facilitators to supporting wandering in the care home; and iii) support needs to implement strategies across different care home contexts.

We conducted 20 semi-structured interviews with staff members including direct care staff, registered nurses, managers, and activities coordinators. Participants were recruited from a range of care homes across North England who provide care for older adults living with dementia, using purposive sampling to recruit participants with a range of experiences. Data were analyzed using framework analysis, a form of thematic analysis.

Four main themes were identified and refined by the wider research team. The *impact of the environment* on how residents moved around the care home, the *importance of life history and personhood* for staff to understand the motivations residents had for wandering, *individual factors* that contributed to each resident's unique experiences and the importance of the *care home culture* to whether residents were supported. Participants also highlighted a range of strategies that they engage with to support residents to wander safely.

Although this was a small-scale study, conducted in one region of England, it has implications for the ways that wandering as a behavior is conceptualized and supported in care homes. The importance of language and vocabulary was highlighted and requires further consideration. The results of this study will be used to develop further work to test strategies in care homes and produce guidelines for supporting residents to wander safely.

## P79: Correlates of anticipatory grief in family caregivers of persons with dementia

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**Objective:** Anticipatory grief is frequently experienced by family caregivers of persons with dementia. It is defined as the feelings of pain and loss that appear in the caregiver prior to the death of the person cared for, and it is linked to negative consequences for the physical and psychological caregiver's health. However, more research is needed about this construct. The purpose of this work was to explore the differences regarding gender and kinship in anticipatory grief in caregivers and to explore its associations with distress experienced by the caregivers.

**Method:** The sample consisted of 70 caregivers. The anticipatory grief was measured with the Caregiver Grief Scale (CGS; Meichsner et al., 2016). Also, frequency of problematic behaviours in the person with dementia and caregiver reactions to them (RMPBC; Teri et al., 1992), depressive symptomatology (CES-D; Radloff, 1977), guilt (CGQ; Losada et al., 2010), anxiety (Tension Sub-scale of POMS's Questionnaire; Fernández et al., 2000), emotional ambivalence (CAS; Losada et al., 2017) and the experiential avoidance in caregiving (EACQ; Losada et al., 2014) were measured.

Independent-samples T-tests were conducted to study if there were differences in anticipatory grief according to the gender of the caregiver and the kinship with the person with dementia. Secondly, Pearson correlations were conducted to study the associations between anticipatory grief and emotional distress variables.

**Results:** The results showed no significative differences according to the gender of the caregiver in anticipatory grief. However, a longer caregiver's age and being a spouse caregiver was related to a greater anticipatory grief. Regarding the person cared for, behavioral problems and caregivers' reaction to them were associated with anticipatory grief. With regard to caregiver's emotional distress, significant and positive correlations were also

obtained between anticipatory grief and its subscales with depressive symptomatology, guilt, anxiety, emotional ambivalence and experiential avoidance in caregiving.

**Conclusions:** The results suggest that anticipatory grief may have a relevant role in the well-being of dementia family caregivers. Therefore, it is necessary to consider this process in the assessment and intervention in this context with caregivers.

## P80: Implicit emotional ambivalence and emotional distress in family carers of people with dementia: Exploratory study.

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**Objective:** Caring for a relative with dementia is a chronic stress situation related to negative consequences such as elevated depressive and anxiety symptoms. A possible mediator variable explored to explain pathways from chronic stress to emotional distress is emotional ambivalence towards the care-recipient (the simultaneous experience of positive and negative feelings towards the care-recipient). Emotional ambivalence, measured with questionnaires, presents significant associations with depression and anxiety in family carers of people with dementia. However, the self-report of emotional ambivalence is susceptible to being influenced by social desirability. The aim of this study is to present preliminary results that analyze implicit ambivalence and its association with emotional distress in family carers of people with dementia.

**Methods:** 54 caregivers participated in the study (mean age = 61.2, SD = 12.92, 81.5% women). To explore implicit emotional ambivalence, we adapted a sequential priming paradigm developed to measure implicit ambivalence about significant others (Zayas & Shoda, 2015). Two priming stimuli were used: a) neutral (e.g., RRR) and b) valenced prime (i.e., the name of the care-recipient). The targets were positive and negative words that participants have to categorize as positive or negative.

**Results:** A facilitation-inhibition indexes for positive and negative targets were calculated by subtracting the mean reaction time (RT) for valenced prime from the mean RT for neutral primes. Positive values show a facilitation effect of the valenced prime (i.e., the name of the care-recipient), and negative values inhibition. Participants were classified depending on their results of this indexes: a) positive (facilitation of positive information, inhibition of negative information), b) negative (facilitation of negative information, inhibition of positive information), c) flat (inhibition of positive and negative information), and d) ambivalence (facilitation of positive and negative information). ANOVAS were performed to explore differences between groups in emotional distress. The preliminary results showed that the ambivalence group might present more depressive symptoms compared with the positive group.

**Conclusion:** This is the first study that analyzed implicit ambivalence in family carers of people with dementia. The preliminary results show the relevance of exploring implicit processes to explain emotional distress in this population.