Positive Aspects of Caregiving (PAC): Factor structure & Association with exemplary care

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Positive Side of Caregiving

“There are many faces to dementia” (Helga Rohra, yesterday)
“Caregiving is an activity of mixed valence for the caregivers (Lawton et al., 1991)

- Positive role appraisals that mediate between the stressor and caregiver well-being (Tarlow et al., 2004)
- Associated with
  - better self-rated health
  - less depressive symptoms
  - higher caregiving competence
  (Basu et al., 2013; Belle et al., 2006; Cheng et al., 2013; Tarlow et al., 2004)
Positive Side of Caregiving

Value of assessing positive side of caregiving

- **Culture** influences appraisals of burden, roles, resources (Aranda & Knight, 1997; Dilworth Anderson, Williams, & Gibson, 2002)
- Racial differences in PAC due to religiosity (Roff et al., 2004)

Questions:

1. Is the content of PAC the same across cultures?
2. How to measure PAC in Chinese caregivers?
Measurement Tool: Positive Aspects of Caregiving (PAC) (Tarlow et al., 2004)

- 11-item

1. Feel more useful (USEFUL)
2. Feel good about self (GOOD)
3. Feel needed (NEEDED)
4. Feel appreciated (APPRECIATED)
5. Feel important (IMPORTANT)
6. Feel strong and confident (STRONG)
7. Give more meaning to my life (MEANING)
8. Enable me to learn new skills (SKILLS)
9. Appreciate life more (APPRECIATE LIFE)
10. More positive toward life (POSITIVE LIFE)
11. Strengthened relationships (RELATIONSHIPS)
Validating PAC among Chinese dementia caregivers in Hong Kong

Translation and back-translation by bilingual RAs

Expert validation on face validity (research team and frontline social workers)

Piloting and collection of responses from frontline interventionists at pilot phase of individualized intervention study - REACH-HK (Oct 2011 to Feb 2012)

1. Exploratory factor analysis (EFA)
2. Test of reliability & concurrent validity
Sample characteristics

- REACH-HK Phase 1 baseline data (April 2012 - January 2014): \( N = 374 \), who completed all 11-items of PAC at baseline interview.

- GENDER: 76.7% female caregivers
- AGE: \( M = 62.9 \) (SD = 12.4; RANGE = 23 to 89)
- RELATIONSHIP: 50.8% spousal caregivers, 48.4% children caregivers
- EDUCATION: 41.9% primary or less; 38.6% high school or more
Responses on C-PAC items

Response scale: 0 (strongly disagree) to 4 (strongly agree)

Most endorsed items:
- Feel needed (M = 3.25)
- Feel important (M = 3.11)
- Feel useful (M = 2.76)

Least endorsed items:
- Feel appreciated (M = 2.29)
- More positive toward life (M = 2.28)
- Strengthened relationship (M = 1.95)
Exploratory factor analysis

- Principal Component Analysis with Promax rotation
- 2 components of eigenvalue over 1.00
  a) Enriching life (Item 7 to 11; min loading = .59)
  b) Affirming self (Item 1 to 6; min loading = .49)

<table>
<thead>
<tr>
<th>Items</th>
<th>Item-total correlation</th>
<th>Component loadings</th>
</tr>
</thead>
<tbody>
<tr>
<td>5 Feel important (IMPORTANT)</td>
<td>.61</td>
<td>.80</td>
</tr>
<tr>
<td>6 Feel strong and confident (STRONG)</td>
<td>.69</td>
<td>.49</td>
</tr>
<tr>
<td>7 Give more meaning to my life (MEANING)</td>
<td>.74</td>
<td>.59</td>
</tr>
<tr>
<td>8 Enable me to learn new skills (SKILLS)</td>
<td>.70</td>
<td>.60</td>
</tr>
<tr>
<td>9 Appreciate life more (APPRECIATE LIFE)</td>
<td>.70</td>
<td>.60</td>
</tr>
<tr>
<td>10 More positive toward life (POSITIVE LIFE)</td>
<td>.73</td>
<td>.60</td>
</tr>
<tr>
<td>11 Strengthened relationships (RELATIONSHIPS)</td>
<td>.46</td>
<td>.88</td>
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</tbody>
</table>

11-item, 2-factors solution was accepted. Chinese-PAC Scale mean = 27.8; SD = 9.45
Cronbach’s α = .89
Concurrent validity of C-PAC

- Sig. negative correlations:
  - CES-D
  - bother with problem behaviors (PB)
  - occurrence of problem behaviors

- Sig. positive correlations:
  - confidence in dealing with problem behaviors
  - self-rated health (SRH)
Conclusion 1

1. All 11 items loaded satisfactorily on the Chinese version of the PAC scale, with a 2-factor structure.
2. C-PAC has satisfactory reliability.
3. As expected, C-PAC was related to less depressive symptoms, lower bother with PBs, lower occurrence of PBs, higher confidence in dealing with PBs and better CG self-rated health.
Protective effect of PAC on exemplary care

- Exemplary care: “(…) reflect caregiver affection for the care recipient and willingness or even eagerness to provide care that is more than adequate, extending beyond the bounds of meeting basic needs (…) communicating to care recipients that they are loved, respected, and worthy of special consideration (…)” (Dooley et al., 2007).
Example items of EC:
- I actively avoid treating (care recipient) like a child.
- I take the time to sit and talk with (care recipient).
- I make sure that where (care recipient) lives is bright and cheery.

Based on REACH-HK Phase 1 baseline data: N = 248
## Protective effect of PAC on exemplary care

<table>
<thead>
<tr>
<th>Variables</th>
<th>Model 1</th>
<th>Model 2</th>
<th>Model 3</th>
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<tbody>
<tr>
<td>Social support</td>
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<td>.00</td>
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<td>.10</td>
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<td>.37**</td>
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<tr>
<td>CESD (depression)</td>
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<td>CESD X PAC</td>
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**Model summary**

- $\Delta F(10, 237) = 2.92, \; p = .002, \; \Delta r^2 = .11$
- $\Delta F(2, 235) = 19.65, \; p = .000, \; \Delta r^2 = .13$
- $\Delta F(1, 234) = 7.21, \; p = .008, \; \Delta r^2 = .02$
Protective effect of PAC on exemplary care

Conclusion 2: Higher PAC tends to amplify the salutary effect of low depression and generate greater levels of Exemplary Care (EC).
Limitations

- Cross-sectional data analysis
- Latent change models to model the relationships among changes in C-PAC, EC, and other variables
Take home messages

1. Care partners may experience positive aspects in their caregiving role, which can be & should be assessed.

2. Positive role appraisals are related to good quality of care.
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- **61 centers of 11 participating NGOs** (Baptist Oi Kwan Social Service, Caritas Hong Kong, Sik Sik Yuen, St. James Settlement, The Hong Kong Society for Rehabilitation, The Salvation Army-Hong Kong and Macau Command, Tung Wah Group of Hospitals, The Evangel Lutheran Church of Hong Kong, Yan Chai Hospital Social Service Department, Yan Oi Tong and Hong Kong Sheng Kung Hui Welfare Council Limited)

- **500 participating caregiver-care recipients dyads**

- **124 trained interventionists**
Thank you

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References


