

Approaches based on difficulties	Module title and objectives
Role transition-based intervention 1-Adapt to the new role 2-Need for help 3-Knowing the available services	<i>Portrait of my loved one</i> To put the disease into perspective. To have a more global view of the person with dementia to increase their feeling of identity.
	<i>Managing difficult situations</i> To analyze and understand the meaning of the behavioral disturbances of the person with dementia, to understand the circumstances of the appearance of the behavior, to look for a possible triggering cause on which to act upon in order to modify or avoid its recurrence.
	<i>Identification of the support network</i> To identify their support network and to identify the resource persons belonging to this support network according to their needs.
	<i>Request for help</i> To analyze the issues of the request for assistance, to know how to formulate requests and to ask for help when needed, to be able to accept the refusal of the other, to indicate limits to the help that can be provided.
	<i>Managing daily routine</i> To highlight the imbalance between the different times of caregivers' daily life: help time, pleasure time and bond time, and its consequences.
	<i>Resources of My loved one</i> To evaluate in real time the residual abilities of the person with dementia to adapt the level of harmonious accompaniment.
	<i>Stimulation of my loved one</i> To take into account the residual capacities of the person with dementia in the different domains constituting that person's identity in order to provide stimulation.
Acceptance-based intervention 1-Using avoidance strategies 2-Establishment of control behaviors 3-Signs of depression and anxiety 4-Feelings of exhaustion and guilt	<i>Emotional avoidance</i> To highlight the use of emotional avoidance strategies by the caregiver to control or to avoid negative thoughts and emotions, to realize that these strategies are efficient in the short term but not in the long term.
	<i>Complaint and struggle</i> To become aware that complaints as a means to ask for help, to express suffering, or to be recognized may operate in the short term but may be deleterious in the long term.
	<i>Values</i> To highlight a possible discrepancy between the general values of the caregiver and the behaviors associated with these different values. To promote actions that are consistent with the values.
	<i>Values related to the caregiving role</i> To highlight possible discrepancies between values specific to the caregiving role and behaviors associated with these different values. To promote actions that are consistent with the values.
	<i>Guilt</i> To accept the feeling of guilt, to become aware of the discrepancy between the values linked to the perfection of the "ideal self" and those related to the reality of the "real self," to set limits.

	<i>Evaluation and reduction of feelings of exhaustion</i> To be able to identify the signs of exhaustion, and assess the caregivers' own level of exhaustion to act accordingly and decrease it.
	<i>Mindfulness</i> To practice mindfulness exercises to encourage caregivers to be part of the present moment, to allow a time for observation of the environment, bodily sensations, and psychological events (thoughts, emotions).
	<i>Caregiver's charter</i> To draft a caregiver's charter allowing caregivers to become aware of the rights and duties of the help relationship's partners (person with dementia / caregiver), and clarifying how to enforce them in their daily life to ultimately improve their quality of life.
	<i>Life route</i> To analyze the previous situations successfully overcome, alone or by the couple, to apply these already successful forces to the current problematic situation.
Interventions based on couple dynamics 1-Communication restriction with the spouse and the relatives 2-Modification of the couple relationship	<i>Couple's intimacy</i> To discuss the place and evolution of the intimate sphere within the couple since the disease made its first appearance, to address the possibility of reinventing a space for the couple, to become aware of the degree of investment and the feeling of satisfaction in the couple's life
	<i>Communication</i> To become aware that exchanges remain possible even when the disease reaches an advanced stage, to consider other modes of communication with the person with dementia: alternative modes of exchanges, giving priority to all nonverbal behaviors.
	<i>Experiential communication</i> To experience new effective communication strategies with the person with dementia.
	<i>Couple's activities</i> To share activities with the person with dementia, to adapt them to the disorder, to reinvent the relationship by detaching from the memory of past activities.
	<i>Future</i> To promote a clearer outlook on the future, to address fears related to the evolution of the disease

Table 1. Modules' structure and their objectives