OBJECTIVES: To develop interventions to provide the caregiver the knowledge and self-confidence to prevent risky behaviors that lead to injuries and provide an environmentally safe home living situation for the care-recipient. Specific aims are to: 1) Describe the range of less effective - more effective caregiver behaviors used to manage a dementia care recipient at home; 2) Identify the environmental dangers for injury risk and accidents in homes; 3) Investigate the range of home environmental modifications to which families agree; 4) Determine the costs and logistics of making home safety modifications; 5) Develop an instrument to quantify home safety for use in future research.

METHODS: Phase One had two components: 1) a purposive sample of 17 interdisciplinary professionals who support caregivers living with a person with dementia were interviewed. Qualitative data analysis included thematic analysis and integration with the extant literature. 2) Qualitative analysis and descriptive statistics were summarized for the first 42 families who received a home safety visit by a nurse researcher and occupational therapist. In Phase two, the final sample of 52 families received a home visit and safety assessment. Cost data, standardized measures of cognitive and functional ability of the care-recipient, and demographic variables were collected. Data analysis includes bivariate correlations and regression models to explore the relationships among the variables. In addition, a learner verification process is being used to confirm the cultural and linguistic appropriateness for diverse populations of a new teaching tool for home safety.

FINDINGS: (1) The most frequent risks for injury in the home are wandering, falls/tribbing, turning on the stove inappropriately, and access to knives on countertops. Although not frequent, there is serious risk from access to firearms and car keys. (2) Caregivers take chances and allow gaps in supervision because they don't know about or don't have other options, because they don't recognize the early signs of dementia and/or don't understand the nature of the illness. Caregivers' readiness and effectiveness in making home safety modifications are influenced by the risky behaviors exhibited by the care recipient, by family support and resilience to make role changes, alliance with professional caregivers, community services and education, and prior direct or vicarious experience with care giving. (3) Families are most receptive to home safety modifications that a) do not create a daily inconvenience to the caregiver, and b) do not require technical expertise to install. (4) The average cost per family for home safety items is $79.00 (range $18.00 - $249.00). Time, cost, and access to technical help are logistical issues for many families. The high frequency/high severity risks for injury can be addressed in a standardized teaching tool for all families with a person with dementia living at home.

STATUS: Phase one is complete. The qualitative study of caregivers' confidence to prevent home injury will provide the foundation to develop a new tool: Caregiver Self-Efficacy for Injury Prevention in a carerecipient with dementia. Phase two is close to completion. Home visits are completed for a total sample of 52 families who completed the six-month interview. Data are being entered into SPSS for quantitative analysis. A new teaching guide, Keep Your Home Safe for a Person with Memory Loss is in final draft and meets low-literacy guidelines. Caregiver focus groups are being conducted to use a learner verification process to assure cultural and linguistic appropriateness of the booklet.