

EDITORIAL

## Special issue: Knowledge translation and dementia care

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There is a growing body of research demonstrating the effectiveness of interventions that might benefit people living with dementia and their families or caregivers. Yet, it can take years for research findings to be translated into practice for these benefits to be realised.

Knowledge translation is a process or series of activities that aims to accelerate the uptake of research in practice. A commonly used definition suggests that it is a dynamic process that includes synthesis, dissemination, exchange and ethically sound application of knowledge to improve health, which occurs within a complex system of interactions between researchers and knowledge users (Canadian Institute of Health Research, *n.d.*).

This special issue largely considers perspectives, experiences and outcomes concerning the application or implementation of a number of evidence-based non-pharmacological interventions for people living with dementia and their families or caregivers. This issue commences with a paper by Linton that explores the relationship between the health of caregivers and the health of the person they provide care for, who had either dementia or a brain injury. Although the paper does not have an implementation focus, it highlights some of the complexities surrounding this relationship – which is at the centre of many of the non-pharmacological interventions described in the rest of this issue.

As is sometimes the case, there can be good evidence for the effectiveness of interventions in one population that may hold potential for use in a new population. However, prior to the intervention being implemented with the new population, it needs careful adaptation and testing. Scott et al. describe the adaptation of CarFreeMe – an effective driving cessation programme intervention originally designed for older adults – for people living with dementia and their caregivers. This is an important undertaking given the complexities of navigating this highly sensitive issue.

Just because interventions have strong evidence, it does not mean that they will be translated into practice. An example of this is the well-tested Tailored Activity Program (TAP) developed in the USA by Gitlin et al. (2008). Despite at least five randomised controlled trials demonstrating its effectiveness, it is not in use in Australia. An important phase in preparing to implement any new practice is to understand key stakeholders' perceptions about the intervention and its implementation. Hence, Bennett et al. explore the acceptability of TAP for people living with dementia, their caregivers and health professionals and their views about factors that might influence willingness to provide or receive this intervention, prior to its implementation in Australia.

The next two studies in this issue (Culph et al., Rahja et al.) pertain to the implementation of the Care of Persons with Dementia in their Environments (COPE) programme, which originates from same stable (Gitlin, Winter, Dennis, Hodgson, & Hauck, 2010) as the TAP programme. Rahja et al. describe the experiences and outcomes of people with dementia and their caregivers who participated in this dementia reablement programme, as part of a programme of research investigating the implementation of COPE in Australia. The second paper by Culph et al.

investigates the relationships between health professionals involved in the implementation of COPE, highlighting the inherently social nature of implementation research and practice.

Finally, Goodenough et al. describe the use of a short online course 'Bedtime to Breakfast' about providing support at night for people living with dementia, delivered nationally across Australia for a range of health professionals, management and care staff. It describes self-reported knowledge translation outcomes from this training in terms of conceptual impacts (e.g. change in knowledge) and a range of instrumental and persuasive impacts such as development of workplace guidelines and knowledge transfer about this information and skills to other staff.

Together, the research showcased in this special issue illustrates the complexity of knowledge translation, and more specifically, implementation research. It demonstrates the importance of considering a range of stakeholder perspectives, identifies directions for future research and specific actions that can be undertaken by health professionals to translate evidence into practice to ultimately benefit people living with dementia and their caregivers.

## References

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