

Best Practice Caregiving surveyed 324 healthcare and community organizations that replicated one or more of the 44 evidence-based programs about delivery organization characteristics, delivery staff, caregivers and persons with dementia served, funding sources, delivery challenges, perceived impact, and satisfaction. 211 (65.1%) organizations completed surveys about 30 different evidence-based programs. The most common types of organizations that delivered programs were healthcare organizations (23.8%) and Area Agencies on Aging (23.8%). Results showed on average organizations delivered programs for 49 months and served 68 families/year. The most common program delivery challenges were marketing (69.8%) and engaging participants (66.3%). Organizations generally agreed that programs had positive impacts on caregivers (59.5% strongly agree) but were less positive about benefits for persons with dementia (25.1% strongly agree). Discussion provides insights into successes and challenges organizations face when adopting evidence-based dementia caregiving programs in their communities.

OUTCOME PRIORITIES AMONG EVIDENCE-BASED DEMENTIA CAREGIVING PROGRAMS: A CLOSER LOOK

Sara Powers,¹ Alyssa Ciancibello,¹ Rachel Schaffer,¹ David Bass,¹ and Morgan Minyo,² 1. *Benjamin Rose Institute on Aging, Cleveland, Ohio, United States*, 2. *Cleveland State University, Cleveland, Ohio, United States*

Currently, the Best Practice Caregiving website provides information on 231 published studies from 44 dementia caregiving evidence-based programs that have demonstrated beneficial outcomes for dementia caregivers within health care and community-based settings. Across all programs, a total of 34 biopsychosocial outcomes were identified. Supported by the commonly used stress-related frameworks (e.g., Stress-Health Process, Cognitive Behavioral Theory) for which the programs were developed, the most frequently utilized program outcomes included: 1) Caregiver stress, strain, and/or burden (84.1%); 2) Caregiver depressive symptomology (79.5%); and 3) Caregiving efficacy, skills, and/or confidence (63.6%). The least common programmatic outcomes included: 1) Access to support information/Community service use (9.1%); 2) Unmet needs (6.8%); and 3) Respite/break from care (2.3%). The lesser utilized outcomes provide critical insight into current evidence-based programmatic priorities and ways in which professionals can seek to fill gaps in dementia caregiving interventions. Discussion will also focus on future directions of caregiver-related outcome assessments.

Session 1030 (Symposium)

ASPECTS OF GRIT AMONG DEMENTIA FAMILY CAREGIVERS

Chair: Jyoti Savla

Co-Chair: Karen Roberto

Discussant: Jennifer Margrett

Dementia family caregivers often show deep devotion and a strong sense of purpose and duty toward their relatives needing care. The concept of grit, which includes aspects of commitment, purpose, perseverance, and resilience, is a

novel theoretical approach to expanding understanding of dementia family caregiver strengths amidst the challenges they face. Multiple psychosocial and contextual factors are likely to interact with and influence grit among these caregivers. This symposium addresses commitment to the family dementia caregiver role, willingness to embrace the stressful work of caregiving, and perseverance in finding ways to sustain caregiving roles under typical and adverse circumstances. Blieszner focuses on associations between grit and stressors and strains that challenge caregiver well-being and jeopardize continued caregiving. Wilks considers the impact of spiritual support on sustaining resilience among Caucasian and African American dementia caregivers. McCann explores caregivers' responses to changes in informal support and social interactions available to assist with home care tasks over the course of the COVID-19 pandemic. Albers examines the strengths and resources caregivers draw upon to manage the challenges of caring for and supporting a relative in long-term residential care during the pandemic. Collectively, these presentations provide new insights into the range of influences on aspects of grit and circumstances in which grit sustains caregiving. Discussant Margrett considers the value of the concept of grit for furthering understanding of caregivers' abilities to manage typical and unique challenges in their caregiver roles and offers suggestions for future research and interventions to enhance grit among dementia family caregivers.

CARING BEYOND THE CHALLENGES: GRIT IN DEMENTIA FAMILY CAREGIVERS

Rosemary Blieszner, Jyoti Savla, Karen Roberto, Brandy McCann, and Emily Hoyt, *Virginia Tech, Blacksburg, Virginia, United States*

Scholars and practitioners recognize the importance of family caregivers for persons with dementia (PwD) persevering through difficulties and remaining committed to providing care (i.e., possessing grit). Based on Pearlin's stress process model, we examined how grit is associated with stressors and strains that interfere with caregiver well-being and jeopardize continued caregiving. The sample included 158 family caregivers of PwD from rural Appalachia. SEM analysis revealed that grit and family and friend affectual solidarity contributed significantly to mastery. Grit and family solidarity were associated indirectly with role overload through their effect on mastery. Results demonstrate the value of acknowledging the role of grit in enhancing caregivers' confidence about managing difficulties they face and reducing their sense of being overwhelmed by caregiving responsibilities. Thus, strengthening dementia caregivers' commitment to and perseverance in their role is crucial for sustaining their motivation to provide care, despite the challenges they face.

SPIRITUAL SUPPORT AMONG AFRICAN AMERICAN AND CAUCASIAN ADRD CAREGIVERS: A RISK AND RESILIENCE STUDY

Scott Wilks,¹ Wanda Spurlock,² Sandra Brown,² Jennifer Geiger,³ Sarah Choate,⁴ Katherine Kirsch,⁴ Alisha Thompson,⁴ and Cassie Slaton,⁴ 1. *Louisiana State University, Baton Rouge, Louisiana, United States*, 2. *Southern University College of Nursing and Allied Health, Baton Rouge, Louisiana, United States*, 3. *East*