

psychometric properties of the scale, as well as significant correlations between the different styles of caring and characteristics of the PWD, caregivers' gender and kinship with the PWD, depression and anxiety symptoms, quality of the dyad relationship and expressed emotion. Implications for caregiving research and for the development of effective interventions to alleviate caregivers' distress will be discussed.

P109: The role of family caregivers' emotional complexity in their relationship with the person with dementia and their emotional well-being and distress.

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Objective: Research in informal dementia caregiving has focused on the negative outcomes it implies as a chronic stress situation, even though positive feelings derived from the caregiving experience are also reported. This co-occurrence of positive and negative experiences is a form of emotional complexity that has barely been explored in caregivers although it could be relevant for understanding caregivers' vulnerability to distress. To explore this emotional complexity, profiles of caregivers according to their levels of positive and negative affect were created and compared with regard to their reported anxiety, ambivalence feelings, experiential avoidance, quality of the actual relationship, thoughts of institutionalizing the person with dementia (PWD), and social support.

Methods: 363 primary family caregivers were distributed in groups based on their reported depressive feelings and positive emotions related to caregiving and the PWD. Four groups were identified: (1) flat (low negative affect, low positive affect), (2) negative (high negative affect, low positive affect), (3) positive (low negative affect, high positive affect), (4) mixed (high negative affect, high positive affect). ANOVAS were performed to explore differences between groups.

Results: Caregivers in the positive and mixed profiles reported better actual relationships with the PWD and higher experiential avoidance. Caregivers with both negative and mixed profile showed higher anxiety than the other profiles, and the negative profile also reported higher thoughts about institutionalizing the care-recipient and more ambivalence. Caregivers in the positive group reported the highest social support.

Conclusion: The obtained findings converge in the idea that caregivers' positive emotions towards the PWD are closely related to the quality of the relationship, and may be involved in a delayed decision to institutionalize her/him. The presence of negative affect (depressive feelings) is associated with anxiety symptoms, even when positive emotions are reported, supporting the high prevalence of anxiety-depressive comorbidity in this population. Finally, the negative profile (low positive and high negative affect) is the one that reports more ambivalence. Taken together, these findings suggest that caregiving for PWD should be considered an emotionally complex situation with positive affect derived from the caregiving being key in understanding caregivers' well-being and distress.

P110: Development and validation of the Relationship Quality Scales in Caregiving (RQSC): preliminary results.

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