

Physical Activity and Dementia: The need for guidance

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Background

- Dementia is a condition impacting 850000 people and poses significant public health and social issues
- Non-pharmacological treatments like physical activity are recommended,
- There is a lack of guidance on how to support and encourage participation in physical activity.
- Physical activity is a lifestyle factor which can reduce or delay progression of the symptoms of dementia.
- Stroke, mid-life hypertension and diabetes increase likelihood of developing dementia in later life (1). Risks posed can be reduced by adopting healthy lifestyles (2), including physical activity (3).

Physical activity is also associated with:

- Improved physical function /functional living in people living with dementia (4)
- Improvements in psychological condition (mood) and sleep (5)
- Falls prevention (6)
- Improvements in mild cognitive impairments (7)
- Psychological benefits for carers (8)





Aim and Research Questions

Aim:

Develop evidence based guidance to enable stakeholders to encourage and support people living with dementia to be active, reduce sedentary behaviour and improve health

Research Questions:

- What is the role of physical activity in supporting people living with dementia?
- ♦ What evidence could support the development of guidance?
- What do key stakeholders understand about the role of physical activity ?
- What is stakeholder understanding of physical activity and factors influencing engagement?
- ♦ What is stakeholder understanding of sedentary behaviour and its impact ?
- What are stakeholder needs regarding guidance?
- ♦ Where will the guidance be best targeted ?
- What is the effectiveness of draft guidance in: (I) supporting key stakeholders and (II) achieving physical activity, health and social outcomes for people living with dementia?

What are we going to do?

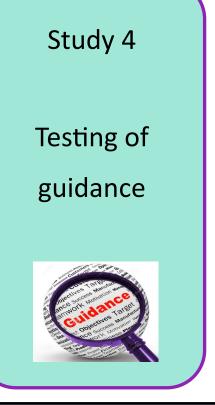
Study 1

Systematic

Literature

Study 2
Formative
Assessment





Study 1: Systematic Literature Review

- A systematic search process to establish studies which could sport the development of guidance.
- Development of key inclusion and exclusion criteria
- Will utilise and search a range of databases.
- Focus in particular on A) The Public Health Context, B) The Health Benefits of undertaking PA and reducing sedentary behaviour and C) The Current Scope of Public Health Guidance

Study 2: Formative Assessment

- Will assess understanding of the role of physical activity, factors influencing engagement, understanding of sedentary behaviour, needs in terms of guidance and where to target.
- Sample to include a wide range of stakeholders.
- Research method to include questionnaires, focus groups and semi structured inter-

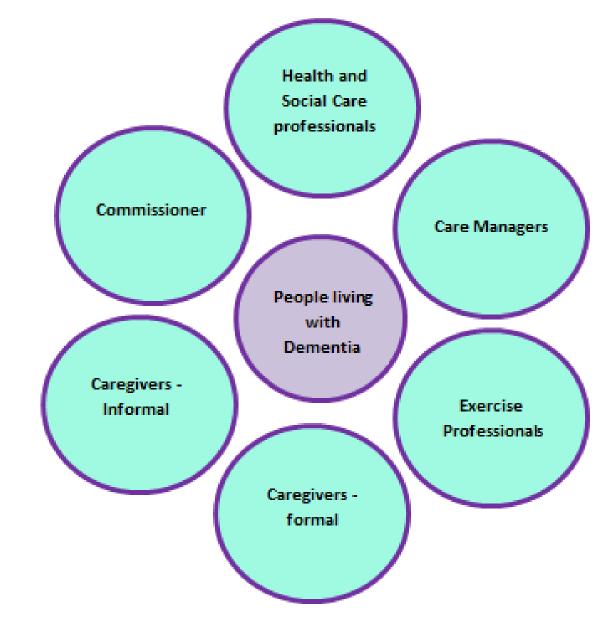
Study 3: Development of Guidance

- Identification of the gaps in guidance
- √ Identification of stakeholder/stakeholders the guidance to be focussed upon.
- Construction of draft guidance
- Focus groups will be used to support the development

Study 4: Testing of Guidance

- Measurement of use, value and relevance of the guidance twill combine qualitative and quantitative methods
- Draft guidance will be assessed through an implementation study.
- Implementing the draft guidance with both the process and impact being measured.
- Research methods to include questionnaires, focus groups, semi structured interviews and diaries

Which stakeholders can be involved?



Significance of Research and Impact

- Events to be held to share research outcomes for the full range of stakeholders and relevant voluntary sector organisations e.g. Alzheimer's Society, Dementia UK, Local Dementia Action Alliances
- Guidance available for relevant stakeholders/practitioners for implementation
- Guidance may have potential to influence commissioning of services /policies
- Contribution to academic knowledge in the field.
- Contribution to the teaching curriculum at Leeds Beckett University

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