“Partnering with Poise”: Alexander technique group classes for care partners of people living with Parkinson’s disease

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Research Objectives: To investigate whether Alexander technique group classes would provide psychological or physical benefit for older women who are care partners for people living with Parkinson’s disease.

Interventions: Alexander technique (AT) is an educational approach that seeks to reduce over-activation of muscles through inhibition of unproductive habits. Though traditionally delivered one-to-one in private practices, these AT group classes were designed as an intervention for care partners of people living with Parkinson’s to: a) counter care partner isolation; b) allow peer to peer learning in a community-based setting; c) encourage continuation of gains through independent peer interactions post-course; and d) remove economic barriers to access through a cost effective form of delivery. The course was funded by a Parkinson’s Foundation Moving Day® NC Triangle Community Grant and was free to participants.

Design: Single group pilot study. Participants completed 10 weeks of AT classes (90 minute meetings, once per week) with testing before and after. Additional testing done after 3 months and 6 months.

Setting: AT group classes were held in non-clinical settings, in Concord NC at the Cabarrus County Senior Center between September and November 2017, and in Asheville NC at the Groce United Methodist Church between September and November 2017. Data collection assessments took place on site and surveys and evaluation forms were completed at home.

Participants: Seventeen female participants (aged 67 +/- 6 years) completed the study. Most were white, non-Hispanic college graduates, retired from white-collar jobs, and caring for spouses/partners.

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Main Outcome Measure(s): The main outcomes were posture in the sagittal plane (assessed by photographs with markers on tragus, c7, and sternal notch), balance (assessed by mini-BEST), caring burden (Zarit Burden Interview) and self-efficacy.

Results

Two participants dropped out of the class, both citing changes in their schedules, with one additionally citing discomfort with aspects of group interaction. Among the 15 who completed the classes, posture was marginally more upright (4 degrees, p=.06) and balance was significantly better (1.9 points, p=.002) after the class than before. Perceived burden was non-significantly reduced (4.6 points, p=.14) and self-efficacy was non-significantly increased (1.2 points, p=.38).

Conclusions

Group AT courses appear to be an innovative, cost-effective and feasible intervention for older women. Participants reported that they enjoyed the classes, learned some practical tools to help care for themselves physically and emotionally, and their objectively assessed balance improved.