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An innovative support program to foreign domestic worker (FDW) for caring of elderly with Dementia - workshop, trilingual caregivers' guidebooks and video for the care elderly with behavior and psychological symptoms of Dementia (BPSD).

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Introduction
Behavioral and psychological symptoms of dementia (BPSD) are common in elderly with dementia. Throughout the course of disease, more than one symptom of BPSD would be elicited (Geriach LB & Kales HC, 2017). BPSD can cause significant carer burden and frequent admission to hospital. Non-pharmacological intervention is considered to be the first line treatment of BPSD ((Geriach LB & Kales HC, 2017). This program is to provide training to FDW for care of elderly with dementia. With training workshop, trilingual (Cantonese, English, Indonesian) guidebooks and informational video, FDW's knowledge and skill in taking care of elderly with dementia would be enhanced as well as their carer stress would be alleviated.

Objectives
The aims of this program are:
1.   To enhance FDW's knowledge and skill in taking care of elderly with dementia
2.   To provide sustainable material/channel for FDW to obtain information for care of elderly with dementia
3.   To reduce carer stress of FDW in taking care of elderly with dementia
4.   To evaluate the effectiveness of the training workshop in reducing the severity of BPSD of the elderly
5.   To evaluate the effectiveness of the training workshop in reducing carer stress of FDW in taking care of elderly with dementia

Methodology
Seven identical full-day workshops covering relevant topics including updated knowledge on dementia and BPSD, the principles and techniques of dealing with common BPSD was held by the Psychogeriatric team of Kwai Chung Hospital from August 2015 to Oct 2017. Lectures and the live demonstrations were delivered in English, Cantonese, with live translation by the Indonesian interpreter. The content of

the lecture was based on the trilingual caregivers' guidebooks and the video. Every FDW could receive one set of the guidebook; they could review the BPSD management skills from the guidebooks and video in future. The effectiveness of the workshops was measured using Neuropsychiatric Inventory (NPI) for BPSD symptom score, and a 6-point Likert scale for caregivers strain on individual symptoms before and one month after the workshops. Moreover, the Satisfactory Survey was also completed by the FDW and their employers.

Result

149 FDW were recruited, 9.5% drop out, 136 FDW completed the program.

Paired-samples-T-test revealed a significant difference. To the BPSD scores:

Delusion (M=1.94, SD=2.94); $t(135)=7.72$, $p<0.001$. Agitation (M=2.24, SD=3.26); $t(135)= 8$, $p<0.001$

Depression (M=1.62, SD=2.84); $t(135)=6.63$, $p<0.001$. Irritability (M=1.53, SD=2.85); $t(135)=10.54$, $p<0.001$

Sleep Problem (M=2.04, SD=3.26); $t(135)=7.28$, $p<0.001$

These results suggest that this program really can reduce the BPSD of the elderly with dementia. Specifically, the score of the agitation was decreased the most. To the FDW's strain:

Delusion (M=1.19, SD=1.27); $t(135)=10.96$, $p<0.001$. Agitation (M=1.32, SD=1.48); $t(135)= 10.43$, $p<0.001$

Depression (M=1.23, SD=1.51); $t(135)=9.51$, $p<0.001$. Irritability (M=1.21, SD=1.33); $t(135)=10.54$, $p<0.001$

Sleep Problem (M=1.32, SD=1.38); $t(135)=11.16$, $p<0.001$

These results suggest that this program really can reduce FDW's strain. And the score of the agitation and sleep problem were decreased more than others.

To the Satisfactory Survey, FDW showed "very agree" to this program is 66% and "agree" is 32%. Their employers showed "very agree" to this program is 82% and "agree" is 13%.