Alliance
FOR AGING RESEARCH

Caring Together:
Empowering Families and Health Professionals with Tools for Better Neuropsychiatric Symptom Care

Table of Contents

Executive Summary

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Diseases and injuries that damage the brain can impact the way we interact with the world — and often lead to significant behavioral and psychological symptoms. These symptoms, known as neuropsychiatric symptoms (NPS), are common with Alzheimer's and related diseases, and include anxiety, depression, agitation, apathy, psychosis, sleep disturbances, and wandering. Such symptoms are often misunderstood to be behavioral problems — as though the people living with symptoms can turn them on or off at will — but the reality is that these symptoms are medical manifestations of the underlying neurodegenerative disease that can significantly impact daily life. For the person experiencing them, neuropsychiatric symptoms can be scary, confusing, disorienting, difficult to navigate, and can increase the risk of injury, mortality, and earlier institutionalization.

NPS are also a driver of caregiver distress — a survey released by the Alliance for Aging Research (Alliance) found that 93% of people caring for someone with Alzheimer's disease who experiences agitation report feeling overwhelmed or emotionally drained.[1] The health of these caregivers also suffers: 48% report difficulty sleeping and close to a quarter note a decline in their own physical health.[2] And too often, caregivers feel alone in managing NPS as they have limited guidance about how to respond to needs that may arise. Individuals, families, caregivers, and clinicians need practical tools such as navigation support, respite options, peer support, and clear clinical communication pathways to best support those in their lives who are impacted by NPS.

In December 2025, the Alliance for Aging Research and the National Alliance for Caregiving co-convened a virtual summit, "Caring Together: Empowering Families and Health Professionals with Tools for Better Neuropsychiatric Symptom Care." This interactive summit brought together a range of experts, caregivers, healthcare professionals, and people with lived experience to share real-world stories, practical tools, and evidence-based strategies.
The sessions featured:

Sue Peschin, MHS, President and CEO, Alliance for Aging Research

Jason Resendez, President and CEO, National Alliance for Caregiving

Carolyn Clevenger, DNP, RN, GNP-BC, AGPCNP-BC, FAANP, FGSA, FAAN, Dean, University of Georgia School of Nursing

Bonne Wattles, Executive Director, Hilarity for Charity

Daniel Pace, BS, CHCP, Chief Development Officer, American Academy of Physician Associates

Jennifer Pettis, MS, RN, CNE, Director of Strategic Alliances, Gerontological Society of America

Monica Moreno, Senior Director of Dementia Care Navigation, Alzheimer's Association

Jim Taylor, MBA, President and CEO, Voices of Alzheimer's

Amy Stewart, MSN, RN, RAC-MT, RAC-MTA, DNS-MT, QCP-MT, Chief Nursing Officer, American Association of Post-Acute Care Nursing (AAPACN)

Jay Reinstein, Patient Advocate

Chad Worz, PharmD, BCGP, Executive Director and Chief Executive Officer, American Society of Consultant Pharmacists (ASCP)

The summit sessions underscored that there are many resources and strategies to help with neuropsychiatric symptoms. The summit's audience included policymakers, caretakers, people living with Alzheimer's or related diseases, and others. To better support those with NPS and guide next steps, polls were conducted throughout the webinar to capture their perspectives and knowledge. This report highlights their voices and the resources shared to better equip caregivers and care teams with useful tools to support individuals with NPS. Additional resources on NPS can be found at www.agingresearch.org/NPS.

The summit and this resource would not have been possible without support from Lundbeck and Otsuka.

Words of Wisdom

"This event brings together family caregivers, clinicians, researchers, policy leaders, and people with lived experience, all united by the same goal: improving care and quality of life for those living with neuropsychiatric symptoms."

Sue Peschin, MHS, President and CEO
Alliance for Aging Research

Understanding NPS

What are Neuropsychiatric Symptoms? (And Why They're Not "Just Behavior")

Neuropsychiatric symptoms (NPS) can present in many ways in people who have Alzheimer's and related diseases, often appearing before memory loss and other cognitive decline. These symptoms impact as many as 97% of people with Alzheimer's and related diseases.[3] They can include (but are not limited to):

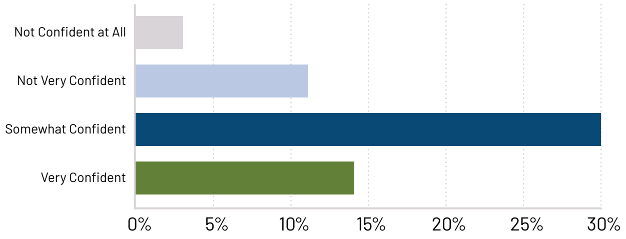
- **Agitation:** Excessive activity, restlessness, pacing, verbal or physical aggression[4]
- **Apathy:** Loss of motivation, initiative, and emotional reactivity; and not enjoying or finding pleasure in things that used to bring pleasure[5]
- **Depression:** Social withdrawal, irritability, lack of appetite, and disruption of sleep; may look like a mood disorder[6]
- **Anxiety:** Emotional apprehension, excessive worry, restlessness, and physical symptoms of tension[7]
- **Sleep disorders:** Daytime drowsiness, reversed sleep cycles, sundowning, and other disruptions to sleep from changes in the brain[8]
- **Psychosis:** Delusions and hallucinations that are often visual but can be auditory and tactile[9]

Check out the Resource Guide for additional information about NPS and understanding them. For a list of educational resources and personal stories about NPS, check out AAR's additional resources.

Survey Says:

Despite how common NPS are, a poll conducted during the virtual summit found that only 30% of the audience were somewhat confident in their ability to recognize NPS, and fewer than 15% were very confident.

How confident do you feel in your ability to recognize neuropsychiatric symptoms?



NPS in Context: Why Does Proper Treatment Matter?

Family caregivers tend to be more aware of memory loss in Alzheimer's and related conditions. However, because of the lesser-known nature of the severity of NPS, caregivers may be less prepared to help the individual they are caring for manage their neuropsychiatric symptoms. These symptoms can cause significant physical, mental, and emotional strain and frequently require additional resources or support, adding another layer of stress for caregivers.

> NPS strains caregivers and impacts the care they can give:
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> 
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> **1 out of 3 caregivers who care for someone experiencing agitation**, a common NPS, are reluctant to speak with a healthcare provider due to guilt or fear.[10]

> Many of these caregivers must also sacrifice their personal and professional lives:
>
> 
>
> **25% reported quitting their jobs or working fewer hours** to accommodate caregiving duties,[11] which can create additional stressors related to paying for and accessing support.

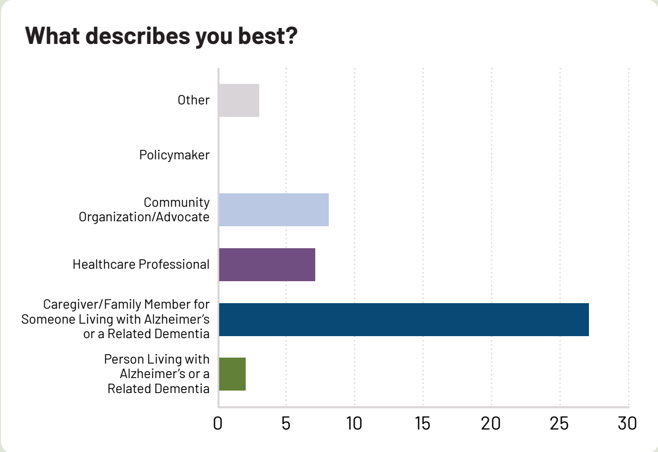
In addition, survey research shows that clinicians often neither ask patients nor their family caregivers about NPS nor proactively provide information about them. In some individuals, NPS can emerge early, even before noticeable cognitive decline, and may signal more rapid disease progression. Because these symptoms do not present uniformly and are often stigmatized as purely behavioral issues that individuals should be able to turn on or off at will, they can be particularly difficult to manage. This stigma, combined with their variability, can also be deeply isolating, especially for family caregivers who shoulder much, if not all, of the responsibility for care.

Because NPS are often progressive, they can become increasingly difficult for individuals and family caregivers to manage at home, and worsening symptoms may accelerate institutionalization. Yet health systems and long-term care facilities are often under-equipped or constrained by regulatory requirements that impede the quality of care for residents experiencing NPS. Nursing homes, in particular, are subject to Medicare quality measures designed to curb inappropriate medication prescribing, which have been found to unintentionally impede access to appropriate treatment and increase the risk of involuntary discharge in some cases.

Given their profound impact on individuals and caregivers, NPS require dedicated, proactive recognition and intervention — not just reactive crisis management. Fortunately, advancements in NPS detection, as well as both nonpharmacologic and pharmacologic strategies, are available today. However, awareness remains essential, and advancing it will require us all to work together.

Survey Says:

The majority of summit participants were found to be caregivers who revealed their desire and interest in understanding NPS symptoms — clearly underscoring the need for comprehensive information and resources on NPS.



Words of Wisdom

> **"NPS are very common and it is almost universal for people who are living with Alzheimer's disease to experience one of these at some point in their journey... Recognizing NPS as medical symptoms promotes empathy, clinical intervention, and proactive management."**

Carolyn Clevenger, DNP, RN, Dean
University of Georgia School of Nursing

The Reality of Caregiving: Scale, Strain, and System Gaps

Caregivers are an essential part of the healthcare network. There are over 63 million unpaid caregivers who provide support to friends and loved ones in the United States, with around 25% of those caregivers providing care to someone with Alzheimer's or a related disease.[12]

~⅔ Caregiving can be an intensive task — nearly **two-thirds of caregivers report moderate to high emotional stress**,

~½ **almost half experience physical stress**, and

¼ **one in four report feeling isolated** in their caregiving role.[13]

Caregiving can also be a costly endeavor; the out-of-pocket cost for caregivers of people with Alzheimer's and related diseases has reached **nearly $9,000 a year**.[14]

In addition to the personal care strains of caring for individuals with Alzheimer's and related conditions, family caregivers must manage increasingly complex medical responsibilities, including medication management, navigating complicated insurance systems, and overcoming access barriers. They are expected to educate themselves about their loved one's condition, respond to evolving symptoms, and cope with the emotional weight of the diagnosis — all at once. Although caregivers serve as the first line of care when a loved one becomes ill, they are often overlooked in resource allocation and information-sharing. Only about one in five caregivers has received any formal training. Given that they are frequently the primary source of care, greater investment in education, resources, and structured assistance is needed to help caregivers manage NPS effectively.

Although the work can be extremely difficult, many caregivers also find great meaning and purpose in the support they provide. We all have a shared responsibility to ensure these individuals have access to the resources, systems, and policies that recognize their contributions, honor their commitment, and support their well-being.

Words of Wisdom

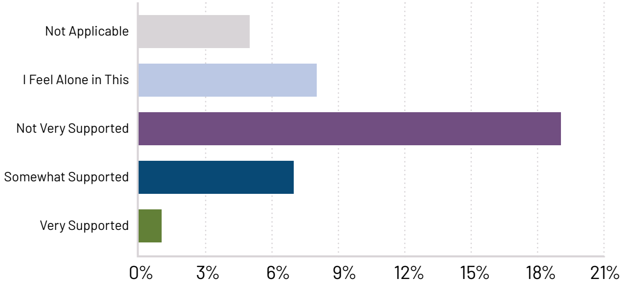
"Half of all caregivers tell us that their role gives them a deep sense of purpose. That's not denial. That's resilience. That's love showing up even when it's hard."

Jason Resendez, President and CEO
National Alliance for Caregiving

Survey Says:

Nearly half of all respondents shared that they do not feel very supported and 20% feel alone in navigating NPS symptoms.

How supported do you feel navigating neuropsychiatric symptoms?



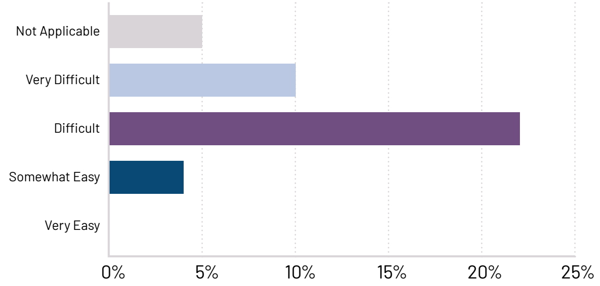
What You Can Do: A Practical Toolkit for Earlier Recognition and Better Support

Caregivers have many opportunities to build a strong, coordinated support toolkit. This includes care teams, which are often composed of healthcare professionals from diverse backgrounds who collaborate to provide clear, comprehensive guidance to caregivers. Because caregivers also need support for their own well-being, this team-based setup makes it easy for them to seek assistance or advice from any member of the care team, ensuring accessible and continuous support.

Survey Says:

More than 20% of individuals participating in the summit reported that they found it very difficult to get help while caring for someone living with NPS.

How easy or difficult has it been to get help for you or a loved one living with neuropsychiatric symptoms?



Caregiver-Friendly Identification and Better Clinical Conversations

Providing family members with meaningful and accessible evidence-based information can help them initiate thoughtful conversations with healthcare providers about NPS and make the most of what are often short office visits.

At the start of the disease journey, caregivers can use practical tools to identify agitation and cognitive decline before a formal diagnosis, organize their observations, and initiate informed conversations with healthcare providers. The [Agitation in Alzheimer's Screening for Caregivers (AASC) tool] is an online quiz that caregivers complete and share with clinicians to initiate dialogue about whether a person living with Alzheimer's or a related disorder is experiencing symptoms of agitation. Relatedly, the [KAER (Kickstart, Assess, Evaluate, Refer) Toolkit for Brain Health] is another online resource that guides clinicians and care teams in proactively identifying cognitive impairment and connecting individuals to appropriate community supports and services.

Together, these tools empower caregivers to move from uncertainty to action with structured, clinically relevant information. By strengthening early symptom recognition, they can support caregivers over the long term, promote timely intervention, improve outcomes, and reinforce caregivers' ability to advocate effectively for their loved ones.

Words of Wisdom

"Imagine if families had guidance on what to do next, what to expect, and how to plan for the future."

Monica Moreno, Senior Director of Dementia Care Navigation
Alzheimer's Association

Programs to Reduce Caregiver Burnout and Strengthen Support Networks

Caregiving can be hard work, but targeted resources can ease that burden. Respite care offers temporary relief by offering short-term support for the person receiving care, giving families time to rest and recharge. Community education programs help deepen caregivers' understanding of NPS, while peer support networks create dedicated spaces for caregivers to connect, share experiences, and access practical guidance.

More structured initiatives also make a measurable impact. Hilarity for Charity's (HFC) Caregiver Respite Program provides financial assistance that allows caregivers to secure in-home care, enabling and empowering them to take essential time and space to recharge. HFC's results are significant and prove that they really make a difference. 93% of grant recipients reported improved stress management; 76% say the support helps them manage their own medical and financial needs; and 96% report that it helps them handle daily personal activities.[15] These outcomes underscore the tangible value of respite care.

HFC also offers a Caregiver Road Trip tool that helps younger caregivers learn about the different types of Alzheimer's and related diseases, build a caregiver action plan, and explore options to support them in that role. Additionally, programs like HFC's online support groups give caregivers better coping tools and skills.

Specific community engagement programs can help families plan care for different types of Alzheimer's disease and build support networks while caring for loved ones. Many of these support groups are free, peer-led, offer virtual meeting options, or focus on specific disease topics. Specialized support groups can provide something for every type of caregiver, regardless of their stage of life or background. In fact, caregivers who participated in HFC's support groups noted that they improved their well-being, helped them maintain a positive outlook on caregiving, and made them feel more emotionally prepared to provide care.[16]

Caregiving shouldn't be isolating. These resources aim to help.

Words of Wisdom

"Support groups have been so important in my journey because to have conversations with people that are going through similar things as I am, it makes you feel like you're not alone."

Jay Reinstein, Patient Advocate

Care Navigation: Supporting Families After Diagnosis

After a loved one receives a diagnosis, most caregivers experience tremendous pressure and uncertainty — often with no clear next steps. Resources can be difficult to navigate, clinical support can vary, and support and education can be hard to find.

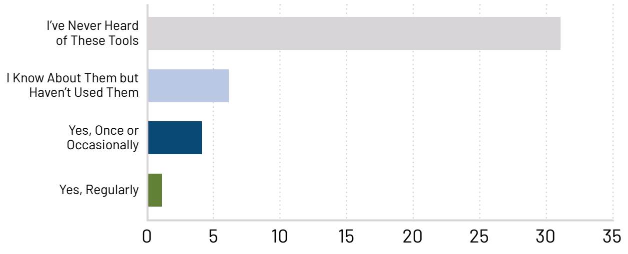
However, there are navigation resources designed to help caregivers. Individuals trained as dedicated navigators can help guide caregivers through potential resources and respite programs. Clinical support is available to support those with NPS, encouraging routine exams and check-ins and even assembling a healthcare team that can provide comprehensive care. 24/7 support lines and online resources are available to provide information to caregivers at any time. Respite grants and programs are provided as options for caregivers who may need time to run errands or time to take care of themselves.

All of these options are integrated into tools such as the Neuropsychiatric Symptoms Associated with Alzheimer's toolkit, which guides clinicians and caregivers on post-diagnosis care and support by providing information on NPS and their impact on day-to-day life. The GUIDE (Guiding an Improved Dementia Experience) Model also helps people stay at home by supporting caregivers with 24/7 navigation, support line services, training services, respite services, and cost assistance for those enrolled in Medicare and Medicaid. The Alzheimer's Association's Dementia Care Navigation Service also lets individuals with Medicare coverage explore and access personalized dementia care for free, including a dedicated care navigator and tailored resources.

Survey Says:

A majority of respondents shared that they had never used any formal tools to assess or track NPS.

Do you or have you ever used any formal tools to assess or track neuropsychiatric symptoms (like NPI-Q, KAER, or Road Map resources)?



Medication Safety and Team-Based Monitoring

Caregivers need the support of a team when caring for a loved one with NPS. Quality care for an individual with NPS includes a team of informed healthcare professionals, including primary care physicians and any specialists the patient may need to see.

Consultant pharmacists, also known as senior care pharmacists (SCPs), play a critical role on this team. As medication therapy management experts, they provide guidance on medication use for older adults, whether they live in the community or in long-term care facilities. Beyond medication oversight, SCPs often assist families with broader care needs and are well-connected to a wide range of community resources — strengthening the overall support network around both the patient and the caregiver.

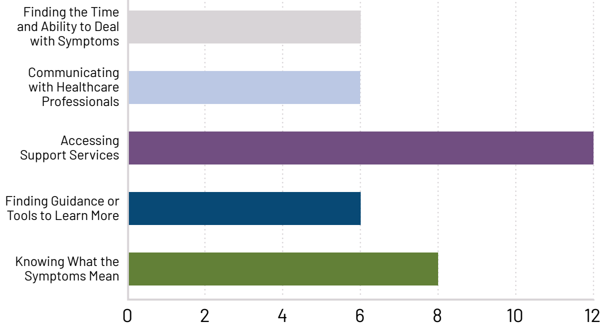
Words of Wisdom

> **"Alzheimer's is a difficult disease, especially in the late stage. But there are many years in which it can be a very rewarding journey if the person living with the disease is involved in care."**
>
> **Jim Taylor, President and CEO**
> **Voices of Alzheimer's**

Survey Says:

Participants reported facing numerous challenges in managing and responding to NPS, most notably with accessing support services.

What's the biggest challenge you face in managing or responding to neuropsychiatric symptoms?



Regulatory and Quality Oversight: How Can We Protect Patients Without Blocking Appropriate Care?

Although families turn to care facilities for extra help in caring for a loved one, many of these facilities are limited by policies on how they can care for people with NPS.

Long-stay quality metrics from the Centers for Medicare and Medicaid Services for nursing homes and long-term care facilities are well-intentioned but can be short-sighted and limit treatment plans and care management. For example, some policies that monitor the number of patients on certain medications can overshadow clinical judgment — even when certain patients may need that medication and care.

Additionally, nursing homes and assisted living facilities are often led by policies that can make it difficult to use certain medications if they require additional reporting. These added hurdles may unintentionally steer providers toward other medications.

It is vital that patients receive the care they need when they need it. Policymakers should ensure that those who need care in assisted living facilities have this right by reforming these policies to put patients first.

Words of Wisdom

"[NPS] is not like treating a condition like blood pressure or cholesterol, where you have a very specific target and a very specific drug. It involves the art form of treating people and really getting to know their symptoms and their behaviors."

Dr. Chad Worz, Executive Director and Chief Executive Officer
American Society of Consultant Pharmacists

Principles for Patient-Centered Oversight

There are several measures that healthcare professionals and caregivers can take to ensure that those affected by NPS are diagnosed, treated, and cared for appropriately. This can include:

- **Requiring and encouraging symptom assessment and differential diagnosis —** By encouraging individuals to test for multiple diseases or illnesses, caregivers and healthcare providers can more accurately diagnose, rule out other conditions, and provide the most appropriate care.
- **Ensuring the use of non-pharmacologic strategies and caregiver-informed plans with clear escalation pathways —** Not every care plan needs a pharmacologic intervention. Caregivers and healthcare providers should be encouraged to work together to create care strategies informed by an individual's needs and signals for when symptoms or care needs escalate.
- **Promoting shared decision-making that meaningfully centers and engages caregivers —** Caregivers spend much of their time with the ones they care for. Engaging them in important decisions and conversations allows individuals with NPS to receive the care they need.
- **Requiring ongoing monitoring for medication safety, efficacy, and side effects —** Facilities should be empowered to continuously monitor the unique needs of different individuals and support facility readiness through training and person-centered care approaches.
- **Highlighting the central role of NPS in Alzheimer's and related diseases —** Up to 97% of individuals with Alzheimer's and related diseases experience NPS.[17] Although NPS are incredibly widespread, many individuals remain unaware of the symptoms after diagnosis. Practical, evidence-informed solutions need to be created to highlight the prevalence of NPS and make sure that caregivers and individuals with Alzheimer's and related diseases know the signs and symptoms.
- **Ensuring oversight supports and doesn't impede appropriate care —** Regulation and quality measurement should protect patients while avoiding unintended barriers to individualized treatment.
- **Promoting a unified plan for caregivers —** As a caregiver, there are many things to be aware of when seeking a diagnosis. Some things that are helpful to track and bring to medical appointments can include:
  - Tracking timing of symptoms, symptom triggers, and patterns
  - Requesting cognitive screenings and wellness evaluations as needed to rule out other conditions, such as thyroid conditions or depression
  - Engaging with potential support groups, respite programs, caregiver education resources, and resources that inform one how to navigate diagnosis and disease
    - Working with a provider while understanding that symptoms can vary and be different per person can help promote flexibility and adaptation for both caregivers and the ones they care for. Knowledge and resources can help families understand NPS and its impacts.

Words of Wisdom

"You are the best advocate for your patient or your loved one... It's okay to push, advocate, and work with physicians to get the treatment that is best suited for your loved one. It's person-centered care, not facility-centered care."

Amy Stewart, Chief Nursing Officer
American Association of Post-Acute Care Nursing

Resource Guide

Below, we've compiled some helpful resources, focused on helping and supporting caregivers as they navigate caring for loved ones with NPS:

Resource	Description
Agitation in Alzheimer's Screening for Caregivers (AASC) Questionnaire	An online quiz that allows caregivers and healthcare professionals to understand whether symptoms of agitation may be present in individuals with Alzheimer's and related diseases.
Alzheimer's Association's Dementia Care Navigation Service	An online service offering dedicated care navigators and personalized resources for individuals living with Alzheimer's and related dementias who have Medicare coverage and their caregivers.
Center for Medicare and Medicaid's (CMS) GUIDE (Guiding an Improved Dementia Experience) Model	A service that allows people to stay at home by supporting caregivers with 24/7 care navigation, support line services, training services, respite services, and cost assistance for those enrolled in Medicare and Medicaid.
Hilarity for Charity's CareCon	A free, virtual event designed to educate, inspire, and empower family caregivers of individuals with Alzheimer's or related diseases with support, knowledge, and community.
Hilarity for Charity's Online Support Groups	Free, online support groups for caregivers that are led by credentialed social workers and trained leaders.
Hilarity for Charity's Caregiver Road Trip	An online tool that helps younger caregivers learn about types of Alzheimer's and related diseases by creating a plan with options to support them in that role.
Hilarity for Charity's Caregiver Respite Program	A program which provides caregivers with funds to provide temporary relief for primary caregivers, giving them time to take care of themselves.
Gerontological Society of America's KAER (Kickstart, Assess, Evaluate, Refer) Toolkit for Brain Health	An online toolkit that can help foster proactive identification of cognitive impairment and refers to community supports and services.
American Academy for Physician Associates' Neuropsychiatric Symptoms Associated with Alzheimer's Toolkit	A guide for clinicians and caregivers on post-diagnosis care and support that provides information on NPS and the impact of those symptoms on day-to-day life.

The Alliance for Aging Research also offers a range of educational videos to help caregivers and other individuals learn about NPS from leading experts. These resources include:

Resource	Description
Caring for a Loved One With Alzheimer's Disease and Neuropsychiatric Symptoms Video Series • Anxiety and Depression • Agitation • Apathy • Sleep Disturbances • Psychosis • Wandering	Join Carolyn Clevenger in this video series as she breaks down six of the most common NPS, including what to expect and how to get the support that everyone deserves.
Expert Conversations on Neuropsychiatric Symptoms of Alzheimer's Video Series • Terrie Montgomery, Patient Advocate Living with Alzheimer's • Shon Lowe, Family Caregiver and Advocate • Carrie Shaw, MS, Family Caregiver, CEO & Founder, Embodied Labs • Carolyn Clevenger, Geriatric Nurse Practitioner, Director, Integrated Memory Care Clinic, Emory University	These videos highlight expert conversations with clinicians, family caregivers, and people living with Alzheimer's disease. They aim to shake the stigma of talking about NPS and help people create a care plan to get the support they deserve.
Expert Conversations on NPS: Carolyn Clevenger Video Series	Join Carlyn Clevenger as she explores topics and options policymakers can implement to improve care for those with NPS.

Continued on next page...

Expert Conversations on NPS: Carrie Shaw Video Series	Join Carrie Shaw as she explores her personal experience with caring for a family member experiencing NPS and what new technologies exist for healthcare providers and care facilities to improve care.
Shake the Stigma of Neuropsychiatric Symptoms, Explained in 60 Seconds	This 60-second video addresses why we need to shake the stigma and recognize NPS as a medical condition that can be treated to lessen the burden of already devastating diseases.
The Other Symptoms of Alzheimer's Disease	This short film addresses why we need to shake the stigma and recognize NPS as a medical condition that can be treated to lessen the burden of already devastating diseases.

Words of Wisdom

> **“When we equip families with knowledge, when we give clinicians better frameworks, and when we create space for honest conversations about what neuropsychiatric symptoms actually look like and what can help, we’re not just managing the disease, we’re honoring the humanity of everyone involved in care.”**

Jason Resendez, President and CEO
National Alliance for Caregiving

Closing remarks

The Alliance for Aging Research sincerely thanks the many panelists for their time and extends a heartfelt thank you to the event sponsors, Lundbeck and Otsuka. The Alliance encourages you to explore all the tools outlined in this report and to visit www.agingresearch.org/NPS for more information.

Together, we can remove the stigma surrounding NPS and help those most impacted by NPS — as well as those caring for them.

1. Alliance for Aging Research, New Survey Reveals Critical Gaps in Awareness and Understanding of Agitation in Alzheimer’s Dementia
2. Alliance for Aging Research, New Survey Reveals Critical Gaps in Awareness and Understanding of Agitation in Alzheimer’s Dementia
3. National Library of Medicine, Understanding neuropsychiatric symptoms in Alzheimer’s disease: challenges and advances in diagnosis and treatment
4. Alzheimer’s Association, Anxiety and Agitation
5. Cleveland Clinic, Apathy
6. Mayo Clinic, Depression (major depressive disorder)
7. American Psychological Association, Anxiety
8. Mayo Clinic, Alzheimer’s: Managing sleep problems
9. Cleveland Clinic, Psychosis
10. Alliance for Aging Research, New Survey Reveals Critical Gaps in Awareness and Understanding of Agitation in Alzheimer’s Dementia
11. Alliance for Aging Research, New Survey Reveals Critical Gaps in Awareness and Understanding of Agitation in Alzheimer’s Dementia
12. National Alliance on Caregiving, Neuropsychiatric Symptoms Summit
13. American Psychiatric Association, Supporting the Mental Health of Family Caregivers
14. AARP, Caregiving Can Be Costly — Even Financially
15. Hilarity for Charity, Neuropsychiatric Symptoms Summit
16. Hilarity for Charity, Neuropsychiatric Symptoms Summit
17. Practical Neurology, Neuropsychiatric Aspects of Alzheimer’s Disease