multivariate models, after adjusting for numerous patient and CG variables, increasing CG strain was consistently associated with rising patient symptomatology. This relationship was pronounced among CGs of Home PMV patients, with a significant interaction variable of Home*Patient symptomatology. Our findings identify specific patterns of strain among caregivers of PMV patients whether at home or LTC, and highlight the importance of addressing their unique needs.

SUPPORT NEEDS AS PERCEIVED BY GRANDPARENT-CAREGIVERS: A QUALITATIVE SYSTEMATIC REVIEW

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Caregiving can have adverse mental and physical health outcomes. Older grandparents who are primary caregivers for their grandchildren report multiple health conditions such as depression, anxiety, hypertension, cardiac disease and chronic fatigue, which are caused by or otherwise exacerbated by the caregiving demands. We conducted this qualitative systematic review to identify support needs that contribute to such poor health outcomes and as perceived by grandparent-caregivers for minor grandchildren. We searched relevant databases (PubMed, PsyChINFO, CINAHL, and Social Work Abstracts) using terms such as: child rearing, parenting, child custody, grandparents, support needs, and caregiving. Studies were included for review if they were written in the English language; used only qualitative methods; and were published from January 1990 to January 2020. Included studies were critically appraised using the Critical Appraisal Skills Programme checklist. Data were extracted from these studies and synthesized using meta-ethnography. Of the 2828 studies identified, 58 studies from 12 countries met all inclusion criteria for review. Three main themes emerged from the review: 1) grandparent-caregivers’ personal needs, and 2) grandchildren needs. Both themes were further divided into subthemes of health (mental & physical), financial, social (interpersonal, cultural and environmental factors and services). Findings from this review have potential to: 1) inform design of comprehensive interventions and screening needed to address perceived support needs; and 2) identify gaps in and barriers to available support resources for older grandparent-caregivers. Further research is needed on comprehensive assessment of support needs and risk for poor health outcomes among grandparent-caregivers.

TESTING PREDICTIVE FACTORS OF DEPRESSIVE SYMPTOMS AMONG GRANDPARENTS UNDER THE COVID-19 PANDEMIC

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An estimated 69.5 million Americans are reported to be grandparents. Among them, about 10% are raising grandchildren and the number of grandparents who are raising grandchildren (GRG) is increasing. Previous research on GRG suggests that the unexpected caregiving duties may lead to negative physical and mental health including more depressive symptoms when compared to non-caregiving grandparents (NGRG). Additionally, grandparent-grandchild relationships determined by emotional availability (EA) of the grandparent may be impacted. These factors might further be complicated, especially as it relates to the health and well-being of GRG, as a result of the COVID-19 pandemic. Thus, the overarching goal of this presentation is to use the biopsychosocial model to present a conceptual framework to test the mental well-being of GRG during the COVID-19 pandemic. In this presentation, we will 1) summarize appropriate literature on GRG; 2) share a COVID-19 health and well-being assessment survey designated for GRG in order to assess their health before and since the COVID pandemic; and 3) propose a conceptual model to investigate and test the protective role of physical activity and GRG’s EA in the grandparent-grandchild relationship for the mental health of GRG. In our model, we argue that GRG experience more COVID-19 pandemic-related stress and more depressive symptoms when compared to NGRG. This proposed conceptual model offers one way to test the predictors of depressive symptoms on GRG. Future testing has the potential to shed new light on the development of appropriate intervention programs tailored to maintain the mental health of GRG.

THE ASSOCIATION BETWEEN CAREGIVER EDUCATION ON ADULT T2DM AND PATIENT’S OUTCOMES IN COMMUNITY: A SYSTEMATIC REVIEW

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Introduction: Adult type 2 diabetes (T2DM) threatens public health and most patients manage their diabetic condition while in the community. As it is challenging for patients to properly manage diabetes alone, caregiver involvement in T2DM patient care is encouraged. This study aimed to examine the association between caregiver involvement in T2DM education within a community and the patients’ diabetes care outcomes (e.g., glycated hemoglobin (HbA1c) level, behavior, or hospitalization).

Methods: The available scientific literature in PubMed, Cochrane, EMBASE, and CINAHL was searched. The methodological quality of bias was assessed using the Cochrane risk of bias tool.

Results: A total of 13 out of 741 published studies were synthesized in this review. There is evidence that caregiver involvement in T2DM education is effective in the reduction of HbA1C and BMI, but not necessarily effective in reducing lipids. Study results indicate that caregiver related interventions can significantly improve patient diabetes knowledge, physical activity, and self-efficacy, but results were more mixed regarding medication adherence. Risk of bias analysis classified the majority of studies (77%) to be moderate or high quality.

Conclusion: This review aimed to explore the association between caregiver involvement in adult T2DM education in the community and patients’ diabetes care outcomes. The findings show an improvement in biological and behavioral self-management outcomes with caregivers involved in T2DM education, though no studies examined the direct association between complications or hospital readmission.