stressors and social isolation by searching and sharing various electronic resources via Wechat or Whatsapp platform throughout the trial. In addition, facilitators were able to assess caregivers' learning needs and link them with relevant care services and resources accordingly.

Conclusion: Facilitator-enabled iSupport intervention in our study demonstrated advantages of engaging caregivers in learning iSupport, applying knowledge into daily care activities, sharing experiences with and supporting other caregivers.

Keywords:

Dementia, family caregivers, facilitators, internet-based dementia caregiver education, virtual caregiver support group

iSupport Swiss: a community based participatory approach to culturally adapt the WHO online intervention for family caregivers of people with dementia

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Objective: Informal caregivers of people with dementia are at high risk of developing mental and physical distress because of the intensity of the care provided. iSupport is an evidence-based online program developed by the World Health Organization (WHO) to provide education and support to informal everyday care. The study aims to describe the process and results of iSupport cultural adaptation in Switzerland.

Methods: We used a mixed-methods design, with a community based participatory research approach. The adaptation of iSupport followed WHO adaptation guidelines and developed into five steps: content translation, linguistic and cultural revision by the members of the Community Advisory Board, validation with health professions faculty, validation with formal and informal caregivers, and fidelity check appraisal by members of the WHO.

Results: Findings from each phase showed and consolidated the adjustments needed for a culturally adapted Swiss version of iSupport. We collected feedback and implemented changes related to the following areas: language register and expressions (e.g., from *lesson* to *chapter;* from *suffering from dementia* to *affected by dementia*); graphics and illustrations (e.g. from generalized objects' illustrations to featured humans' illustrations); exercises and case studies (e.g., from general, non-familiar scenarios to local and verisimilar examples); and extra features to add to the online version (e.g., short tailoring assessment questionnaire, interactive forum section, glossary). Additionally, based on the suggestions from the interviews with health professions faculty, we also created a training of trainers (ToT) version of iSupport for health care professionals.

Conclusion: Our results show that adopting a community based participatory approach and collecting lived experiences from the final users and stakeholders is essential to meet local needs and to inform the further development, testing and implementation of an online evidence-based intervention to a specific cultural context.

Keywords:

Informal caregivers, iSupport, dementia, online interventions, community based participatory research

Digital technologies in ISupport implementation in Russia

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