

**Conclusion:** Our findings suggest that the association between neuroticism and cognitive outcomes may be mediated by aspects of social connection and differ by sex. Understanding if and how modifiable risk factors mediate the association between personality and cognitive outcomes would help develop and target intervention strategies that improve social connection and brain health.

### **FC31: Profiles of dementia caregivers according to psychosocial variables. Importance of kinship.**

**Authors:** Cristina Huertas-Domingo, MA, Andrés Losada-Baltar, PhD, Laura Gallego-Alberto, PhD, Inés García-Batalloso, MA, Laura García-García, MA, and María Márquez, PhD.

**Objectives:** Caring for a family member with dementia may have important negative psychological consequences on caregivers. The present study aims to analyze the existence of different profiles in family caregivers of people with dementia according to the levels manifested in different psychosocial variables, which are grouped into psychosocial variables (dysfunctional thoughts, familism, experiential avoidance) and resources (leisure and social support). In addition, it aims to study whether there are differences among those profiles in the levels of distress (depressive, anxious and guilt symptomatology) depending on the relationship of kinship with the cared-for person.

**Methods:** 288 family caregivers of people with dementia divided into four kinship groups (wives, husbands, sons and daughters) participated. Face-to-face interviews were conducted assessing sociodemographic variables, familism (family obligations), dysfunctional thoughts, experiential avoidance, leisure activities, perceived social support and depressive, anxious and guilt symptomatology. A hierarchical cluster analysis was performed using Ward's method and contingency tables were run between the clusters obtained and the variable of kinship and distress variables.

**Results:** Five clusters were obtained: *Low psychosocial vulnerability-High resources* (mostly daughters), *Low psychosocial vulnerability-Low resources* (mostly daughters), *Mixed* (mostly sons), *High psychosocial vulnerability-High resources* (mostly husbands) and *High psychosocial vulnerability-Low resources* (mostly wives). Although with nuances, the clusters associated with lower distress are the Low psychosocial vulnerability-High resources profile and the High psychosocial vulnerability-High resources profile, and with higher distress the Low psychosocial vulnerability-Low resources profile and the Mixed profile.

**Conclusions:** High levels of dysfunctional thoughts, familism and experiential avoidance are not always associated with greater psychological distress. In fact, profile 2 (Low psychosocial vulnerability-Low resources), in which most caregiving daughters are distributed, seems to be particularly vulnerable to presenting higher levels of emotional. Therefore, the identification of profiles of potential protection and vulnerability to psychological distress in family caregivers could help to increase the effectiveness of interventions aimed at this population.