Telephone Assessment and Skill-Building Intervention for Stroke Caregivers

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Abstract:

Stroke is the leading cause of long-term disability; families are often thrust into providing care for stroke survivors without any training. Stroke family caregivers are of increasing importance because the prevalence of stroke is likely to increase as the population ages. However, there are very few evidence-based, easy-to-deliver follow-up programs after hospitalization to train caregivers in providing care and none that comprehensively address both caregiver and survivor needs through skill-building strategies. Studies have shown that caregiving without training can be detrimental to caregiver’s physical and mental health, which can lead to institutionalization of the survivor and higher societal costs. The purpose of this study is to evaluate the efficacy of the revised Telephone Assessment and Skill-building Kit (TASK II), a nurse-led comprehensive intervention that enables caregivers to build skills based on assessment of their own needs. Family caregivers of stroke survivors (N=220) will be randomized to the TASK II intervention or to an Information, Support, and Referral (ISR) group to determine the relative efficacy of the TASK II intervention for reducing task difficulty, increasing optimism, and reducing threat appraisal for providing care. Primary outcomes are caregiver depressive symptoms, caregiving-related negative life changes, and unhealthy days. In an exploratory aim preliminary data will be collected for an economic evaluation of the TASK II intervention. Both the TASK II intervention and ISR procedures involve 8 telephone sessions delivered over 8 weeks, with a booster session at 12 weeks. Data collections will occur at baseline (within 8 weeks of home discharge); at 8 weeks (short-term intervention effect), 12 weeks (after booster), and at 24 weeks and 1 year after baseline (long-term sustainability of intervention effect). Linear mixed models will be applied to the repeated-measures data to test efficacy for Primary Aims 1 & 2. Latent Growth Models using a Structural Equation Model approach will be applied to examine mechanism of intervention effect (Exploratory Aim 1.). An incremental cost-effectiveness ratio (ICER) will be employed to address the comparative costs and outcomes for the TASK II intervention and ISR group (Exploratory Aim 2).