

# Developing Psychosocial Skills Capacity: Dementia Skills Elevator

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## Developing Psychosocial Skill Capacity

An illustration showing two figures standing on stone pillars, building a bridge across a gap. The scene is set in a natural, outdoor environment with some foliage.

## Building Bridges

A photograph of a wooden structure made of logs and branches, resembling a bridge or a large-scale construction project in a forest setting.

## Educational Matrix

A diagram consisting of seven blue hexagons arranged in a circle. The hexagons are labeled: 'Person with Dementia', 'Expert Practice', 'Family carer', 'Informed Practice', 'Silled Practice', and 'Public Facing services'. Arrows point towards the central hexagon from the left and bottom.

## Family Carer Level

A screenshot of a web-based course introduction page. The page features the 'elevator' logo and the text 'Dementia Elevator Programme' and 'Coping Skills for families and carers'. A navigation menu is visible on the left side.

## Coping Skills for Families and Carers

**Identified need for education and training among families and carers (ENA, 2014)**

- \* "Everybody tells you about the end result but nobody tells you about this part, this part is very stressful. By the time we get to end stage the help is there, but there is no help for me in my day to day running of things...and it's getting harder by the moment" (family carer of person with early stage dementia).
- \* "It was mostly I found that a lot of the information is about people in the late stages and how to look after them and that doesn't apply to him yet... when they are diagnosed I think you need information, you're in the dark, you need information on how to deal with it" (family carer of person with early stage dementia).

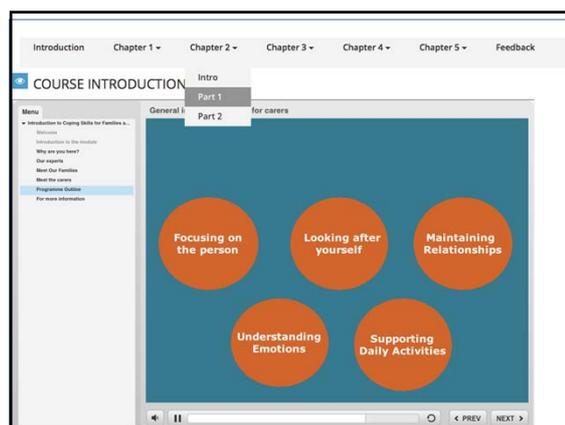
Logos for DCU, The ATLANTIC Philanthropies, and HF are displayed at the bottom.

## Approach to development

- \* Programme was developed by consultation with a group of experienced family carers.
- \* Both the content and the online output were considered and amended where necessary, based on the carers feedback.
- \* Each individual in the review group of family carers has been interviewed about their experience of caring for someone with dementia.

## Family carers wishes for delivery of dementia education

- \* "Somebody who's maybe looked after somebody or even somebody who works looking after people with dementia.... For somebody to explain it to you...you know rather than to get something and read it. I think it's more relevant if somebody who has gone through it and knows people with dementia explains it to you"

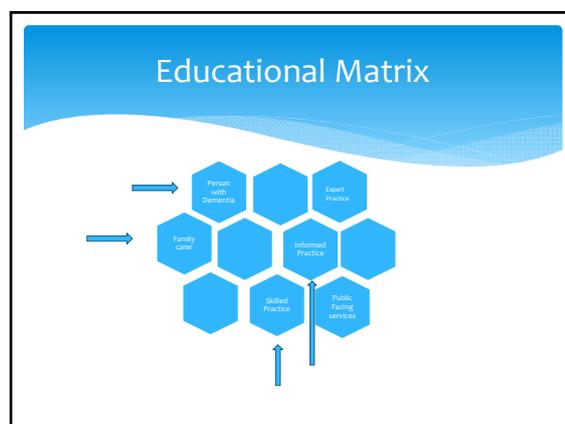


## Programme features

AINE TED

JAMES ANN

The 'Programme features' section includes five video thumbnails showing diverse groups of people, including a woman, a group of four people, a man and woman sitting on a sofa, and a man and woman sitting on a sofa.



## Skilled Level of Practice

1. Personhood, Identity and validating emotions
2. Cognitive and interpersonal resilience
3. Working with a dyad




## Personhood, identity and validation

- Responding to emotions and challenges associated with dementia
- More nuanced understandings of identity
- More skills in validation as an approach
- Ability to role model these skills
- Therapeutic skills in holding a space for emotions

## Cognitive and social resilience

- The basis of cognitive processes, looking for reasons why there may be difficulties and highlighting cognitive strength
- Examining the evidence base for
  - Reality Orientation
  - Cognitive Training
  - Cognitive Stimulation Therapy
  - Cognitive Rehabilitation
- Examining the concept of resilience
- Windle (2011)
  - 'The process of effectively negotiating, adapting to, or managing significant sources of stress or trauma. Assets and resources within the individual, their life and environment facilitate this capacity for adaptation and 'bouncing back' in the face of adversity'.

## Dyadic work

- Individuals understand and solve their daily problems along a continuum from a very individually focused interpretation of the stressors to a mutual or shared understanding of stressors and their impacts on the participants
- It is critical to know the views of the other person on certain problems and to communicate with each other about the problems in order to develop appropriate coping strategies to deal with stressors while maintaining the dyadic relationship.
  - (Moon 2012 : 822)

## Motivations

- a) Increase the understanding of care preferences and values of each dyad member
- b) Discuss and practice effective communication techniques
- c) Discuss discrepancies in care preferences and expectations
- d) Increase the dyad's knowledge about available services
- e) Explore the emotional significance and relationship issues brought on by the illness for both care partners.

(Whitlatch et al 2006;689)

## Theoretical Starting Points

- Neutrality / Equity
  - Equity is the quality of being impartial
  - It implies fairness and even handedness
  - It strives to understand each person's unique perspective
  - It sets aside assumptions or biases
  - It ensures that both parties receive similar levels of therapeutic attention/response
- Transactional analysis
  - What this means is that people have the capacity to feel, act and experience life in childlike, adult and parental states.

## Evaluation

- Very positive
- Smoother 'IT' issues
- Longer module
- More role play
- More face to face, less online???