

Care Needs of Older Adults with Neurocognitive Disorders:
Moderation Roles of Positive Experience in Caregiving

Poster
#6845

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Take away messages: (1) Demand for formal home, day, and institutional care increases with cognitive decline, especially in dementia. (2) Greater formal care needs are linked to cognitive deterioration, younger or non-spousal carers, and higher caregiving burden. (3) Positive caring experiences are associated with lower care needs, particularly in severer cases and carers who are older, frail, or highly strained.

INTRODUCTION	METHODS	RESULTS	RESULTS																																													
▪ Neurocognitive disorders (NCD) increase both medical utilisation and demand for social care and support. ▪ Care is initially provided by family members, but often shifts to institutional care as the condition worsens and caregiver burden escalates. ▪ While positive aspects of caregiving (PAC) can relief caregiver burden and mental distress, their broader social implications remain unclear.	▪ Design: a population-based, cross-sectional survey (Hong Kong Mental Morbidity Survey for Older Persons). ▪ Participants: 422 older adults and their family caregiver (normal cognition: 123; mild NCD: 240, major NCD: 59). ▪ Primary outcomes ○ Needs on home care ○ Needs on day care ○ Needs on elderly home care ○ Positive aspects of caring ▪ Data analysis ○ Framework: Anderson Behavioural Model ○ Exploratory factor analysis: predisposing, need factor, enabling factor ○ Regression and moderation analysis	▪ Care modality (normal/ MCI/ dementia) ○ Family care: 90%/ 87%/ 50% ○ Home care: 8%/ 12%/ 40% ○ Institution care: 2%/ 2%/ 10% ▪ ABM-consistent determinants ○ Predisposing: living with spouse; old/frail carer; female caring male ○ Enabling: family/ financial support ○ Need-related: cognitive decline, functional decline, caring burden ▪ Additional effects of PAC ○ +1SD self-confirmation reduced 32% home care needs (P<0.05) ○ +1SD outlook on life reduced 49% institution care needs (P<0.05) ○ Particularly in severer cases, older carer, and high caring burden.	Table. Factors associated with formal care needs <table><tr><th></th><th>Home vs family care</th><th>Institution vs family care</th></tr><tr><th>Predisposing factor</th><th>AOR (95%CI)</th><th>AOR (95%CI)</th></tr><tr><td>- Living with spouse</td><td>1.02 (0.73, 1.43)</td><td>0.41 (0.20, 0.86)*</td></tr><tr><td>- Old/Frail carer</td><td>0.68 (0.49, 0.94)*</td><td>1.82 (0.79, 4.21)</td></tr><tr><td>- Female caring male</td><td>0.79 (0.57, 1.10)</td><td>1.29 (0.65, 2.59)</td></tr><tr><th>Enabling resource</th><th></th><th></th></tr><tr><td>- Family/ Financial support</td><td>1.17 (0.85, 1.59)</td><td>1.03 (0.55, 1.91)</td></tr><tr><th>Need-related factor</th><th></th><th></th></tr><tr><td>- Cognitive decline</td><td>1.48 (1.08, 2.03)*</td><td>1.66 (0.84, 3.30)</td></tr><tr><td>- Functional decline</td><td>1.06 (0.81, 1.39)</td><td>0.87 (0.51, 1.50)</td></tr><tr><td>- Carer burden</td><td>1.46 (1.07, 1.99)*</td><td>1.90 (1.10, 3.28)*</td></tr><tr><th>Positive experience</th><th></th><th></th></tr><tr><td>- Total score</td><td>0.74 (0.53, 1.01)^</td><td>0.75 (0.40, 1.42)</td></tr><tr><td>- Self perception</td><td>0.68 (0.49, 0.96)*</td><td>0.96 (0.54, 1.70)</td></tr><tr><td>- Outlook on life</td><td>0.87 (0.65, 1.16)</td><td>0.51 (0.26, 0.98)*</td></tr></table> Figure. Moderation effects of PACS		Home vs family care	Institution vs family care	Predisposing factor	AOR (95%CI)	AOR (95%CI)	- Living with spouse	1.02 (0.73, 1.43)	0.41 (0.20, 0.86)*	- Old/Frail carer	0.68 (0.49, 0.94)*	1.82 (0.79, 4.21)	- Female caring male	0.79 (0.57, 1.10)	1.29 (0.65, 2.59)	Enabling resource			- Family/ Financial support	1.17 (0.85, 1.59)	1.03 (0.55, 1.91)	Need-related factor			- Cognitive decline	1.48 (1.08, 2.03)*	1.66 (0.84, 3.30)	- Functional decline	1.06 (0.81, 1.39)	0.87 (0.51, 1.50)	- Carer burden	1.46 (1.07, 1.99)*	1.90 (1.10, 3.28)*	Positive experience			- Total score	0.74 (0.53, 1.01)^	0.75 (0.40, 1.42)	- Self perception	0.68 (0.49, 0.96)*	0.96 (0.54, 1.70)	- Outlook on life	0.87 (0.65, 1.16)	0.51 (0.26, 0.98)*
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OBJECTIVE		IMPLICATIONS																																														
▪ To investigate the prevalence of care needs in older adults with NCDs. ▪ To investigate the direct and moderation effects of carers' PAC on formal care needs.		Enhancement of positive caregiving should be integrated in carer support programs, to promote sustainable ageing-in-place and reduce social care demand.																																														