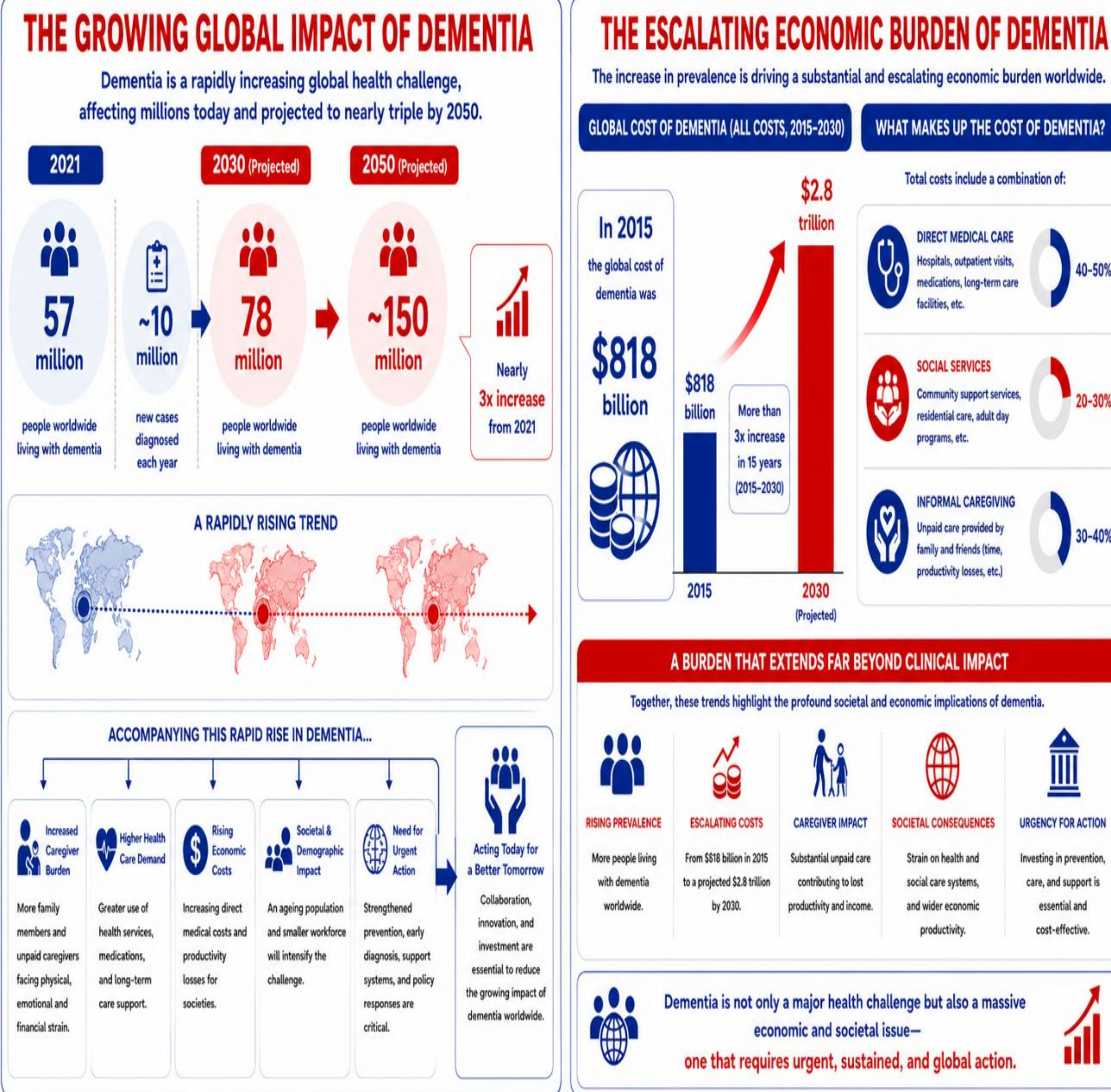




INTRODUCTION

Dementia places substantial psychological, physical, and economic strain on caregivers, yet evidence regarding effective and scalable caregiver-support strategies remains fragmented [1].



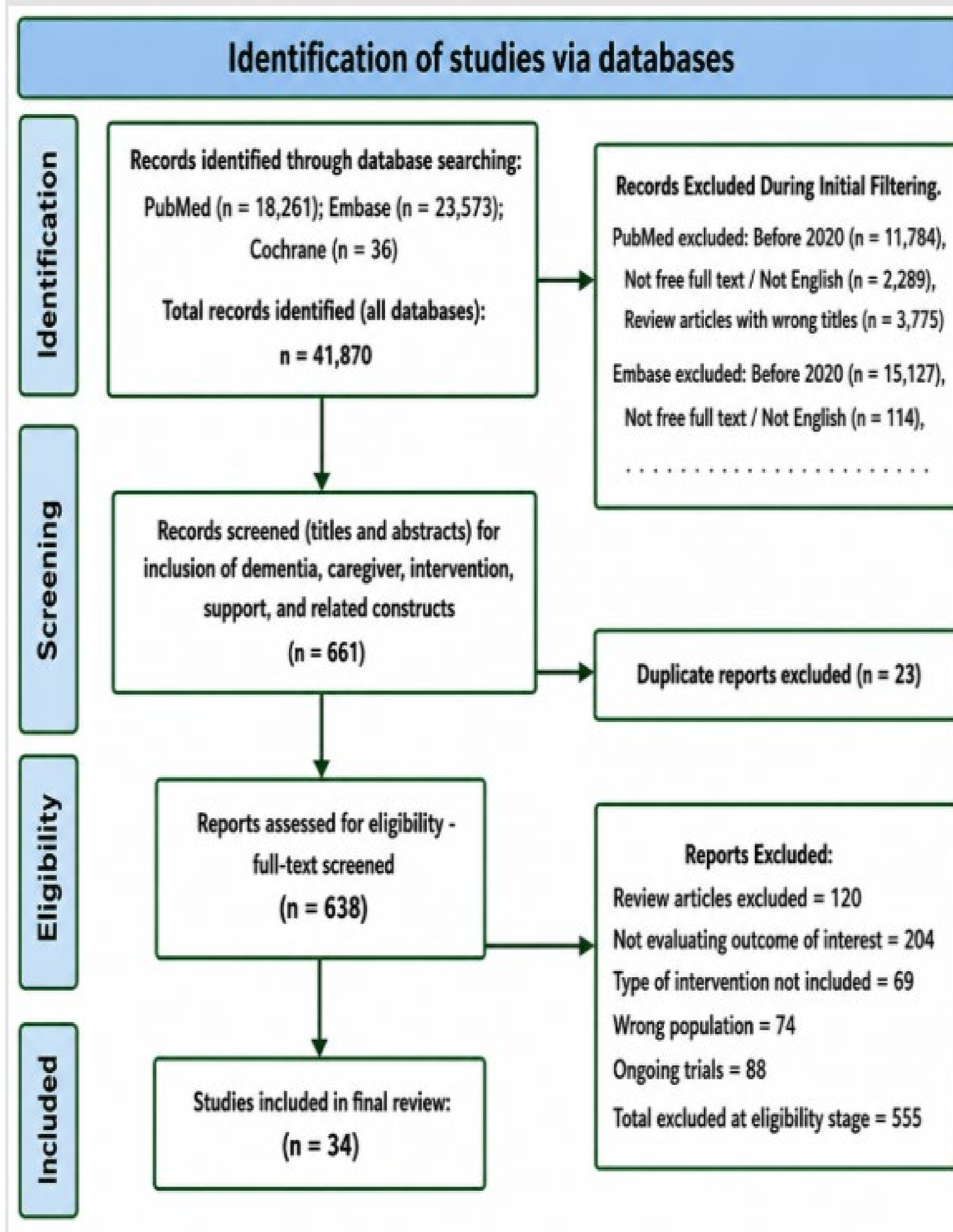
METHODS CONT'D

INCLUSION CRITERIA	EXCLUSION CRITERIA
<ul style="list-style-type: none"> Caregivers of individuals with any form of dementia Interventions specifically designed to support caregivers RCTs, quasi-experimental, pre-post, quantitative, or mixed-methods studies Outcomes on caregiver burden, depression/anxiety, stress, quality of life, or caregiving competence/self-efficacy English-language full-text studies published between January 2020 and May 2025 	<ul style="list-style-type: none"> Studies published before 2020 Reviews, editorials, protocols, commentaries, or abstracts Studies focused solely on persons with dementia without caregiver-targeted components Studies unrelated to dementia caregiving Interventions where caregiver support was incidental or not clearly described

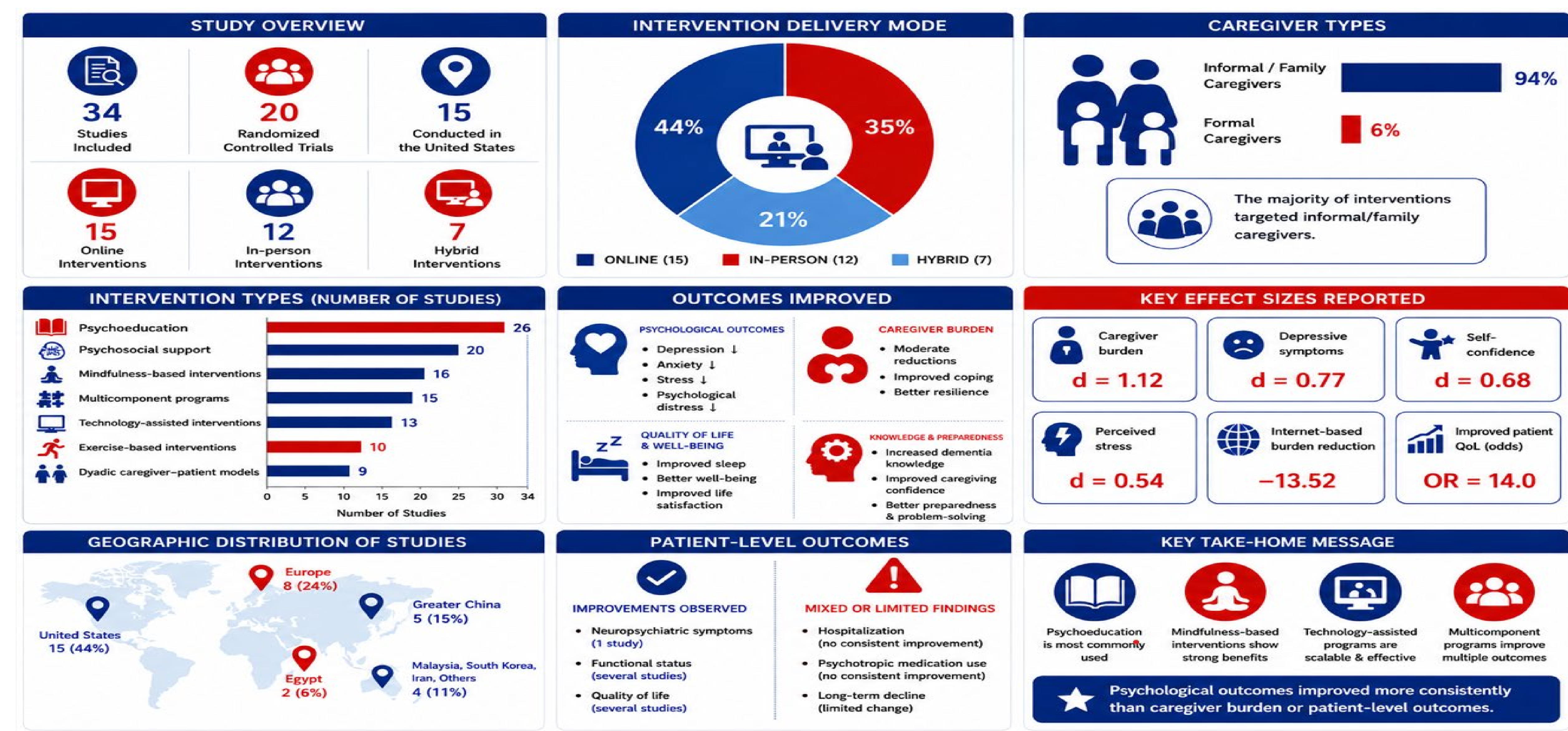
Search Terms

Keywords: 'Interventions OR support programs' AND 'caregivers' OR 'family caregivers' OR 'informal caregivers' AND 'dementia.'

Figure 1: Prisma Flow Diagram



RESULTS



DISCUSSION

- 01** Psychosocial and supportive interventions consistently improved caregiver psychological outcomes, particularly depression, anxiety, stress, and emotional burden, regardless of delivery format.
- 02** Technology-enabled and hybrid interventions demonstrated strong effectiveness, suggesting that flexible, remotely delivered caregiver support can improve accessibility while maintaining meaningful psychological benefits.
- 03** Psychoeducational, multicomponent, and skills-based interventions produced the most consistent improvements, particularly in caregiver coping ability, caregiving confidence, and overall well-being.
- 04** Most studies focused primarily on caregiver-centered outcomes, with limited assessment of patient-level outcomes such as neuropsychiatric symptoms, functional decline, and psychotropic medication use. Only one study demonstrated improvement in neuropsychiatric symptoms.
- 05** None of the reviewed interventions incorporated structured medication-safety or deprescribing education, highlighting an important gap in dementia caregiver support and an opportunity for future dyadic interventions targeting both caregiver well-being and patient safety.

CONCLUSION

- Psychosocial and supportive interventions remain essential for strengthening caregiver resilience and sustaining long-term dementia care.
- Flexible, accessible, and skills-oriented support models may offer the greatest potential for improving caregiver outcomes across diverse care settings.
- Future dementia care strategies should move beyond caregiver-only approaches and adopt integrated, patient-centered models that address both emotional and practical caregiving demands.

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OBJECTIVES

- To synthesize recent evidence on psychosocial and supportive interventions for caregivers of individuals living with dementia.
- To identify gaps that inform future research and practice.

METHODS

- Systematic review conducted according to the PRISMA guidelines.
- PubMed, Cochrane Library, and Embase were searched for English-language studies published between January 2020 and May 2025.
- Studies involving caregivers of individuals with dementia that evaluated psychosocial, supportive, behavioral, technology-based, or multicomponent interventions were included.
- Data extracted included study characteristics, intervention type, caregiver population, delivery mode, duration, outcomes assessed, and key caregiver findings.