

## The development and feasibility testing of the Promoting Independence in Dementia (PRIDE) intervention to enhance independence and live well with dementia



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### Abstract

Non pharmacological interventions could play an important role helping people with mild dementia by facilitating better adjustment and ongoing self-management. PRIDE aimed to develop a post-diagnostic psychosocial intervention built on the evidence-base. Post development, we tested the feasibility and acceptability of this facilitator-led intervention ahead of an RCT. Theories of social learning, self-management and self-efficacy formed the basis of the intervention. A manualised intervention was developed, to be delivered by an intervention provider. Following this, a mixed methods non-randomized, pre-post feasibility study was carried out. Participants with dementia and their supporters (dyads) took part in the 3-session intervention. Outcome measures were collected at baseline and follow up. To evaluate acceptability, focus group and individual interviews were conducted. Cognitive, physical and social activities that have been shown to benefit people were key components of the proposed PRIDE intervention. Feedback on the draft intervention was provided by 32 participants, including people with dementia, through an iterative process. Seven topics for activities were ultimately included (e.g, 'social connections'). Thirty four dyads took part in the feasibility study. Seventy-nine percent of dyads took part in at least two sessions and outcome measures were completed by 79% of participants without difficulty. No significant changes were found on pre and post assessments, but post-hoc analysis found moderate effect size improvements for self-management in people with dementia ( $d=0.41$ ) and quality of life in carers ( $d=0.40$ ). Qualitative data indicated that dyads found the intervention acceptable, as did intervention facilitators. The PRIDE intervention was developed based on robust methodology, then shaped in consultation with stakeholders, who played a key role in designing it. The intervention and outcome measures were both acceptable and feasible. This study provided important data on recruitment rates and outcome measurement for a current definitive randomised controlled trial, to evaluate the effectiveness of the PRIDE intervention.

### Biography

Dr Emese Csipke obtained her doctorate in clinical psychology from the University of Manchester and has worked in psychological research throughout the UK. Working to improve access to high quality psychological interventions for those with serious mental health issues has been her passion, initially working in the field of psychosis and more recently dementia. She believes very strongly that the involvement of key stakeholders in the conceptualisation, development and testing of theories and interventions throughout the research process is vital to creating results which are meaningful to those they aim to help



### Publications

1. Shafayat, A, Csipke, E et al. (2019). Promoting Independence in Dementia (PRIDE): A Feasibility Randomised Controlled Trial Trials (in press).
2. Yates L\*, Csipke E\*, Moniz-Cook E, Leung P, Walton H, Charlesworth G, Spector A, Hogervorst E, Mountain G, Orrell M. (2019). The development of the Promoting Independence in Dementia (PRIDE) intervention to enhance independence in dementia. *Clinical Interventions in Aging*. 14:1615-1630. \* Joint first authors.
3. Csipke, E, Yates, L, Moniz Cook, E, Leung, P, Charlesworth, G, Walton, H, Birt, L, Orrell, M. (2018). Promoting Independence in Dementia: Protocol for a feasibility trial of the PRIDE intervention for living well with dementia. *International Journal of Clinical Trials*, 177-185.
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5. Birt L, Poland F, Csipke E, Charlesworth G. (2017). Shifting dementia discourses from deficit to active citizenship. *Sociology of Health and Illness* 29 (2):199-211.

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