

Title of Intervention: Family intervention after stroke

Intervention Strategies: Group Education, Supportive Relationships

Purpose of the Intervention: To enhance stroke recovery by improving stroke caregiver knowledge

Population: Primary: caregivers of stroke patients; secondary: adult stroke victims

Setting: Seattle Veterans Administration Medical Center; health care facility-based

Partners: Veteran's Administration Medical Center

Intervention Description: Caregivers were randomized into two groups: counseling plus education or education only.

- Group Education: The caregivers in both groups participated in a 2-hour class led by an occupational therapist. It included a video entitled "Living with Stroke" and a lecture on consequences of stroke. Topics included language impairment, physical and perceptual loss, memory and learning ability, emotional consequences and sexuality.
- Supportive Relationships: Caregivers in the counseling plus education intervention group received cognitive behavioral counseling sessions with trained social workers.

Theory: Not mentioned

Resources Required:

- Staff/Volunteers: Occupational therapist, social workers
- Training: Training in cognitive behavioral counseling
- Technology: Video equipment
- Space: Class and counseling space
- Budget: Not mentioned
- Intervention: "Living with Stroke" video, lecture outline
- Evaluation: Stroke Care Information Test (SCIT), the Family Assessment Device (FAD), the ESCROW profile, the Personal Adjustment and Role Skills scale (PARS)

Evaluation:

- Design: Randomized Controlled Trial
- Methods and Measures:
 - Stroke Care Information Test assessed caregiver knowledge of stroke
 - Family Assessment Device assessed family function
 - ESCROW Profile assessed use of social resources
 - Personal Adjustment and Role Skills scale assessed patient adjustment to stroke

Outcomes:

- Short term Impact: Both groups showed significantly higher scores in knowledge of stroke at both 6 months and one year. The counseling group showed the greatest knowledge of stroke. Both groups had significantly higher scores for several of the family function measures including problem solving, communication, affective involvement and global family function. The counseling plus education group had a significant improvement in patient adjustment to stroke.
- Long Term Impact: Not measured

Maintenance: Not mentioned

Lessons Learned: The study suggests that education and counseling should be pursued routinely with families of stroke patients. Future research should assess changes in the caregivers themselves.

Citation(s):

Evans, R. L., A. L. Matlock, et al. (1988). "Family intervention after stroke: does counseling or education help?"
Stroke 19(10): 1243-9.