the pandemic-related restrictions in the access to social care service and social isolation. Reduction of social support was significantly related to deficits in social health and well-being.

Conclusions: Our results highlight the emerging impact of health the current global epidemiological situation upon social health, with a particular focus on those affected by social disadvantage and isolation.

Talk 3 Abstract

The use of technology by people with dementia and informal carers during COVID-19: a cross-country comparison

<u>Ilaria Chirico</u>¹, Clarissa Giebel^{2, 3}, Katarzyna Lion⁴, Maria Mackowiak⁵, Monica Cations⁶, Rabih Chattat¹, Mark Gabbay^{2, 3}, Wendy Moyle⁴, Alessandro Pappadà¹, Joanna Rymaszewska⁵, Adrianna Senczyszyn⁵, Dorota Szczesniak⁵, Hilary Tetlow², Elzbieta Trypka⁵, Marco Valente¹, Giovanni Ottoboni¹

1 Department of Psychology, University of Bologna, Italy
2 Department of Primary Care & Mental Health, University of Liverpool, UK
3 NIHR ARC NWC, Liverpool, UK
4 Menzies Health Institute Queensland, Griffith University, Australia
5 Department of Psychiatry, Wroclaw Medical University, Poland
6 College of Education, Psychology and Social Work, Flinders University, Australia

Background: Social distancing rules and the closure of services associated with the COVID-19 pandemic have strongly impacted the physical and mental health of people with dementia. Digital technologies can represent an effective means to compensate for the distress associated with social distancing rules and the decreased use of in-person services. More specifically, technologies such as smartphones, tablets, and smart home systems can minimize the negative effects of social distancing and isolation, and the pressure on health and care systems. Indeed, they can provide a continuity of care and social connectedness, while decreasing exposure to risk. However, barriers such as digital literacy and lower income households can impede the access and use of digital technologies. The aim of this international study was to compare the use of technology by people with dementia from different care settings, and their informal carers across four countries (Italy, UK, Australia, and Poland).

Methods: People with dementia and informal carers were invited to participate in semi-structured interviews. Verbatim transcripts were analysed by researchers in each country using inductive thematic analysis.

Results: A total of 141 people with dementia and carers (47 in Italy; 50 in the UK; 18 in Australia; 26 in Poland) were interviewed. The analysis identified three overarching themes: 1) different uses of technology (three subthemes); 2) benefits of technology (three subthemes); 3) limitations of technology (three subthemes). Results show that calls, video calls, and group-chats were effectively used across countries to guarantee the continuity of relationships with professionals, families, and small groups of peers. Telemedicine was used with varying levels of satisfaction. Furthermore, the benefits experienced by carers exceeded those for people with dementia. Similar barriers were reported across countries, and were strictly associated with dementia deficits, low level digital literacy, and the need for carer's supervision.

Conclusions: These international findings highlight the importance to maximise the benefits related to the use of technology according to people with dementia's impairment and care context. Moreover, it should be complementary to in-person care which should be provided, at least to some extent, even during pandemic times.

Talk 4 Abstract

A cross-country comparison of family carers experiences with residential aged care facilities during the COVID-19 pandemic

<u>Katarzyna M Lion¹</u>, Clarissa Giebel^{2,3}, Ilaria Chirico⁴, Monica Cations⁵, Rabih Chattat⁴, Mark Gabbay^{2,3}, Wendy Moyle^{1,6}, Giovanni Ottoboni⁴, Marco Valente⁴

1 Menzies Health Institute Queensland, Griffith University, Australia
2 Department of Primary Care & Mental Health, University of Liverpool, UK
3 NIHR ARC NWC, Liverpool, UK
4 Department of Psychology, University of Bologna, Italy
5 College of Education, Psychology and Social Work, Flinders University, Australia
6 School of Nursing and Midwifery, Griffith University, Australia

Background: The number of research projects into residential aged care (RAC) during the COVID-19 pandemic is increasing, however there are limited data on the cross-country comparison of experiences residents living with dementia and their families. Our study aimed to 1) give an overview of the RAC restrictions and changes (visiting policy, governmental & health authorities' advice, service delivery) implemented during the pandemic in Australia, Italy and the UK and 2) and their impact on people with dementia in RAC facilities and their families.

Methods: A total of 56 informal family carers of people with dementia residing in RAC took part in semi-structured interviews over the telephone or via Skype in Australia (n=6), Italy (n=25) and the UK (n=26) between July 2020 and March 2021. The interviews were recorded and translated verbatim. Transcripts were analysed by researchers in each country using thematic analysis, then combined across sites.

Results: Inductive thematic analysis identified four overarching themes: 1) Adaptations implemented in RAC facilities due to the COVID-19 pandemic in Australia, Italy and the UK; 2) means of communication between RAC facility personnel, people with dementia living in RAC and family members; 3) impact of the implemented restrictions and changes in care provision due to the COVID-19 pandemic on people with dementia in RAC facilities and 4) impact of the implemented restrictions and changes in care provision due to the COVID-19 pandemic on families of people with dementia in RAC facilities. While differences between countries and facilities were identified, the restrictions and changes within the residential care system impacted families' well-being, increased their worries about care quality and safety of people with dementia. The consequences of a lack or modified services for people with dementia included noticeable physical and mental health changes. Although the majority of the facilities implemented some form of video-communication between families and residents, those solutions were unable to replace face-to-face contact.

Conclusions: These findings demonstrate the need for implementing safe solutions which might facilitate more frequent in-person contact between families and residents with dementia preventing consequences in mental and physical health in both groups.