

Family Caregiver Support Apps: Questionable Evidence, Content, Security, & Unmet Needs

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BACKGROUND

As the number of family caregivers of older adults has increased, so has the need for informational support resources to help educate family caregivers on geriatric needs and the caregiving journey. As a result, there has been a growth of mobile apps and linked websites offering paid advice and information to family caregivers seeking support. We sought to characterize family caregiver support apps specifically examining the content, evidence-base, security, and incurred costs.

METHODS

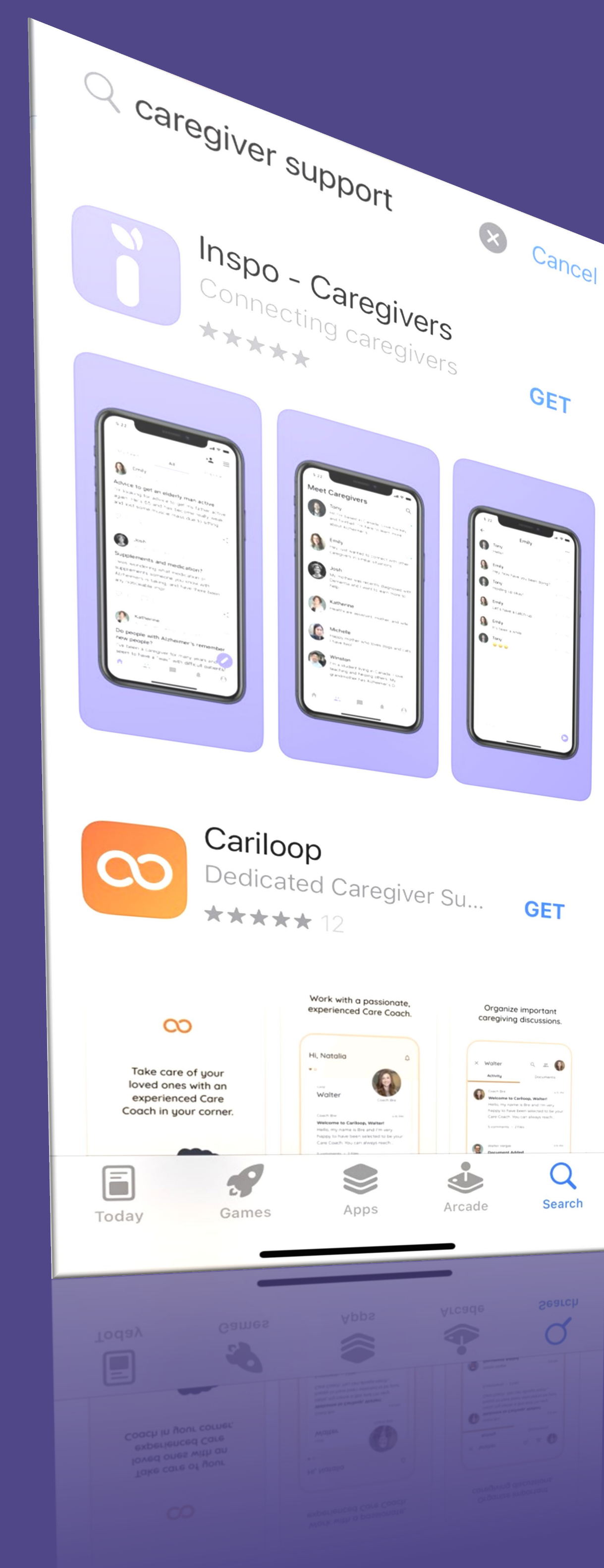
An interdisciplinary team of area agency on aging (AAA) nurse leader, gerontology-focused social worker, and geriatricians utilized common search engines to identify family caregiver support mobile apps and linked websites.

To be included in the review, mobile apps had to be available either in the Apple App or Google Play store. Details (e.g., content, source of material, ownership background, evidence-based, security, cost, reviews) were collected on each of the apps. Customer reviews were also analyzed for each of the apps. When possible, caregiver support app companies were contacted to complete and verify details. Qualitative analysis was completed using three coders who used the framework method.

Family caregivers seek and pay for support apps to assist them in caring for their older adult loved ones.

In examining nationally available caregiver-support apps, we found many were developed by non-healthcare professionals, lacking geriatric and caregiving expertise.

Several apps stated they were “evidence-based” but were not.



Minimal Caregiving Experience

No Healthcare Expertise

No Data Security

Lack of Evidence

Expensive

RESULTS

Of the 23 caregiver support apps identified, 19 were available in either the Apple App or Google play store. Content of the 19 apps included informational resources, medication reminders, shared calendar, and social networking.

Ten did not provide any data security information and four were cloud-based. Three stated they were 'evidence-based' with one producing a small qualitative study as evidence of its effectiveness. The average customer rating was 2.7/5 across all apps. Content producers/owners were frequently non-healthcare professionals, lacked expertise in caregiving and/or geriatric training. Several were created by family caregivers with only a solo caregiving experience.

Coders identified most apps had gaps in resources, usability, and functionality, that did not meet the support needs of caregivers.

CONCLUSION

Family Caregiver Support apps created to assist with caring for older adults were found to be inconsistent with the support offered as well as the data security. Questions remain about the effectiveness of these apps in supporting family caregivers. Research is needed to help family caregivers and AAAs vet and identify apps that effectively support quality care of older adults and provide support to caregivers who may be struggling in their caregiver role.

FINANCIAL DISCLOSURE

Murawski/Lindquist are funded through the National Institute on Aging, R01AG068421, R01AG05877, and Northwestern Pepper Center P30AG059988.

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