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BACKGROUND & PURPOSE

- ❖ Studies show 1:1 in-person Alexander technique (AT) sessions can reduce anxiety and musculoskeletal pain with long-term benefits.¹⁻⁴
- ❖ Care partners (CP) often experience role engulfment and loss of self.⁵
- ❖ AT is an embodied approach to choose functional patterns that transform disruptive stress reactions to adaptive responses, increasing confidence, self-control, and self-awareness.
- ❖ Previous in-person group course results from 71 CP of people living with Parkinson's showed promise. Benefits retained at 12 months.
- ❖ COVID-19 provided an opportunity to test synchronous online AT-based courses for CP of people living with dementia.

DESIGN & PARTICIPANTS

- ❖ Feasibility study with waitlist control.
- ❖ All subjects provided substantial care for a family member with dementia.
- ❖ AT group: N=14 (11F/3M) from 9 states; mean age 68; 72% provided 41+ hrs/wk care; 93% lived with care-receiver.
- ❖ Control group: N=9 (8F/1M) from 4 states; mean age 63; 67% provided 41+ hrs/wk care; 67% lived with care-receiver.

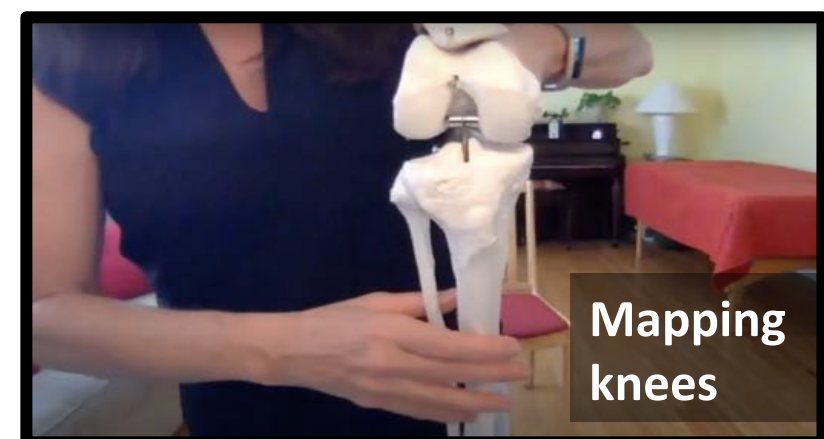


Using recorded video to teach during live class

"The Alexander technique helps me say, 'I have time. I am here.' He's just appreciative of my responses to him. I don't get impatient. I don't snap at him. He says, 'I'm a lucky man.' Several times a day. 'I'm a lucky man.'"

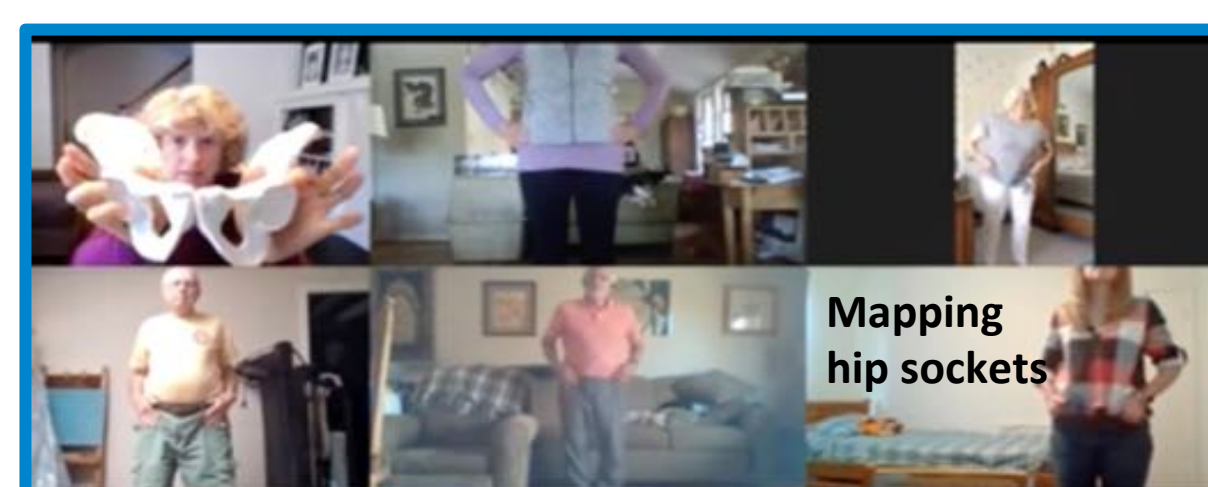
INTERVENTION

- ❖ AT groups met 90 min/week x 10 wks
- ❖ Embodied self-management strategies delivered in-home via Zoom. Intentional practices to interrupt automatic reactions and affirm centrality of self.
- ❖ Verbal and visual instruction, anatomical models/images, activities, demonstration videos, review materials
- ❖ Embedded in everyday activities (gait, sit-to-stand, IADLs, and so forth).



"The physical activity was a surprise. I was prepared to sit and listen to a lecture. Variety kept my interest."

"I noticed less physical pain, less of some of the aches and stuff that I would experience in the morning."

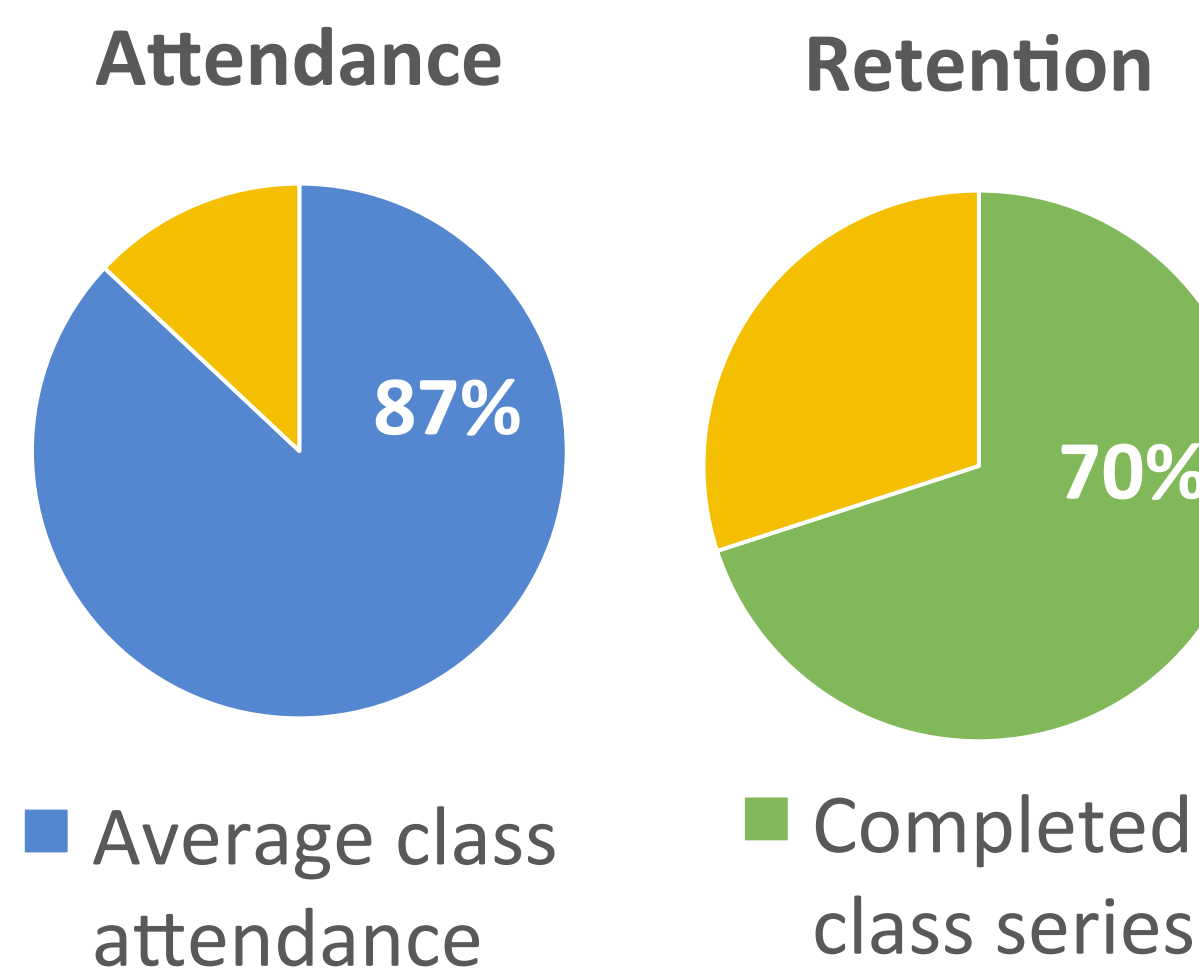


OUTCOME MEASURES

Feasibility: attendance & retention. **Self-report:** surveys.
Executive function: digit span and Stroop. **Anonymous evaluations.**
Interviews. (see quotations throughout)

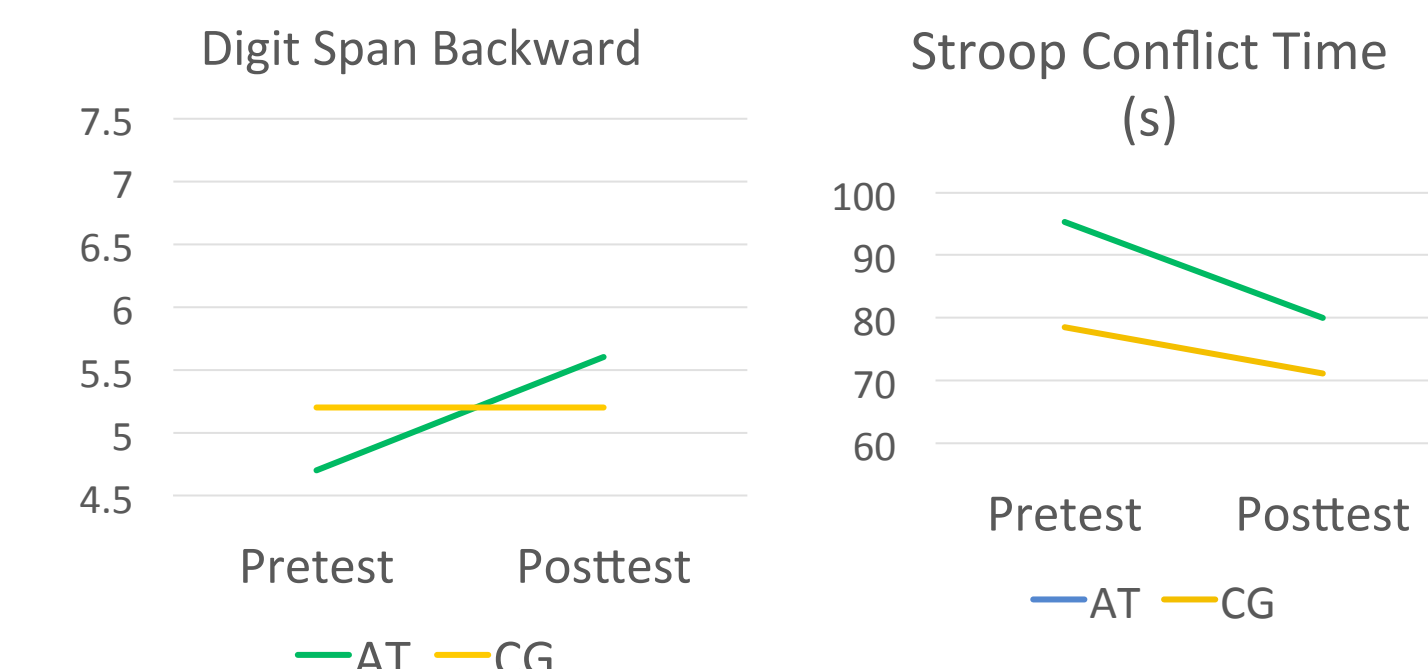
RESULTS – FEASIBILITY

"It's more head oriented than body oriented like tai chi or yoga; I never came out of yoga feeling like I was empowered. I just felt better, but not like I had gained abilities or techniques or anything to help me in daily life. This was much more all-encompassing."



RESULTS – EXECUTIVE FUNCTION

AT group improved working memory (Digit Span Backward p=.003) and inhibitory control (Stroop Conflict p=.05); control group did not.

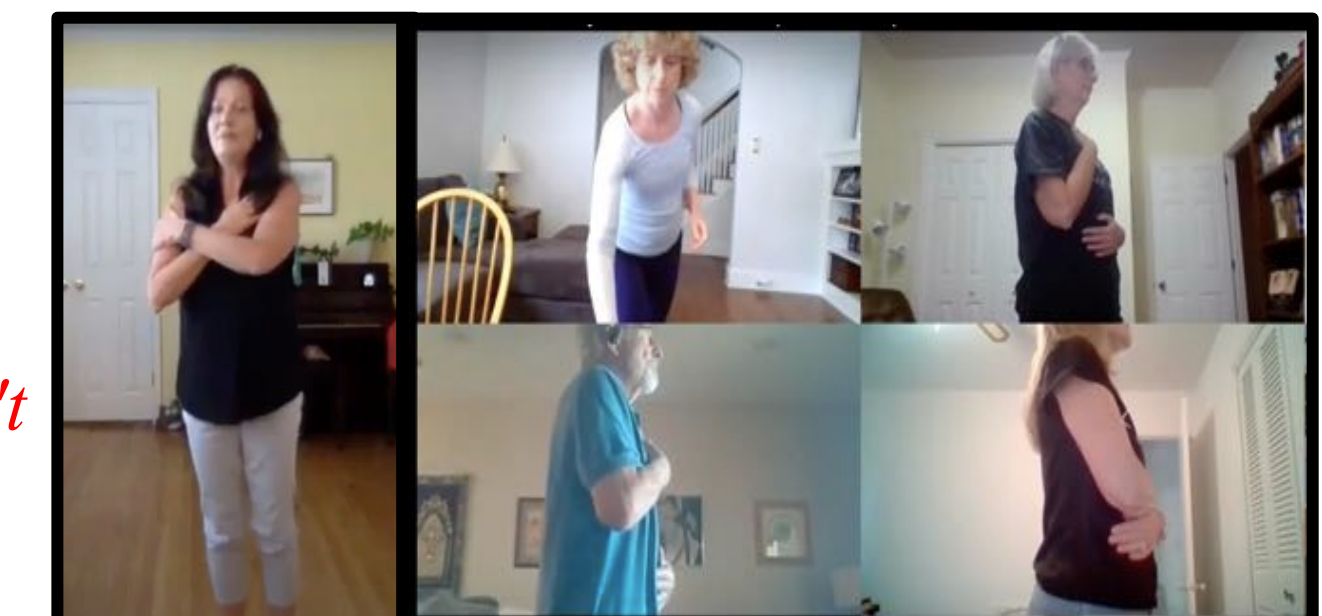


"I would say it's a combination of mental, physical and emotional awareness. And that it's a focus on oneself, but at the same time, it improves the life of those around you."

RESULTS – EVALUATIONS

On 0-10 scale, mean rating was:
 >9 for novelty of ideas, would recommend to a friend, and learned practical tools for physical self-management.
 >8 for enjoyment of group interaction, prevention of pain, and learned practical tools for self-management of emotions and reactions.
 >7.9 for feeling better prepared for care partner daily challenges.

"I was just always over-stimulated. So when I can say to myself, 'I have time,' it lets me rank everything and just push aside what I don't need to deal with right now. And it's just made everything a lot more manageable."



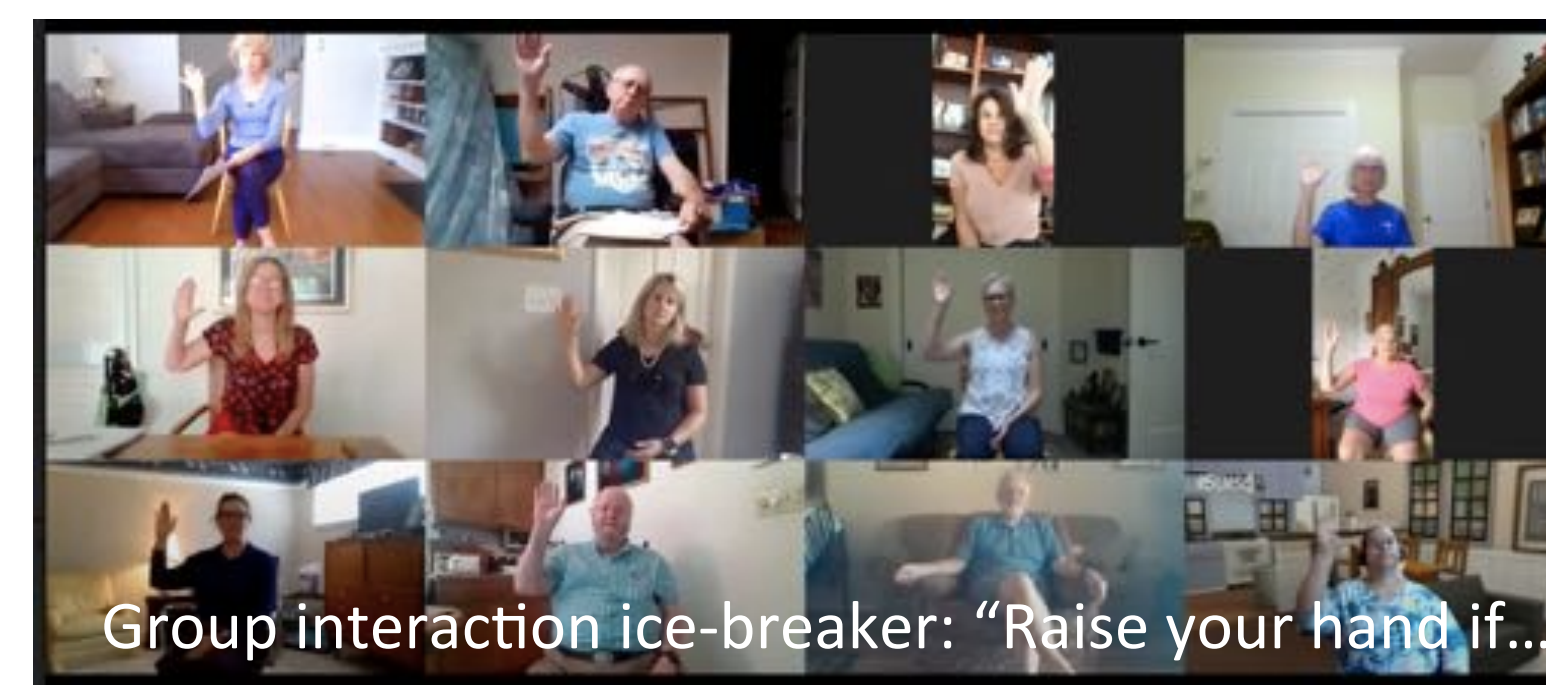
Stillness Stance: embodied agency activity

RESULTS - SURVEYS

>> AT group reported reduced fear (p=.004) and increased care partner self-efficacy for controlling upsetting thoughts about caregiving (p=.08); control group did not.

Measure	AT pre	AT post	CG pre	CG post
HIGH BETTER				
MAAS	59	62	56	52
Gain in dementia care	39	40	41	42
Positive aspects of caregiving	31	33	29	32
Postural awareness scale	40	44	40	36
Self-efficacy for responding to disruptive behaviors	0.67	0.73	0.76	0.73
>> Self-efficacy for controlling upsetting thoughts about caregiving	0.61	0.69	0.65	0.69
Self-efficacy for obtaining respite	0.43	0.41	0.49	0.60
Pearlin mastery	29	27	28	28
LOW BETTER				
Emotional distress & depression	28	26	26	26
Role engulfment	37	37	37	36
Somatic arousal	10	9	10	12
Feelings of loss	16	16	14	15
>> Fear	34	28	32	34

"I thought it was much better than any support group I've gone to — that it's just totally different. It's so expansive. We're not at all focused on talking about the problems. So that's the biggest difference. There are also solutions that don't depend on what the problem is."



CONCLUSIONS

- ❖ Alexander technique shows promise as a whole person approach to reduce loss-of-self and increase embodied agency in care partners of people living with cognitive decline.
- ❖ Group classes can provide cost-effective delivery with social benefits, and online classes can increase accessibility.
- ❖ A full-scale study is merited.

"I have more of a sense of being settled about my role, that I chose it. Whereas before it always felt like a duty, now I feel like, okay, I chose this, and I didn't have to. I think I have less resentment because of that."

"Reminding myself, like, relax, it's okay. You have to have the time that you need to get through something. So then my responses to her were much better. And then her reaction to me is much better."



ACKNOWLEDGEMENTS

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REFERENCES

1.Little (2008) 2.MacPherson (2015) 3.Klein (2014) 4.Stallibrass (2002) 5.Skaff, Pearlin (1992)