Anger and Depression Management: Psychoeducational Skill Training Interventions for Women Caregivers of a Relative With Dementia

David W. Coon, PhD,1 Larry Thompson, PhD,2 Ann Steffen, PhD,3 Kristen Sorocco, PhD,4 and Dolores Gallagher-Thompson, PhD5

Purpose: This study examines the short-term impact of two theoretically based psychoeducational small group interventions with distressed caregivers, and it also examines the role of specific moderator and mediator variables on caregiver outcomes. Design and Methods: Female participants (N = 169) aged 50 and older who were caring for a community-dwelling relative with a dementing illness were randomly assigned to one of three treatment interventions: anger management, depression management, or a wait-list control group. These interventions took place over a 3- to 4-month period. The primary outcomes examined were anger or hostile mood, depressed mood, frequency of use of positive and negative coping strategies, and perceived caregiving self-efficacy. Results: Significant main effects in the expected direction were found for changes in most of these measures. Participants in both anger management and depression management groups had significant reductions in their levels of anger or hostility and depression from Time 1 to Time 2 in comparison to participants in the wait-list control group. Use of positive cognitive coping strategies increased in the anger management group only. Self-efficacy significantly increased for participants in both intervention groups, and it was also demonstrated to function as a mediator of intervention effects. Pretreatment levels of depressive symptoms and anger expression style (Anger Expression-Out) moderated the relative effects of the two interventions on mood and coping. Implications: These data are consistent with a growing body of evidence supporting the effectiveness of skills training, in small groups, to improve both the affective states and the type of coping strategies used by caregivers. In addition, this study underscores the need to evaluate key pretreatment variables in order to determine which form of treatment may be more compatible with caregiver characteristics and thus more likely to be beneficial to individuals.

Key Words: Caregiving, Alzheimer's disease, Older women, Cognitive behavioral interventions, Randomized clinical trials

Research on the effectiveness of interventions to reduce family caregivers’ distress has rapidly increased during the past decade. This is of no real surprise given the well-documented finding that the stresses associated with caregiving lead to psychological distress for many caregivers (Bookwala, Yee, & Schulz, 2000; Schulz, O’Brien, Bookwala, & Fleissner, 1995). Reviews of caregiver intervention research have reported a range of effective interventions, reflecting varied theoretical orientations, including cognitive-behavioral and brief psychodynamic frameworks (Bourgeois, Schulz, & Burgio, 1996; Coon, Gallagher-Thompson, & Thompson, 2003; Gallagher-Thompson & Steffen, 1994; Sörensen, Pinquart, & Duberstein, 2002). Different procedural formats, such as support groups and psychoeducational groups, have also been evaluated (Charlesworth, 2001; Gallagher-Thompson et al., 2000). For the most part,