



They can help people engage with, build connections, and feel a sense of belonging to their local communities



They can enable people to gain satisfaction in different parts of their lives.

- A Peer Support Worker (PSW) is someone who has previously passed the dementia caregiving journey, and wants to share his/her personal experience through his/her role as a carer.
- The main purpose of a PSW is to share his/her lived experience, inspire, give hope, encourage, and provide information to other caregivers, as well as support them to find their own way to recovery.

Information provided by the NHS



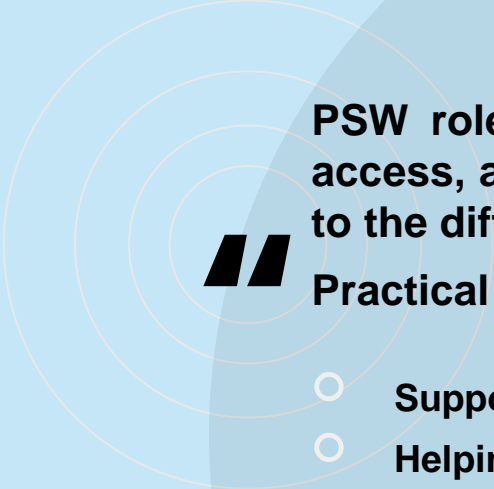
# PSW in dementia care

Peer support is well established in areas such as the disability and mental health movement and is increasingly recognized as one way of providing support to and from people diagnosed with dementia and their carers.

Peer support had a positive emotional and social impact, rooted in identification with others, sharing of experiences and reciprocity of support. There was also a contrast between the quality of peer support and that of professionals, with advice from the former group being more effective than the latter.

This highlights the importance of lived experience and the promotion of a strengths-based approach to interpersonal support that empowers and challenges an incomplete approach to understanding dementia.





**PSW role: support the dementia services, health access, and availability in care settings (according to the different type of services),**

**Practical examples:**

- **Supporting people in care facilities**
- **Helping people participating in various activities**
- **Support local care settings**
- **Engage in recovery plan with the guidance of experts**
- **Help health professionals accomplish the care plan (e.g provide valuable feedback with the direct contact with the PwD)**
- **Participate in social activities and organize awareness activities**

## Areas of activity:

1. Formal and informal settings (NGOs, voluntary organizations, dementia cafes, day care centers, outpatient clinics etc)

## Member of care team:

1. Collaboration with doctors, nurses, psychologists, social workers, family members, other members of health services

## Prerequisites

1. Relevant experience with the care setting in which they will be employed
2. Receiving specific training
3. Communication –Social skills with health professionals and PwD

# Financial status

1. Voluntarily or paid work



# Caregivers skills

Through caring experience, carers acquire a range of knowledge, skills and abilities.

These include:

Health-related skills (medication administration, health procedures, symptom management, non-pharmacological approaches, health course ...)

Communication skills (with health and social professionals, with the person they care for, with other family members...)

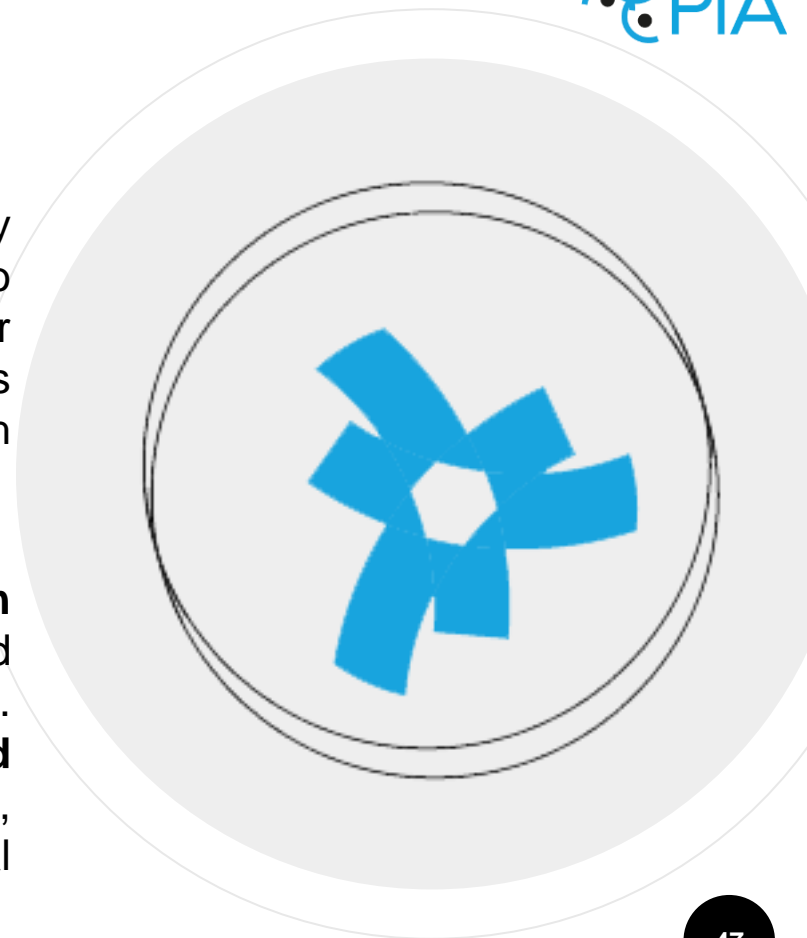
Transversal skills (organization, coordination, time management ....)

# Why become a PSW in Dementia Services

- Can **share** your own lived experiences of recovery from dementia challenges, **inspire hope** to caregivers and people living with dementia, give your **feedback to health professionals** well as **supporting service users** in finding their own path in living well with dementia.

- PSW can share feelings of **empathy, compassion and compassion** with dementia stakeholders and help them understand **they are not alone**. Additionally, they can **empower caregivers and PwD**, and help them feel less isolated and rejected, provide **opportunities for socialization** and social inclusion.

- Create **trusting relationship**



# Why become a PSW in Dementia Services

- **Facilitating discharge** from inpatient wards

Supporting PwD and caregivers in their homes, **providing practical support** (eg home visits, help them in outdoor activities, pending issues with various services etc.)

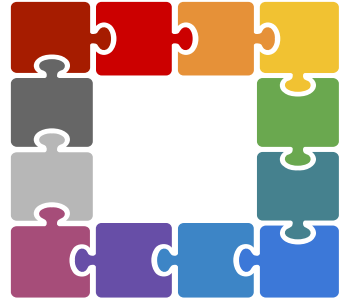
Providing **their own experience** to help stakeholders set priorities, planning process, problem solving, manage daily challenges, find new strategies to cope with significant issues, providing practical solutions to various dementia issues



# Why become a PSW in Dementia Services

## Personal benefits

- self-confidence/ self esteem
- positive reflection of their own experience
- altruism provision
- social skills/ communication
- sense of feelings of being valued
- sense of personal activation/ empowerment
- fight against stigma
- positive feelings (empathy, compassion, etc)
- feelings of being included in a team
- feelings of finding a life purpose



**Which of these could be useful  
as a peer support?**

# Benefits of peer support

## **BENEFITS FOR PEOPLE USING IT**

- Greater sense of control
- Reducing the feeling of isolation
- Greater ability to see and analyze his situation
- Empowerment
- Inspiration
- hope

## **BENEFITS FOR PSW**

- Personal development
- More confidence in your own abilities
- Greater sense of self-efficacy
- Better self-esteem
- Empowerment satisfaction

## **BENEFITS TO THE SERVICE SYSTEM AND SOCIETY**

- Greater and better access to services
- More awareness for users of the offer in the area
- Dissemination of good practices
- Greater sense of community and sense of belonging

# The Healthbridge study

In 2013, the Healthbridge study was conducted in England, which evaluated the inclusion of peer support for carers in dementia support services.

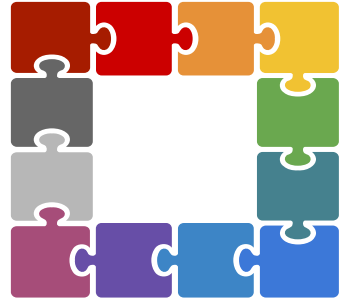
The results of the study showed that:

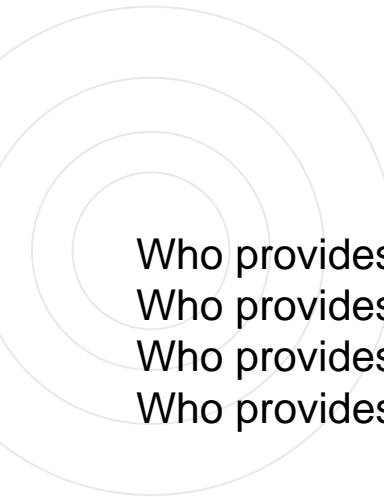
Carers' awareness that there are also other people in a similar position increases, which could lead to friendship, a sense of belonging and social acceptance

Their sense of loneliness, isolation, loss and struggle has diminished

Participants learned new coping strategies by sharing information and advice

Peer-to-peer sharing of information, advice and coping strategies was important, as was being in an environment where dementia could be discussed without stigma, creating this 'space to create collaborative meanings about dementia away from imposing medical definitions of it' disease. characterized by an emphasis on deficit" (Ward et al, 2011).





Who provides diagnosis  
Who provides educational training  
Who provides care services  
Who provides medical advice/counseling/therapy



**PSW in not  
someone**

# Care certificate

It could include a title for example **Dementia Challenge**

Do you have any ideas about how a Care Certificate for PSW would look like?



ending points  
comments  
questions  
sum up





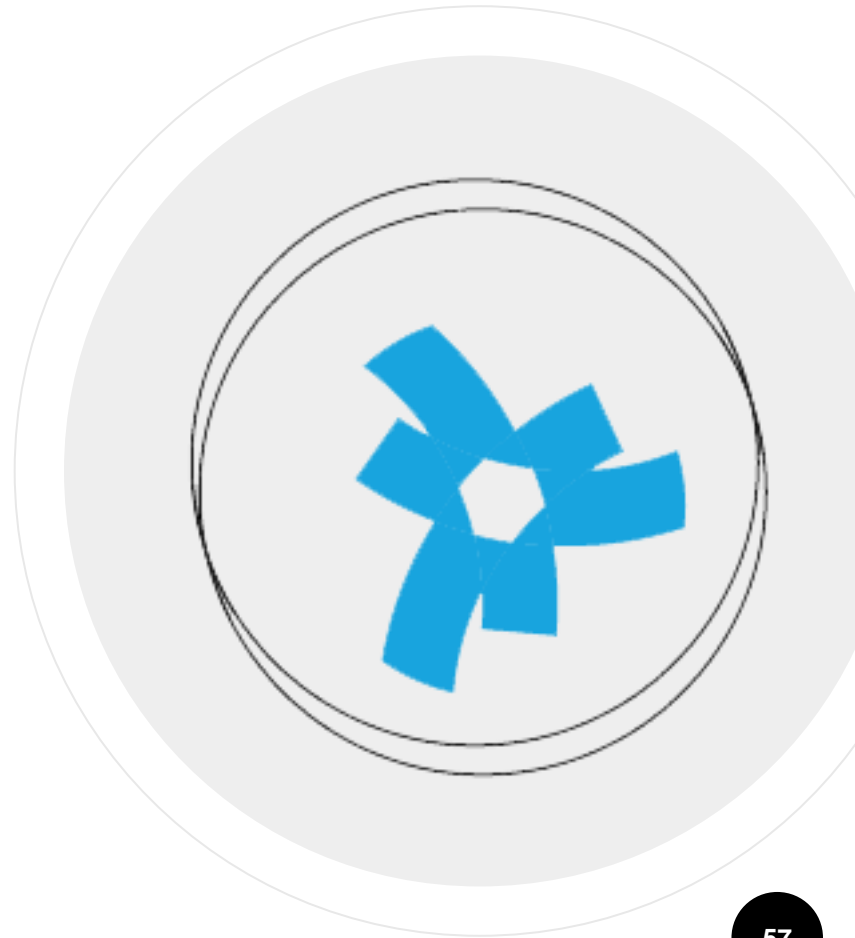
## **// Objectives\_Module 4:**

- **Dementia Services in Greece**
- **Significant issues for people living with dementia e.g. legal pending issues, human rights, and practical activities (reflective techniques, active listening, role playing)**



# Learning material

- Dementia Services in Greece
- What dementia friendly communities mean
- Significant issues (human rights, economic issues, communication techniques, exercises)



# National dementia strategies



What is happening in Greece?





Could you provide any examples of these needs according to your experience?

## Current needs

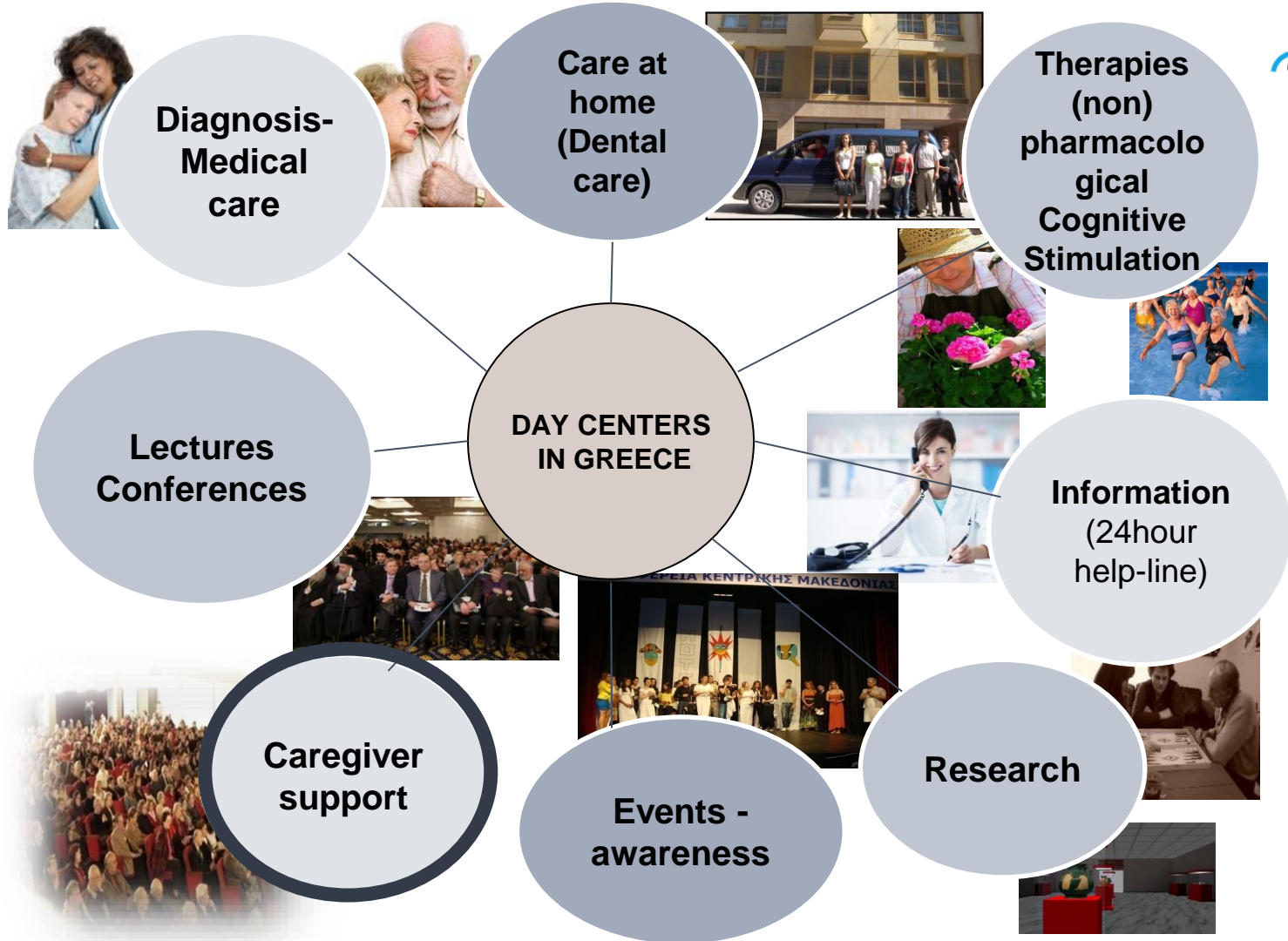
- Early detection
- Dementia awareness
- Equal access to diagnosis and treatment
- Respect to the human rights of PwD (legislative framework development)
- Involving PwD and carers in developing and/or improving dementia care services



- Memory Clinics in the Psychiatric or Neurological Departments of General Hospitals throughout Greek cities
- Psychogeriatric clinics (in Clinics for chronic diseases)
- Private practice
- Alzheimer's Associations (non governmental organizations)
- Dementia Day Care Centers in big cities in collaboration with Municipalities
- Home care services in the Municipality
- Geriatric hospitals in private practice
- Hospices for dementia care

## **Dementia services in Greece**





# National campaigning activities I

The Annual Carer Day (16/3)

Which kind of activities you would use for the awareness carers campaign?



The poster features a black and white close-up of a person's eyes, partially obscured by vertical teal and black bars. The text is in white and teal on a black background.

**ΗΜΕΡΑ  
ΦΡΟΝΤΙΣΤΗ 2019**  
ατόμων με άνοια ή Αλτσχάιμερ

**ΦΡΟΝΤΙΔΑ  
ΔΕΝ ΕΙΝΑΙ  
ΝΑ ΓΙΝΕΣΑΙ  
ΚΟΜΜΑΤΙΑ**

Έλα να μιλήσεις με τους ειδικούς

**16/03**

18:00  
18:00

Μητροπολιτικό  
Κολλέγιο

Ακαδημίας 42

ΕΙΣΟΔΟΣ ΕΛΕΥΘΕΡΗ

Εταιρεία Alzheimer Αθηνών

Απορίττην η έλλοση συμμετοχής  
210 7013271

## National Campaign Activities II

- Theater performance 'Caregiver's voice'
- Music Evenings
- Alzheimer café
- Art exhibitions
- TV and Radio programs every week
- Lectures in elementary/secondary schools
  
- **Which is the PSW contribution in the aforementioned activities?**





Exercise

which are the CARE  
AVAILABILITY services  
according to your  
experience

what kind of support would  
a PSW provide?

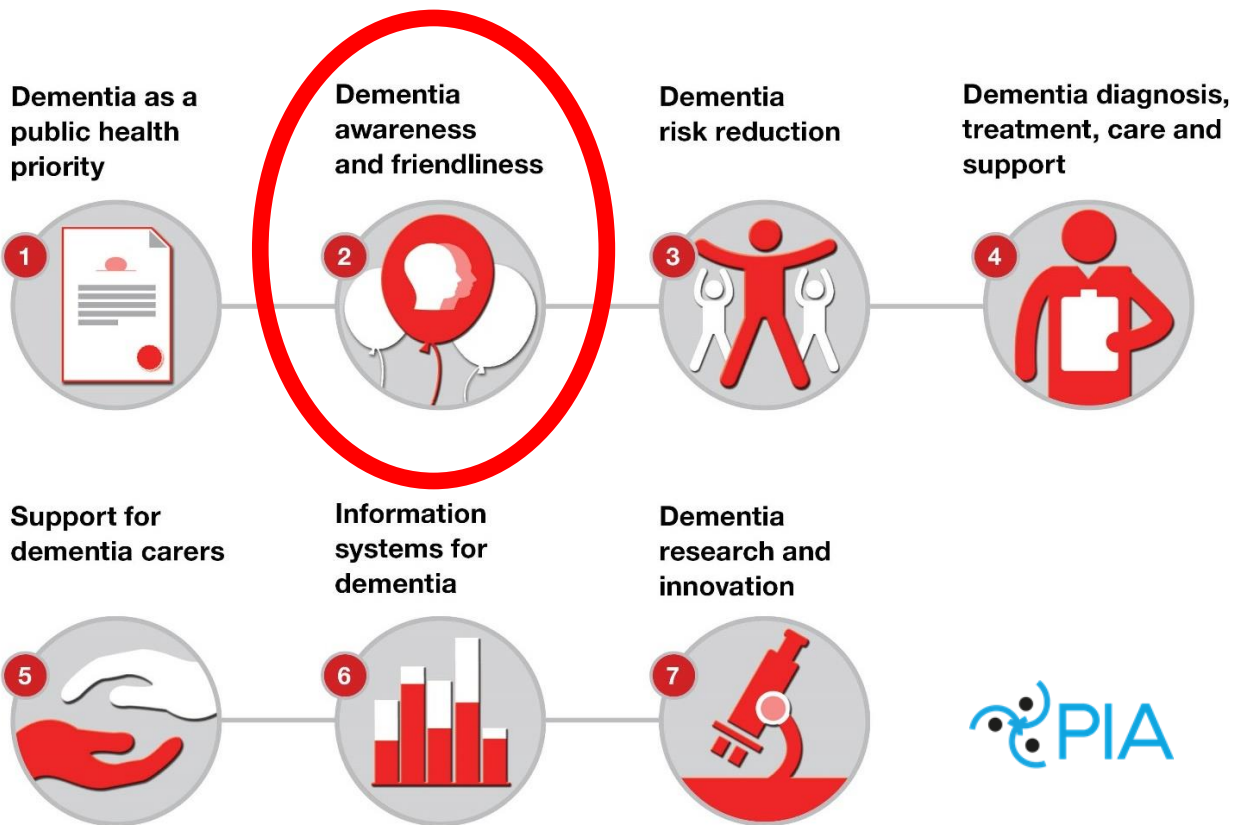
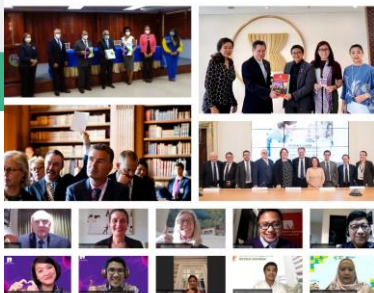
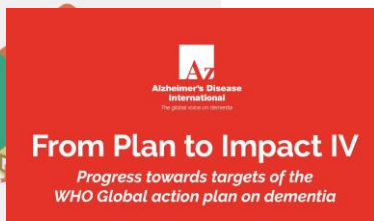
	SUFFICIENT	INSUFFICIENT	ABSENT
Care coordination/Case management			
Home Help			
Meals on Wheels			
Incontinence help			
Assistive technologies/ ICT solutions			
Tele Alarm			
Adaptations to the home			
Homecare (Personal hygiene medication)			
Counselling			
Support groups for people with dementia			
Support groups for carers			
Respite care at home (sitting service etc.)			
Holidays for carers			
Carer training			
Alzheimer Cafés			
Day care			
Residential/Nursing home care			
Palliative care			



# WHO's Global action plan on dementia



Towards a dementia plan:  
a WHO guide






-A community is the place where the life of each of us exists.

-Being friendly to dementia means you are also friendly to the older adults (irrespective of their mental status)

-Being dementia friendly means that dementia is not only treated by means of mental, medical, psychological and social care.

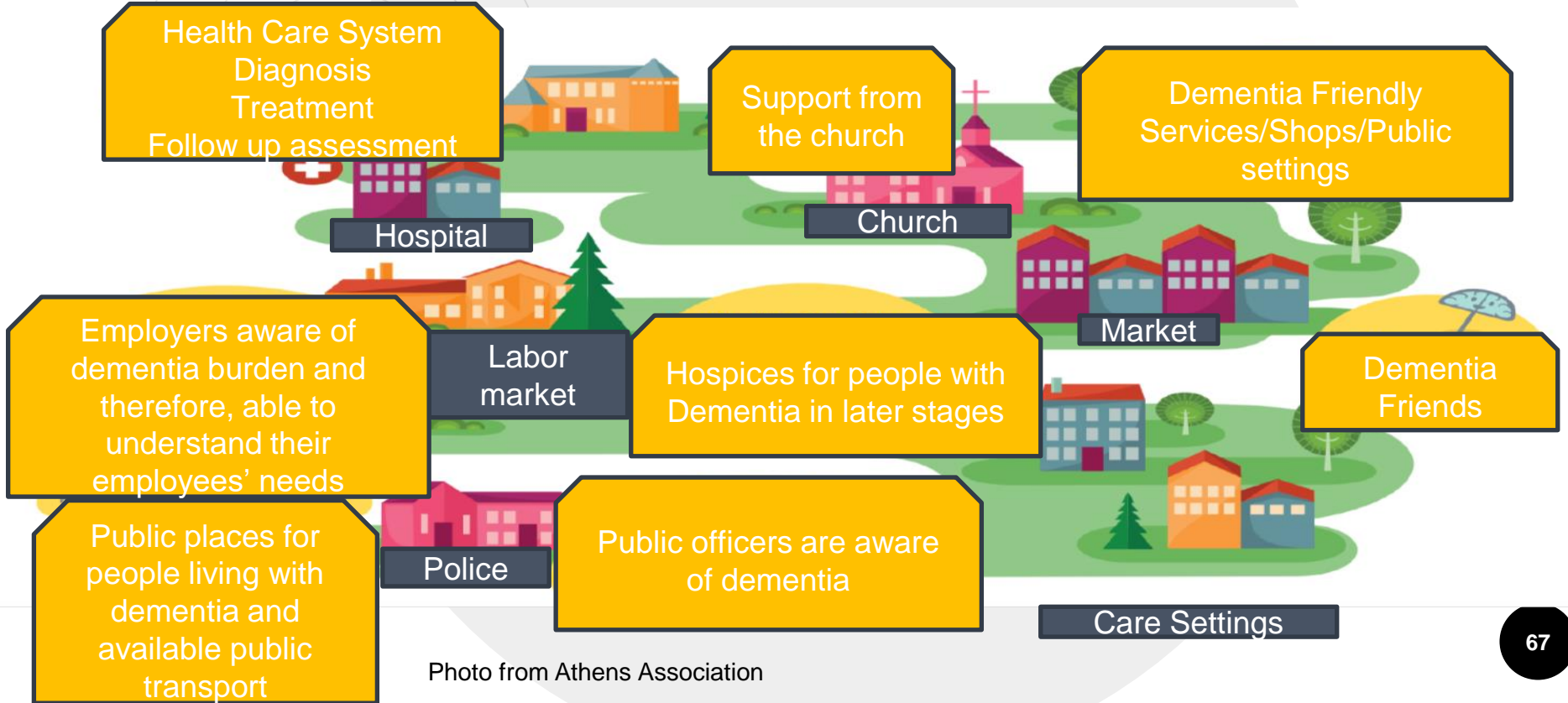
-Being dementia friendly means that the treatment is not limited only by medical interventions, but it also involves everyone's autonomy, as well as the continuation of daily life and individual rights




**We build together  
dementia friendly  
communities**



# The role of PSW in the community





Legal rights  
Economic issues  
Communication techniques  
Exercises for PSW



**Specific  
issues in  
dementia  
care**

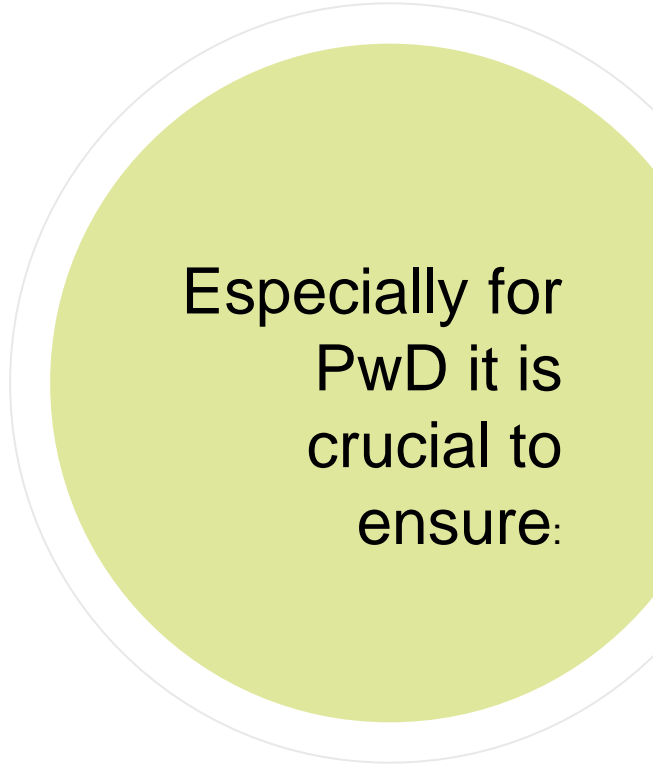
## **Legal issues in dementia:**



- **Sense of personal freedom**
- **Sense of personal safety**
- **Physical integrity**
- **Personal right to free mobility**
- **The right to private and family life**
- **The right to medical care**
- **Personality and character, habits, interests**
- **needs privacy, activities and socialization**
- **has not given us the right to interfere in his life**



- Dementia services at a local level
- Insurance coverage
- Actions for dementia (however they are not assumed as state's legislation)



**Especially for  
PwD it is  
crucial to  
ensure:**

# economic issues in dementia

## Immediate



- Medical costs/ follow up
- Hospitalization
- Daily care

## Indirect

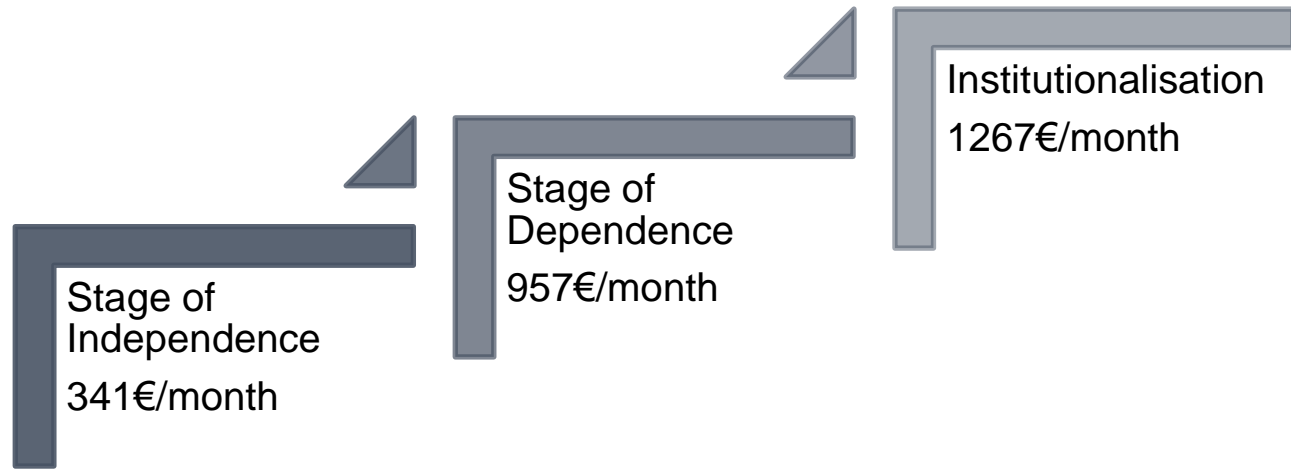


- Consequences due to PwD progressive frailty
- Caregivers' support and extra needs
- Inability to work (PwD as well as his/her caregivers)/ time off work

According to the Greek National Strategic plan for dementia

«The annual cost of caring for people with Alzheimer's disease in the US is comparable to the annual cost of war in Iraq»

# Annual dementia costs: 4092-15204€



Kaitelidou et al. (2013) (publication in Greek «Κοινωνικοοικονομικές επιπτώσεις της νόσου Alzheimer στην Ελλάδα: Πιλοτική μελέτη. Νοσηλεία και έρευνα. Απρ.2013»)

Kyriopoulos et al. (2005) (publication in Greek «Το κόστος της Άνοιας Τύπου Alzheimer στην Ελλάδα. Άνοια: Ιατρική και Κοινωνική πρόκληση. Τσολάκη Μ, Καζης Α (επιμ.) University studio press. Θεσσαλονίκη 2005»)





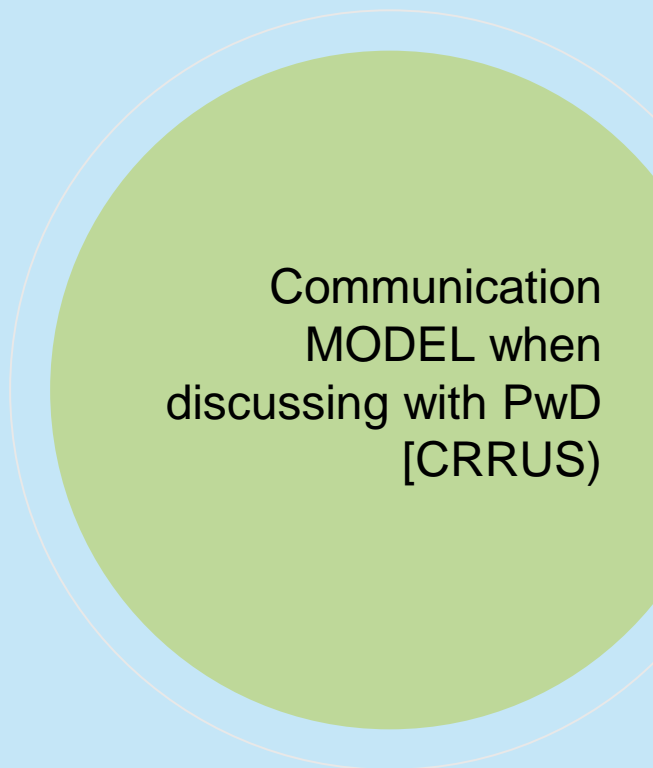
Confidence

Recognize feelings/needs

Respectful attitude for PwD

Understanding

Support emphatically by showing interest and compassion



Communication  
MODEL when  
discussing with PwD  
[CRRUS)

Try not to be offensive by saying difficult/complicated words

Give enough time for PwD in order to respond, Don't hurry.

Discuss about PwD feelings and not trying to say who is right

Be focused and present

Notice your body language. Follow with faces, action and body position

Try to find the time of the day where the person will be more able to communicate. Understand the causes of their behavior and needs

See things in different ways and be open for creativity

## Follow the CRRUS model



# Follow the CRRUS model

Speak clearly by using short and simple sentences

Avoid complicated questions

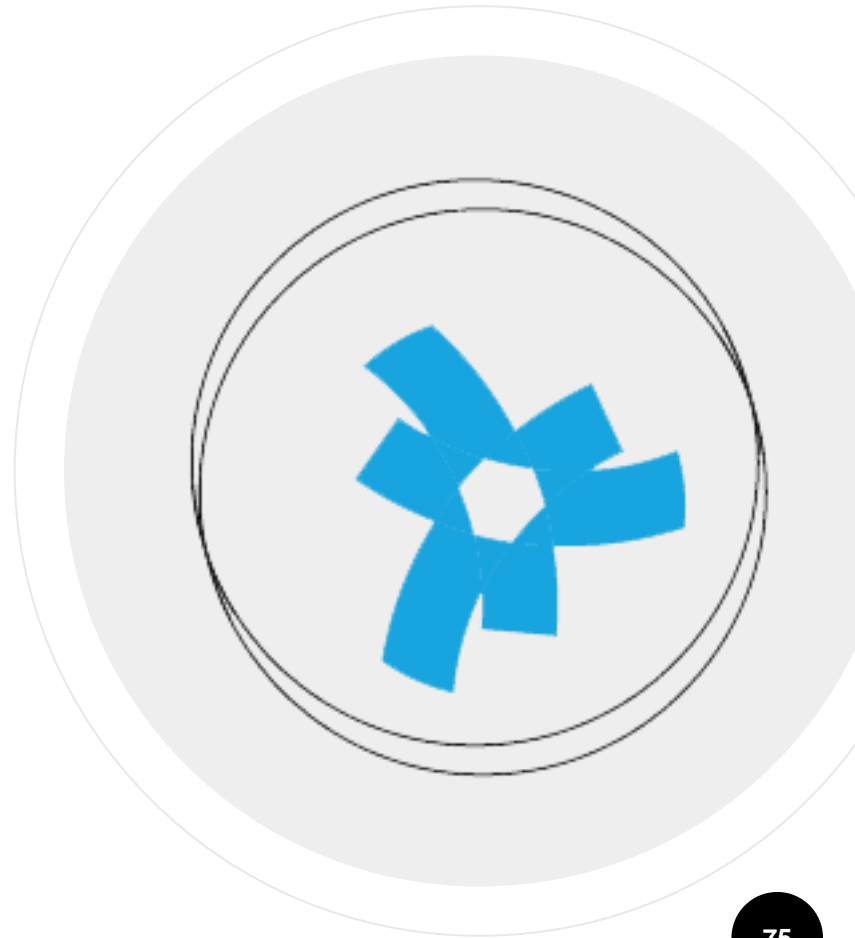
Stick to just one idea at the time, many options can be confusing

Use non-threatening words

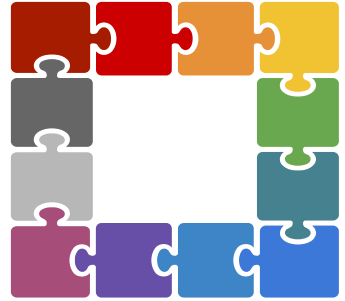
Warm and safe tone

Assessment of the emotional state. Respect personal space. Accept particularity

Approach the person's with dementia "personal perspective"



## Carl ROGER's three basic human steps for communication in daily life



Attention

Acceptance

Empathy

(Rogers, 1967)



**Can you describe a personal experience  
In which you were in line with Roger's humanistic approach?**

## Exercise 1

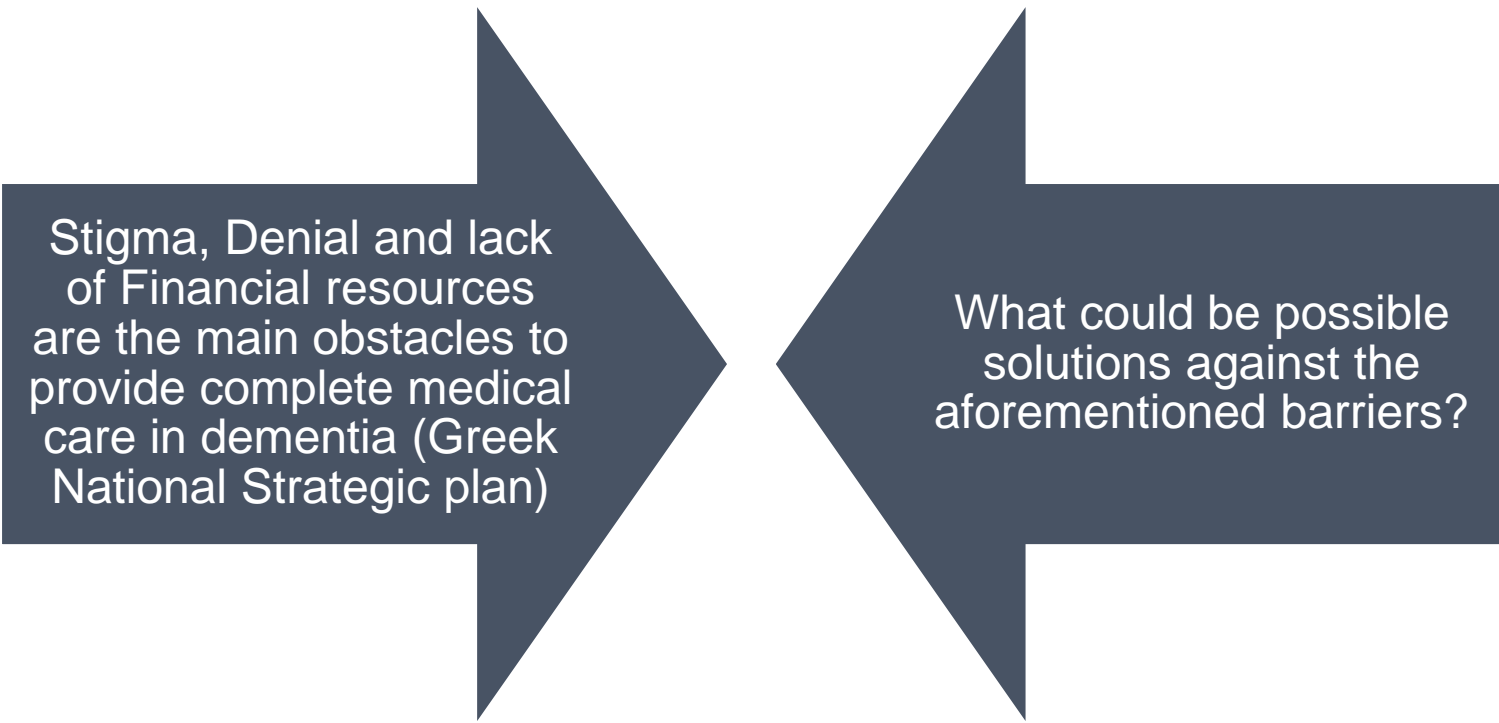


# Self Care

What type of self-care strategies are you using as a Peer Support Worker to maintain your wellbeing while helping others?

#peersupportcanada

## Exercise 2



Stigma, Denial and lack of Financial resources are the main obstacles to provide complete medical care in dementia (Greek National Strategic plan)

What could be possible solutions against the aforementioned barriers?



## Exercise 3

Discuss the role of PSWs in the community and provide examples on how a PSW can help PwD in daily life

Health Care System  
Diagnosis  
Treatment  
Follow up assessment

Hospital

Support from  
the church

Church

Dementia Friendly  
Services/Shops/Public  
settings

Market

Employers aware of  
dementia burden and  
therefore, able to  
understand their  
employees' needs

Labor  
market

Hospices for people with  
Dementia in later stages

Dementia  
Friends

Public places for  
people living with  
dementia and  
available public  
transport

Police

Public officers are aware  
of dementia

Care Settings

# Writing Exercises 4-5-6



Reflect your strongest emotions through the caregiving journey

What would you advice yourself at the beginning of the caregiving journey?

Provide a title/picture/moto/logo which described better you experience



# Exercise 7:

A volunteer of the PSW group narrates a difficult situation when he/she was caregiver, and the other members of the group create a theater performance based on this experience, in order to help him/her evaluate this experience from another point of view

## **“Theatre of the Oppressed” an interactive technique in the context of dementia care**

M. Tsatali<sup>1,2</sup>, M. Toubalidou<sup>1</sup>, M. Egkiazarova<sup>1</sup> & M. Tsolaki<sup>1,3</sup>

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<sup>2</sup>Department of Psychology, the University of Sheffield, UK

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26<sup>th</sup> Alzheimer Europe Conference  
Excellence in dementia research  
and care

Copenhagen, Denmark  
31 October – 2 November 2016

[www.alzheimer-europe.org/ea26congress](http://www.alzheimer-europe.org/ea26congress)



## Exercise 8

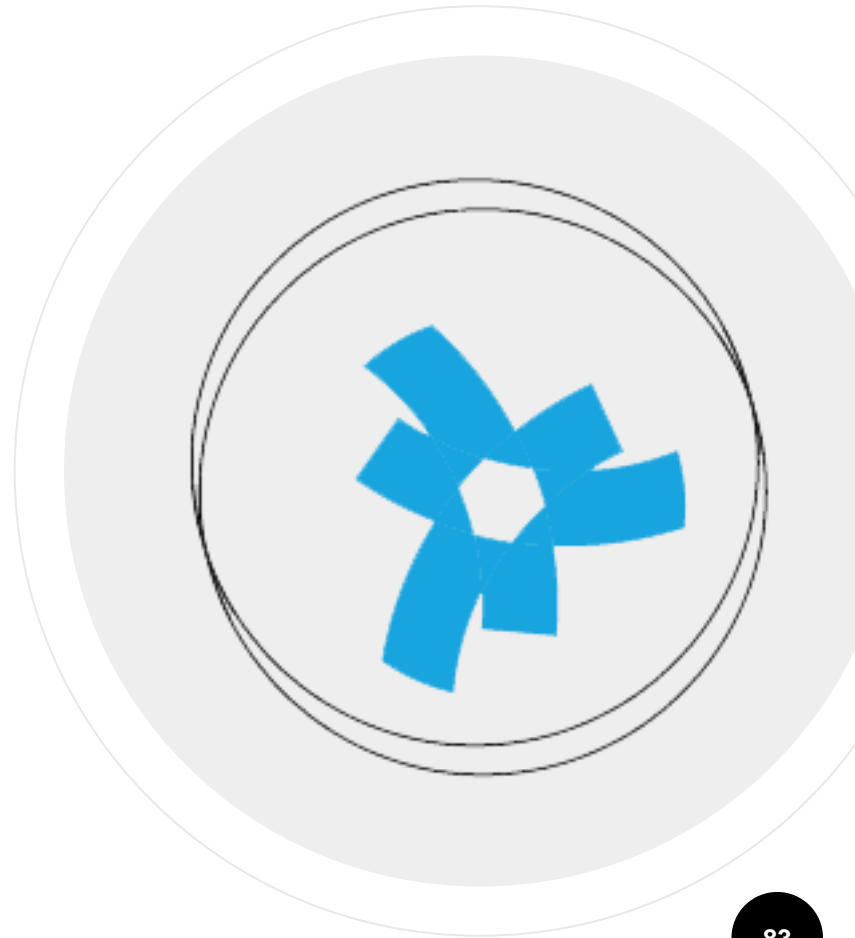
What are the positive aspects of care according to your experience?

(Tsatali et al. (2022). Greek adaptation of the positive aspects of caregiving (PAC) scale in dementia caregivers. *Clinical Gerontologist*, 45(3), 538-547.





“A good listener helps us to listen to ourselves”. (Yahia Lababidi)





Thank you for your attention!

Questions?

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