TARGET AUDIENCE
This program is for adult caregivers of a family member diagnosed with Alzheimer's disease or a related disorder.

SUMMARY
Resources for Enhancing Alzheimer's Caregiver Health II (REACH II), also known as RCI (Rosalynn Carter Institute for Caregiving) REACH, is designed to improve caregivers' abilities to manage and cope with the role of caregiver, reduce the sense of burden and symptoms of depression, promote self-care, improve social support, and provide guidance on how to respond to challenging behaviors of care recipients.

EVIDENCE
A randomized trial comparing the REACH II intervention to a no-intervention control group found a significantly lower rate of clinical depression at post-test among caregivers in REACH II compared to those in the control group. Additionally, REACH II caregivers reported significant improvements in overall perceived health and in general health and emotional well-being; there was no similar change for control group participants. A pretest, post-test study with caregivers of Veterans found significant reductions in caregiver sense of burden, depression, impact of depression on daily life, and care giving frustrations (e.g., screaming, yelling, feeling like hitting or slapping).

COMPONENTS
REACH II is delivered through individual in-home and telephone sessions and telephone support group sessions. The program addresses five target areas and can be tailored to meet individuals’ needs:

- Depression - Provide education about emotional well-being, teach and guide practice in strategies for mood management, and encourage scheduling of pleasant events;
- Burden - Supply materials on caregiving and safety and teach and guide practice in stress management techniques (e.g., breathing and stretching exercises, music);
- Self-care - Offer information on preventive health practices and teach and encourage healthy behaviors (e.g., nutrition, keeping medical appointments);
- Social support - Discuss importance of social support and how to access community resources, guide role-play interactions with health care providers and family members to improve communication, and support participation in telephone support groups; and
- Problem behaviors - Present knowledge of symptoms of dementia, problem-solve and brainstorm strategies for problem behaviors, provide step-by-step instructions for these strategies, and demonstrate and practice strategies through role-play.

PREVIOUS USE
The randomized trial of REACH II involved over 600 caregiver/care recipient pairs in five cities across the United States. The evaluation of the program through the Department of Veterans Affairs, called REACH VA, involved over 100 pairs in 15 states. REACH II has also been implemented through other organizations and in rural areas.
TRAINING
Facilitators must have a bachelor's degree and, ideally, a background in social services, and they must become certified to implement this program. Training may be obtained from the Rosalynn Carter Institute for Care giving Training Center for Excellence where the program is called RCI REACH. Training is 1 1/2 days, accommodates up to 10 participants, includes training manuals and monthly consultations, and costs $3,500 at RCI or $5,000 on-site plus travel expenses. For information, please contact Gayle Alston at Gayle.Alston@gsw.edu or 1-229-928-1234.

CONSIDERATIONS
Considerations for implementing this program include obtaining funding for training, understand program implementation costs could be extensive, and recruiting and maintaining skilled interventionists.

The Clearinghouse can help address these considerations. Please call 1-877-382-9185 or email Clearinghouse@psu.edu

IMPLEMENTATION
If you are interested in implementing REACH II, the Clearinghouse is interested in helping you!
Please call 1-877-382-9185 or email Clearinghouse@psu.edu

REACH II includes nine in-home sessions that last 1 1/2 hours each, three telephone sessions that last 1/2 hour each, and five telephone support group sessions. The program lasts for 6 months.

Implementing REACH II / RCI REACH has been estimated to cost $7 per day or $1,277.50 per caregiver/care recipient pair as estimated by the Rosalynn Carter Institute.

EVALUATION PLAN
To move this program to the Promising category on the Clearinghouse Continuum of Evidence, an evaluation should demonstrate positive results sustained six months from program completion or one year from the beginning of the program.

The Clearinghouse can help you develop an evaluation plan to ensure the program components are meeting your goals. Please call 1-877-382-9185 or email Clearinghouse@psu.edu

CONTACT
Contact the Clearinghouse with any questions regarding this program.
Phone: 1-877-382-9185 Email: Clearinghouse@psu.edu

You may also contact Julie Klinger by phone 1-412-624-0372 or email j.klinger@pitt.edu or contact the RCI Training Center for Excellence by mail 800 GSW University Drive, Americus, GA 31709-4379, phone 1-229-928-1234, fax 1-229-931-2663, or visit www.rosalynncarter.org/contact_us/

SOURCE
Belle et al. (2006); Elliott, Burgio, and DeCoster (2010); Nichols, Martindale-Adams, Burns, Graney, and Zuber (2011); https://www.youtube.com/watch?v=nR4vhFaN92Y&feature=youtu.be; and www.rosalynncarter.org/training_center/