

## E-Learning Modules for the Care of Caregivers of Older Filipinos

As the population ages, so does the challenge to the care of older people with mental health problems. Geriatric syndromes such as delirium, dementia, and depression are amenable to medical management. Beyond care of the patient, however, is care for the caregiver. Behavioral and Psychological symptoms of Dementia (BPSD) such as agitation, aggression, and delusions increase the risk of caregiver stress.<sup>1</sup> This may lead to strain of individual carers and household members, increasing the patient's risk for poor care, abuse, or institutionalization. Caregiver education and skills training help reduce the level of caregiver stress. These are usually delivered face to face during clinic visits or training modules by dementia care professionals. However, remote alternatives for education, learning and counselling became essential during the COVID-19 pandemic.

E-workbooks and online learning modules on dementia, delirium, and depression written by professionals in the Philippines and Asia Pacific are available. An example is the Dementia Community Toolkit in English<sup>2</sup> and its Filipino adaptation<sup>3</sup>. The latter was developed by the Institute on Aging, National Institutes of Health, University of the Philippines Manila, with support from the Mental Health Unit of WHO WPRO. Patient support groups such as the Alzheimer's Disease Association of the Philippines likewise developed online learning materials. These were and are still freely available via their websites and the webinars<sup>4</sup> have been uploaded in internet and social media sites.

The efficacy and acceptability of remote education to reduce informal caregiver burden, negative mood, and quality of life was published in a Cochrane meta-analysis.<sup>5</sup> The authors analyzed experimental trials on information, training, or support compared to usual treatment, waitlist, or attention controls. Following several eligibility criteria, they identified 26 studies with 2367 participants in their review. Although most studies were of low quality and had uncertain risks of bias, there was small evidence that training plus support modules resulted in an improvement of caregiver knowledge. Training alone had no benefit on knowledge. Furthermore, there was no significant effect on patient institutionalization, caregiver burden depression, or quality of life.

The article on E-Learning on knowledge on the 3Ds of Geriatric Psychiatry is a good start in understanding the capacity of well-educated Filipino caregivers to improve their knowledge on the subject.<sup>6</sup> Beyond individual knowledge, E-learning modules have the capacity to guide families and communities in reducing ageism and improve patient care for older people with dementia, depression, and delirium. Further experimental studies are needed using locally developed modules. The bigger challenge is accessibility and acceptability of remote learning materials for the greater majority of informal caregivers with lower levels of education and poor access to online resources.

**Shelley F. Dela Vega, MD, MSc**

*College of Medicine, University of the Philippines Manila  
Institute on Aging, National Institutes of Health,  
University of the Philippines Manila*



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