4th International CST Conference

8 June 2022
University College London and online
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## Conference programme

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<tr>
<td>9:00 onwards</td>
<td>Registration</td>
</tr>
<tr>
<td>9:15-9:30</td>
<td>Welcome from Aimee Spector</td>
</tr>
<tr>
<td>9:30-11:10</td>
<td>Presentations and panel discussion: Global perspectives of CST</td>
</tr>
<tr>
<td>9:30-11:10</td>
<td>Chair: Aimee Spector (UCL)</td>
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<tr>
<td>9:30-11:10</td>
<td>Room G12</td>
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| 9:00 onwards         | Cognitive stimulation for people with dementia: an update on the evidence base from randomised controlled trials  
  *Bob Woods (Bangor University)* |
| 9:00 onwards         | Challenges and solutions in delivering CST in a low- and middle-income country setting (India)  
  *Sridhar Vaitheswaran (Dementia Care in Schizophrenia Research Foundation (DEMCARES))* |
| 9:00 onwards         | Adaptation of CST and a Dementia Awareness Course (DAC) for virtual delivery in Brazil  
  *Raquel Carvalho (Pontifical Catholic University of Rio de Janeiro)* |
| 9:00 onwards         | Group experiences of CST in rural Tanzania  
  *Richard Walker (Newcastle University)* |
| 9:00 onwards         | Feasibility of implementing CST in persons with mild cognitive impairment and dementia in China: A qualitative study [Virtual presentation]  
  *Huali Wang (Peking University Institute of Mental Health)* |
| 11:10-11:40          | Morning break |
### Presentations and panel discussion:

**Understanding modes of CST delivery**

**Chair:** Daniel Mograbi  
(Pontifical Catholic University of Rio de Janeiro)

**Room G12**

<table>
<thead>
<tr>
<th>Time</th>
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<tr>
<td>11:40-13:00</td>
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**Thinkability: Computer-based version of individualised CST**  
*Martin Orrell (University of Nottingham)*  

**CST groups led by non-professionals and family carers: Lessons learned**  
*Gloria HY Wong (The University of Hong Kong)*  

**Short- and long-term benefits of CST: The role of individual characteristics**  
*Elena Carbone (University of Padova)*  

**Adapting CST for Bangladeshi people living with dementia: A pilot group**  
*Ellen Khan and Emma Forde (East London NHS Foundation Trust)* |

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<tr>
<th>Time</th>
<th>Session</th>
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<tr>
<td>13:00-14:00</td>
<td><strong>Lunch</strong></td>
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<tr>
<th>Time</th>
<th>Session</th>
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</table>
| 14:00-15:00 | **Workshops:** In-person attendees choose to attend one of two options:  
1. Clinical issues in CST  
   *Helen Donovan (Consultant Clinical Psychologist) and Michelle Kelly (National College of Ireland)*  

2. Research development and networking  
   *Aimee Spector (UCL), Bob Woods (Bangor University), Martin Orrell (University of Nottingham) and Gloria Wong (The University of Hong Kong)*  

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<tr>
<th>Time</th>
<th>Session</th>
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<tbody>
<tr>
<td>15:00-15:25</td>
<td><strong>Afternoon break</strong></td>
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<td>Time</td>
<td>Event</td>
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<tr>
<td>15:25-16:25</td>
<td><strong>Workshops:</strong> In-person attendees choose to attend one of three options:</td>
</tr>
<tr>
<td></td>
<td>1. Using the tools of Yoga in CST</td>
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<tr>
<td></td>
<td>Robyn Lewis <em>(Yoga Enlightenment Australia)</em></td>
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<tr>
<td></td>
<td>2. Virtual CST: Crafting Skills for Developing Online Sessions</td>
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<td></td>
<td>Max Zubatsky <em>(Saint Louis University)</em>, Janice Lundy <em>(Perry County Memorial Hospital)</em>, Debra Blessing <em>(AT Still University)</em>, Deborah Hayden and Stephanie Pyland <em>(Perry County Memorial Hospital)</em></td>
</tr>
<tr>
<td></td>
<td>3. Delivery of Virtual Individual Cognitive Stimulation Therapy</td>
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<tr>
<td></td>
<td>Esther Hui and Emily Fisher <em>(UCL)</em></td>
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<tr>
<td>16:25-16:30</td>
<td>Closing remarks from Aimee Spector</td>
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<tr>
<td>16.30-17.00</td>
<td>Drinks and networking</td>
</tr>
</tbody>
</table>
Abstracts – oral presentations

1. CST for people with dementia: an update on the evidence base from randomised controlled trials
Bob Woods (Bangor University); Harleen Rai (University of Strathclyde); Emma Elliott (Glasgow University)

Ten years have elapsed since the last Cochrane review on cognitive stimulation was published. A great deal of research, development and implementation has taken place in the intervening period. This presentation draws on the work undertaken for the forthcoming up-dated Cochrane review, to be published in 2022, to indicate the current state of the evidence base.

A total of 29 randomised controlled trials (RCTs) have so far been identified meeting the inclusion criteria, of which 18 are new, and data for nearly 2000 people with dementia entered into meta-analyses. Improvements in scores on cognitive tests, relative to untreated or passive control participants, remain the most robust finding from the RCTs included. Improvements in other domains such as quality of life, mood and communication are evident, but there is generally less certainty about these findings.

Overall, there is much more inconsistency between studies in the results reported than in the 2012 review. Factors such as the intensity of cognitive stimulation sessions and the severity of cognitive impairment in the population studied appear to be important. More research is needed on individual cognitive stimulation where the evidence-base is, as yet, less strong.

2. Challenges and solutions in delivering CST in a low- and middle-income country (LMIC) setting (India)
Dr Sridhar Vaitheswaran (Dementia Care in Schizophrenia Research Foundation – DEMCARES), Dr Murali Krishna (Foundation for Research and Advocacy in Mental Health [FRAMe]), Dr Mina (Atal Bihari Vajpayee Institute of Medical Sciences and Dr Ram Manohar Lohia Hospital), Dr KS Shaji (Kerala University of Health Sciences), Ms Emily Fisher (UCL), Prof Aimee Spector (UCL) from the CST-International India group.

Aim: To highlight the opportunities, challenges, and solutions in delivering CST in India

Methods: We delivered CST to persons with mild to moderate dementia across three sites in India (Chennai, Mysuru & New Delhi). In addition, we provided CST virtually in Chennai and New Delhi. We conducted structured interviews of the study participants and their caregivers and facilitators to identify the challenges and practical solutions to overcome these.

Results: The total number of participants in each site is given below in Table 1.

<table>
<thead>
<tr>
<th>Site</th>
<th>In-person CST (no. of participants)</th>
<th>Virtual CST (no. of participants)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chennai</td>
<td>20</td>
<td>15</td>
</tr>
<tr>
<td>Mysuru</td>
<td>19</td>
<td>-</td>
</tr>
<tr>
<td>New Delhi</td>
<td>-</td>
<td>29</td>
</tr>
</tbody>
</table>

Table 2 describes the main challenges and solutions in delivering CST in India.

<table>
<thead>
<tr>
<th>Challenges</th>
<th>Solutions</th>
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<tbody>
<tr>
<td>Training and retention of facilitators</td>
<td>Train as many facilitators as possible in a setting; run regular training for the new facilitators. Identify trainers who are in substantive employment.</td>
</tr>
<tr>
<td>Identifying suitable participants for CST</td>
<td>Building a service caseload of people with mild to moderate dementia, offering appropriate interventions and considering recruitment with advertisement and social media</td>
</tr>
</tbody>
</table>
Identifying a dementia-friendly setting | Adapt available locations to be as dementia-friendly as possible to improve access and facilities.

Transport for persons with dementia | Provide transport and identify local organisations who provide travel support for a nominal cost or free; use of virtual CST sessions.

Educating caregivers about the importance and benefits of non-drug intervention like CST | Conduct regular sessions of the “Dementia Awareness Course”; use the caregiver support groups to highlight the benefits of CST.

Access to and use of technology for virtual CST | Providing tablet computers; training caregivers & persons with dementia to use them.

The cost for the participants | Subsidise the cost; seek funding from other sources for delivering the interventions free of cost.

Supervision for the facilitators | Conduct group supervision sessions, identify those who can be trained as trainers and develop a train-the-trainer programme specific to CST.

Conclusions: From our experience providing CST in India, we identified many challenges and appropriate solutions. These will inform the scaling up of CST and inform service delivery within India and similar resource-poor settings.

3. Adaptation of CST and a Dementia Awareness Course (DAC) for virtual delivery in Brazil

Raquel Carvalho (Pontifical Catholic University of Rio de Janeiro), Renata Naylor-Batista, Paula Brum (Federal University of São Paulo), Pedro Benevides (Pontifical Catholic University of Rio de Janeiro), Elodie Bertrand (University of Paris), Cleusa Ferri (Federal University of São Paulo), Jerson Laks (Federal University of Rio de Janeiro), Emily Fisher (UCL), Aimee Spector (UCL) and Daniel Mograbi (Pontifical Catholic University of Rio de Janeiro)

Overview and aim: In addition to limited investment in psychosocial treatments for dementia in Brazil, the COVID-19 pandemic has highlighted the need of adapting Cognitive Stimulation Therapy and the Dementia Awareness Course for virtual settings (vCST and vDAC). This study aims to discuss the process of adapting vCST and vDAC in Brazil, as well as presenting preliminary qualitative findings.

Method: Each vCST session was adapted according to international guidelines. DAC materials were also adapted for virtual settings. Individual interviews were conducted with the participants of vCST groups and their caregivers. Framework analysis was used to inspect the recorded and transcribed data. Quantitative data regarding sense of competence, approaches to dementia and caregiver experiences were assessed at baseline, immediately after training and at 1-month follow-up with the participants of vDAC. Caregivers also filled forms related to satisfaction with vDAC and behavioural change after training.

Results: vCST and vDAC groups and interviews are ongoing, and data analysis should be completed by June 2022. Initial findings from vCST and vDAC groups show that it is possible for people with dementia and caregivers to engage virtually and vCST and vDAC are described as a positive experience.

Conclusion: This study provides information about the process of adapting vCST and vDAC. Furthermore, it allows us to explore the experiences and possible perceived changes from the participants of vCST and vDAC.
4. Group experiences of CST in Tanzania: a qualitative study
Jasmine Morrish (Newcastle University), Richard Walker (Newcastle University), Catherine Dotchin (Newcastle University), Aimee Spector (UCL), Stavros Orfanos (UCL), Sarah Mkenda (Kilimanjaro Christian Medical College) and Esther Peniel Shali (Hai District Hospital)

**Background:** Tanzania is a low-income country in which medication for dementia is largely unavailable. Cognitive Stimulation Therapy (CST) is a group-based psychological treatment for people with dementia, shown to improve cognition and quality of life (QoL). It has previously been culturally adapted and piloted in Tanzania, shown to produce similar outcomes. UK research into CST suggests processes inherent to the group nature are key to its success. This study sought to identify group processes within CST in Tanzania and understand their impact on CST principles and outcomes.

**Methods:** Data collection took place in rural Hai District, through qualitative semi-structured interviews. Sixteen people with dementia and four facilitators were recruited through convenience sampling and interviewed about their experiences of CST. Interviews were audio-recorded, translated, transcribed, and analysed by thematic analysis.

**Results:** Two main themes emerged: ‘Positive group experiences’ and ‘Negative group experiences’. From this, a number of group processes were identified, such as helping behaviours and feeling understood by the group. Positive processes supported CST principles and participant improvement. Facilitators were influential over group dynamics. The group processes identified impacted CST principles and treatment outcomes.

**Conclusions:** This is the first study on group mechanisms of CST in Tanzania. It provides deeper insight into participants’ experiences of CST, thus identifying specific processes underlying the quantitatively measured positive outcomes of CST in Tanzania by previous studies. It also reveals further cultural barriers to implementation, enabling amendments for optimization of treatment efficacy.

5. Feasibility of implementing CST in persons with mild cognitive impairment and dementia in China: A qualitative study
Huali Wang, Mengmeng Xia and Haifeng Zhang (Peking University)

Dementia is one of the global health grand challenges. Better cognitive outcome and well-being of dementia is essential for improved quality of life for persons living with dementia. Cognitive stimulation therapy (CST) has been demonstrated as one of the effective therapies for dementia. However, the feasibility of implementing CST in China has not been well studied.

The present study aimed to identify potential facilitators and barriers of implementing CST and to explore its cultural appropriateness in China. Twelve focus groups were organized. All participants attending the focus groups were interviewed with a semi-structured guideline.

With the thematic abstraction, we identified that support from institutional administrative authority, physicians’ enthusiasm for using non-pharmacological intervention, and patient’s demand for complementary therapies in addition to drug medications were common facilitators. However, most focus group participants were concerned about the cultural appropriateness, especially for those having little schooling education and those living in remote and underrepresented areas. Besides, shortage of special funds for nonpharmacological intervention was another common barrier.

The study suggests that cultural adaptation is needed before CST is implemented in Chinese communities, especially when used among persons with high care-demanding are exposed to education-dependent cognitive stimulations tasks.
6. Thinkability: Computer-based version of individualised CST
Martin Orrell (University of Nottingham), Harleen Rai (University of Strathclyde)

Recent work suggests that individualised cognitive stimulation therapy (CST) using a manualised version delivered by the carer can have benefits to the relationship and quality of life. A computer-based version of individualised cognitive stimulation therapy could have a range of advantages including accessibility, and adaptability to different needs such as cognitive abilities, and language or cultural differences.

‘Thinkability’ is a touch-screen application for people with dementia and carers based on CST. The app comprises 21 game-like, discussion activities developed and evaluated in three successive stages in collaboration with a software development company, people with dementia, and carers using a mixed method approach consisting of informal consultations, focus groups, interviews, and questionnaires.

Feedback from people with dementia and carers indicated that Thinkability was enjoyable and had good usability. In a feasibility randomised controlled trial 61 dyads were randomised to the iCST app (n = 31) or the treatment-as-usual control group (n = 30) for 11 weeks. In the iCST app group, 77% used the intervention for 20 minutes or more each week. Carers using the iCST app rated their quality of life better at follow-up compared to the control group (EQ-5D p = 0.006). Most participants completed the activities more quickly than anticipated and did not have enough activities to continue using the app frequently.

Expansion of the iCST app is needed to maintain engagement for longer. Findings indicate that computerised cognitive stimulation can be beneficial and further research is needed.

7. CST groups led by non-professionals and family carers: Lessons learned
Brian YC Chung (Hong Kong Young Women’s Christian Association), Jacky CP Choy (The University of Hong Kong) and Gloria HY Wong (The University of Hong Kong)

CST is often led by health and social care professionals, although it has been designed to allow non-professionals and family carers to take up the facilitator role, allowing provision at scale and over long period of time. Evidence on feasibility and efficacy of CST led by non-professionals and family carers is however limited.

We conducted a qualitative study on a naturally occurring CST group led by family carers with support from professionals through in-depth interviews (n=9), and a pilot randomised waitlist control trial on CST groups led by trained non-professionals for people living with dementia (n=129) in both community and residential care services compared with usual care.

Five themes and 14 subthemes emerged from thematic analysis of the qualitative study, represented a five-stage formal-informal partnership evolvement: (1) individual carer learning through observation of professional-led CST groups; (2) connected by formal care; (3) triggering of team formation; (4) team formation and preparation of CST group with formal care support; and (5) delivering CST as a team. In the trial, when comparing post-CST data from the whole sample with 7 weeks of usual care, improved or maintained cognition was more likely with CST (OR = 2.482, p = 0.025). Five factors were significantly correlated to the outcomes in regression analysis: (1) study site having experience in CST implementation, (2) facilitating skills, (3) dementia caregiving experience, (4) group size, and (5) previous dementia-related training.

A model for wider involvement of non-professionals and family carers in facilitating CST is developed based on these lessons.
8. Short- and long-term benefits of CST: The role of individual characteristics.
Erika Borella and Elena Carbone (University of Padova)

This study examined the role of individual characteristics in predicting short- and long-term benefits of the Italian version of Cognitive Stimulation Therapy (CST-IT).

Data were drawn from a sample of people with mild to moderate dementia who took part in a multicenter controlled clinical trial of CST-IT (N=123). Assessments at pre-test, post-test, and 3 months follow-up investigated the following outcomes: general cognitive functioning and language, mood and behavioral/neuropsychiatric symptoms, everyday functioning, and quality of life. Age, education, and baseline (pre-test) cognitive functioning, mood (depression) and behavioral/neuropsychiatric symptoms were considered as predictors of any short- and long-term benefits of CST-IT.

Results showed that higher education predicted larger gains in general cognitive functioning and, along with less severe depressive symptoms, in language. Older age was associated with positive changes in mood, larger gains in everyday functioning and quality of life. Baseline cognitive functioning, mood and/or behavioral/neuropsychiatric symptoms broadly influenced performance too, but as a function of the outcomes considered.

These findings suggest that different individual characteristics can influence the benefits of CST-IT, depending on the outcomes considered. They also underscore the importance of considering and further exploring the role of individual characteristics in psychosocial interventions, like CST, in order to maximize their short- and long-term efficacy for people with dementia.

9. Adapting CST for Bangladeshi people living with dementia: A pilot group
Ellen Khan and Emma Forde (East London NHS Foundation Trust)

One challenge of delivering CST is adapting it for different cultural groups and non-English speakers. This is particularly relevant in the Mental Health Care of Older People (MHCOP) in Tower Hamlets where Bangladeshi people make up 32% of the population. This presentation summarises a joint piece of work between Tower Hamlets MHCOP and Alzheimer’s Society in 2019 in which the CST materials and group delivery were adapted to be piloted for Bangladeshi people living with dementia.

Adaptations to the group materials and delivery were made using Aguirre, Spector and Orrell's (2014) 5-stage bottom-up approach as far as possible within the service context. We collaborated with stakeholders by conducting a focus group with Bengali people living with dementia at the Dementia Café at the East London Mosque. Group session plans were adapted in conjunction with Bengali Alzheimer’s Society staff, taking into account feedback from the focus group. A group was piloted with 7 attendees and the Quality of Life in Alzheimer’s Disease (QoL-AD; Logsdon, Gibbons, McCurry, & Teri, 1999) questionnaire was used to measure pre and post group quality of life. Outcomes in terms of quality of life were limited. The reasons for this are unclear and warrant further research. However, in spite of the poor outcomes on Quality of Life measures, the qualitative feedback from participants indicated that they valued the group and found it beneficial for their memory.

This presentation will reflect on the process of adapting the materials cross-culturally, outcomes, feedback from the group and considerations for the future.
1. Research development and networking
Aimee Spector (UCL), Bob Woods (Bangor University), Martin Orrell (University of Nottingham) and Gloria Wong (The University of Hong Kong)
This workshop will include discussion among participants engaged in CST research, and will support methodology development and collaboration.

2. Clinical issues in CST
Helen Donovan (Consultant Clinical Psychologist)
This workshop will be led by a clinical psychologist with experience of delivering CST. Participants will have the opportunity to share experiences and challenges in delivering CST and receive guidance and advice from the workshop leader.

3. Using the tools of Yoga in CST
Robyn Lewis (Yoga Enlightenment Australia)
In this interactive workshop, participants will experience and learn about the varied tools of Yoga (physical movements, breath, mudra/hand postures, mantra/sound, mindfulness, meditation, and relaxation) within the structure of CST.

4. Virtual CST: Crafting Skills for Developing Online Sessions
Max Zubatsky (Saint Louis University), Janice Lundy (Perry County Memorial Hospital), Debra Blessing (AT Still University), Deborah Hayden and Stephanie Pyland (Perry County Memorial Hospital)
During the COVID-19 pandemic, many CST groups across the world quickly pivoted to virtual sessions to reach older adults with memory challenges. However, several facilitators were challenged in how to effectively communicate and structure themes that could engage members in meaningful ways. Furthermore, virtual methods for group interventions often lacks the social engagement amongst participants who have some advanced cognitive impairment. In this workshop, members from the United States will introduce a novel online software that can help facilitate virtual CST sessions in an interactive format for participants. The presenters will not only showcase activities and themes from the software, but report both qualitative and quantitative outcomes from using virtual software in CST sessions. The workshop will give participants the opportunity to gain additional skills to adapt to virtual formats, while sharing other modes of interaction that work well with older adults for CST. The presenters will then collect a group needs assessment of areas that the CST community should consider with future adaptations of virtual CST.

Objectives:
By the end of this workshop, participants will:
1. Understand the challenges faced by running CST group through virtual methods.
2. Apply certain activities and strategies to help engage participant in virtual CST group sessions
3. Identify the benefits of a new virtual CST platform that can help engage group members with session themes.
5. Delivery of Virtual Individual CST
Esther Hui and Emily Fisher (UCL)

Description: The workshop will include a brief presentation on how V-iCST was made and tested (the preliminary results from the abstract below). The majority of the time will be spent on learning how to deliver this intervention to people with mild to moderate dementia. Interactive activities will include critiquing sample therapy videos, role-play, and discussing common issues/scenarios encountered in therapy sessions in small groups.

Abstract

Title: The impact of Virtual Individual Cognitive Stimulation Therapy (V-iCST) on cognition, quality of life, mood, and communication in dementia: a feasibility randomized controlled trial

Background: The COVID-19 pandemic has led to the suspension of community-based dementia services worldwide, where evidence-based interventions for dementia, like Cognitive Stimulation Therapy (CST), were delivered. Treatment access is paramount during the pandemic and beyond for people with dementia to maintain functioning and well-being. This study aimed to evaluate the feasibility and acceptability of a virtual, 14-session program of Individual Cognitive Stimulation Therapy (V-iCST) in the UK.

Method: A single-blind feasibility randomized controlled trial (RCT) was conducted in the UK. Thirty-four people with mild to moderate dementia were recruited from dementia organizations and networks. Seventeen were randomly assigned to receive V-iCST (14, 45-min sessions) and 17 to treatment as usual (TAU) over seven weeks. Feasibility and acceptability data, for example around recruitment, attrition, attendance, adverse effects, and fidelity, were collected. Outcome measures on cognitive function, quality of life (QoL), mood, and communication were collected pre and post-test. Analysis of covariance was used to compare changes in V-iCST and TAU.

Result: We have successfully completed recruitment. Results on feasibility, acceptability and preliminary efficacy will be available at the conference.

Conclusion: We hypothesize that V-iCST is feasible and acceptable and will have positive effects on cognitive, QoL, mood and communication. Findings will be available at the conference.
Speakers and Organising Committee

Aimee Spector, UCL

Aimee Spector is Professor of Old Age Clinical Psychology and Director of the International Cognitive Stimulation Therapy (CST) centre at University College London, see www.ucl.ac.uk/international-cognitive-stimulation-therapy. This involves working with over 34 countries and supporting CST for dementia training centres in Hong Kong, the US, Denmark, Norway, Germany and New Zealand. Her expertise lies in the global development and evaluation of complex interventions for dementia. This includes currently being PI for the MRC funded ‘CST-International’ in Brazil, India and Tanzania and holding a UCL-PKU (Peking University) Global Engagement award. Her research includes the evaluation of a range of interventions for dementia including Cognitive Behavioural Therapy, Compassion Focused Therapy and Mindfulness. She has published over 140 peer-reviewed papers, 4 book chapters and 10 books. She is international lead for University College London’s Clinical Psychology doctorate course.

Bob Woods, Dementia Services Development Centre Wales, Bangor University, UK

Bob Woods trained and worked initially as a clinical psychologist in Newcastle-upon-Tyne, where in 1976 he began to set up and evaluate Reality Orientation groups for people with dementia in care homes. From 1996 to his retirement in 2017, he was Professor of Clinical Psychology of Older People at Bangor University, Wales where he was Director of the Dementia Services Development Centre Wales. His research has involved the systematic development of evidence-based psychosocial interventions for people with dementia and their caregivers, including cognitive stimulation, reminiscence and life review and cognitive rehabilitation. His publications include practical manuals for family carers and care-workers as well as textbooks and over 240 peer reviewed journal papers.

Brian Chung, Hong Kong Young Women’s Christian Association, Hong Kong

Brian is a physiotherapist who is serving older adults in Long Term Care Facilities at the Hong Kong Young Women’s Christian Association in Hong Kong. He is one of the CST Trainers in Hong Kong accredited by the International CST Centre, and currently working with Dr Gloria Wong and her colleagues at the University of Hong Kong to provide CST training in Hong Kong.
Catherine Dotchin

Catherine Dotchin is a consultant geriatrician with an interest in research based at Northumbria Healthcare NHS Trust. She has been involved in Parkinson’s disease research since 2005, completing an MD on the prevalence of PD in Tanzania in 2007. Following this, she helped to organise a dementia prevalence project and then subsequently worked on a Grand Challenges Canada Global Mental Health grant around interventions and the identification of dementia in sub-Saharan Africa, linked with Professor Ogunniyi’s team in Nigeria. This was the first project to look at the potential to deliver CST in SSA and its efficacy. She has supervised PhD projects on cognitive screening for dementia and delirium in Tanzania and a community-based frailty project in rural Tanzania. She is a Foundation programme tutor at Northumbria Healthcare NHS Trust and supervises MRes projects for intercalating fourth year medical students.

Daniel Mograbi, Pontifical Catholic University of Rio de Janeiro

Daniel Mograbi completed a BSc in Psychology at the Federal University of Rio de Janeiro, and a PhD in Psychology and Neuroscience at the Institute of Psychiatry, Psychology & Neuroscience, King's College London. He is currently associate professor at the Pontifical Catholic University of Rio de Janeiro, also working as a visiting researcher at King's College London. His main area of interest is self-awareness in clinical groups, using a variety of methods to explore this topic in neurological and psychiatric patients. From 2016-2019 he was a Newton Advanced Fellow by the Royal Society and Academy of Medical Sciences, UK. In 2019, he was presented with the International Neuropsychological Society Early Career Award for his contribution to research in the area of brain-behavior relationships.

Debbie Hayden, Perry County Memorial Hospital

Debbie is currently the Director of Occupational Therapy at Perry County Memorial Hospital in Perryville, Missouri, United States. She has a Bachelor of Science degree in Nursing and Occupational Therapy. Her focus in Occupational Therapy has been in pediatric and adult outpatient rehab with an emphasis on ocular (vision) motor and learning disorders. She is a Certified Dementia Practitioner by the U.S. National Council of Dementia Practitioners and a core trainer for the North America Cognitive Stimulation Therapy (CST) Training Center at Saint Louis University Geriatric Education Center. Debbie has assisted in the development of a comprehensive CST and exercise program for older adults with dementia. She has presented at national and international conferences on CST.
Debra Blessing, A.T. Still University

Debra is the GWEP Project Coordinator at A.T. Still University in Kirksville, MO. She received her bachelor’s degree in Communications from Missouri State University. She has facilitated several CST and iCST groups, incorporating several students to lead groups from multiple health disciplines. She was awarded the 2018-2019 Geriatric Leadership Scholar as part of the HRSA Geriatric Workforce Enhancement Program Grant. She has provided several talks across Missouri and around the country on CST, caregiving, long-term care topics, and other geriatric health issues.

Elena Carbone, University of Padova

Elena Carbone, psychologist, Ph.D. in Psychological Sciences (University of Padova), expert in psychology of aging (Second-Level Short-Specialization degree in Gerontological Psychology, University of Padova), researcher at the Department of General Psychology, University of Padova (https://www.memoryandlearninglab.it/) and member of the Psychology of Aging and Longevity Service at the same University. Her main research interests encompass age-related cognitive changes and individual differences (e.g., personality) in core cognitive mechanisms (e.g., working memory) and complex cognitive abilities (e.g., spatial cognition). She is also interested in the design and implementation of cognitive interventions as well as cognitive stimulation programs for supporting cognitive functioning and promoting quality of life of older adults with normal and pathological aging, with a focus on the role of individual characteristics and training features in influencing the benefits provided by the intervention. She is author of more than 20 national and international publications on these topics.

Erika Borella, University of Padova

Erika Borella, psychologist, is Associate Professor at the Department of General Psychology (https://www.memoryandlearninglab.it/), University of Padova. She is responsible for the University’s Psychology of Aging and Longevity Service, and she directs the Second-Level Short Specialization degree course in the Psychology of Aging and Longevity, and the Postgraduate Specialization degree course in Health Psychology. Her research interests focus on typical and pathological aging, and particularly on age-related differences in basic mechanisms of cognition (working memory, inhibitory processes), and on complex aspects of cognition related to everyday functioning. She has a special interest in cognitive training programs for typically aging older adults, and in cognitive stimulation therapy for people with dementia, examining their short- and long-term efficacy and the role of individual characteristics. She is also studying the influence of psychological aspects (loneliness) on the cognitive and emotional functioning of older adults with and without dementia. She is author of more than 100 international publications on these topics.
Ellen Khan, East London NHS Foundation Trust

Dr Ellen Khan is a clinical psychologist who trained at UCL. Ellen has been working in the Mental Health Care of Older People in East London since 2013. Ellen has always had a passion for working with older people, people with dementia and their carers. Ellen enjoys working in the diverse area of East London and working cross-culturally; this is what drove the decision to adapt the Cognitive Stimulation Therapy groups for Bangladeshi people with dementia in Tower Hamlets. This piece of work won the ‘Addressing Inequalities’ award at the National Older People’s Mental Health and Dementia awards in 2019. Ellen is also a Cognitive Analytic Therapy (CAT) Practitioner and she enjoys using CAT in her work with older people and carers of people with dementia.

Emily Fisher, UCL

Emily Fisher is the Programme Manager for CST-International and a PhD candidate at UCL exploring implementation of CST in UK care home.

She has an in MSc Dementia: Causes, Treatments and Research (Mental Health) from UCL, and has previous experience in national charities in the dementia and ageing sector in the UK.

Emma Forde, East London NHS Foundation Trust

Dr Emma Forde is a clinical psychologist who trained at the University of Liverpool. Emma has been working with older people and their family members in East London across memory clinics, post-diagnostic dementia services and older adult mental health since 2016. Emma has an interest in equal access to psychological treatment, dementia, and complex trauma, and takes a Cognitive Analytic Therapy-informed approach to working with older adults and people living with dementia and their families.
Esther Hui, UCL

Esther is a PhD candidate at UCL, supervised by Prof. Aimee Spector. After double-majoring in biology and psychology as an undergraduate and working in the healthcare industry in the US and Hong Kong, Esther developed an interest in dementia research.

Her current research focuses on psychosocial interventions for people with dementia. For her PhD, Esther is developing and evaluating a virtual version of Individual Cognitive Stimulation Therapy (V-iCST) in Hong Kong and the UK. Aside from telehealth, dementia, cultural adaptation, and psychosocial interventions, Esther is also interested in the neurobiology of dementia, public health, and mental health in general.

Gloria Wong, The University of Hong Kong

Gloria Wong is Associate Professor at the Department of Social Work and Social Administration, The University of Hong Kong; Honorary Associate Professor, Department of Clinical, Educational and Health Psychology, University College London, and Visiting Associate Professor, Department of Health Service and Population Research, Institute of Psychiatry, Psychology & Neuroscience (IoPPN), King's College London. One of her research focuses is on care innovations for people living with dementia. Many of her works have resulted in new services being provided routinely or scaled up. She leads several key evaluation projects on dementia services and policy, and works actively in developing and culturally adapting evidence-based non-pharmacological interventions for people with dementia. These works have led to the publication of over 90 peer-reviewed journal articles, a clinical guidebook, 5 book chapters, and other outputs. She is Director of Training, Cognitive Stimulation Therapy – Hong Kong, International Cognitive Stimulation Therapy Centre.

Helen Donovan, Consultant Clinical Psychologist

Dr Helen Donovan is a consultant clinical psychologist who has held senior positions since 2004 in the NHS in Bedfordshire & Luton including developing and providing services to people with dementia. Helen has been involved in CST and Maintenance CST research projects with UCL and has extensive experience of supervising and delivery of CST groups, and providing CST training in the UK and internationally.
Huali Wang, Peking University

Dr Huali Wang is Professor and Chair for Clinical Research, Director of the Dementia Care and Research Centre, and Associate Director of Beijing Dementia Key Lab, Peking University Institute of Mental Health in Beijing, China. She established the first dementia caregiver support group in China in 2000. Presently, she directs the implementation of social prescribing for promoting mental well-being of older adults. She has published five books on dementia care and the series on Memory Health in Community. The community-based dementia care model has been partly adopted by WHO West Pacific Regional Office to develop the toolkit for community-based dementia care in low- and middle-income countries. Dr Wang also serves leading positions in national and international mental health research and service advocacy, including Secretary of International Psychogeriatric Association, Vice President of Chinese Society of Geriatric Psychiatry (founding member), Executive Vice President of Alzheimer's Disease Chinese (member of ADI), and WHO Global Dementia Observatory Focal Point for China.

Jacky Choy, The University of Hong Kong

Jacky is a post-doctoral fellow at the Department of Social Work and Social Administration of the University of Hong Kong. He was trained in psychology, psychological medicine and completed his PhD in social work and social administration at the University of Hong Kong. His research interests are family care provided by multiple informal carers and intervention for supporting family as a care unit. During his PhD study, he inquired the formation of an informal care team serendipitously providing dementia intervention in collaboration with the formal care sector. Over the past few years, Jacky has been working on mixed methods programme evaluation in relation to long-term care policy and dementia care service. His current work focused on the development of dementia policy in Hong Kong and implementation of remote dementia service via information and communications technology. He has also been coordinating the CST Training courses in Hong Kong that benefit over 600 multidisciplinary professionals since 2018.

Janice Lundy, Perry County Memorial Hospital

Janice is currently the Director of Social Work and Geriatric Care Management at Perry County Memorial Hospital in Perryville, Missouri, United States. She has a Bachelor Degree in Social Work and Master Degrees in both Gerontology and Health Care Administration. She is a Certified Dementia Practitioner by the U.S. National Council of Dementia Practitioners and a core trainer for the North America Cognitive Stimulation Therapy (CST) Training Center at Saint Louis University Geriatric Education Center.
Jasmine Morrish, Newcastle University

Jasmine is currently a Foundation doctor working in Newcastle. She studied medicine at Newcastle University, taking an intercalation year to undertake a Masters of Research in Global Health. Jasmine spent time during this year in Tanzania to carry out data collection for her project, the results of which are published in the Journal of Aging and Mental Health. Jasmine’s passion for Global health was born from time spent in Ecuador volunteering for an NGO running a mobile surgical theatre, undertaking minor operations in remote communities in the Amazon rainforest. Following specialty training, Jasmine’s hope is to work overseas in humanitarian aid and improving access to medical care in developing countries.

Max Zubatsky, Saint Louis University

Dr Zubatsky is an Associate Professor and Program Director in the Medical Family Therapy Program at Saint Louis University. He is a Licensed Marriage and Family Therapist and an AAMFT Approved Supervisor in Marriage and Family Therapy. Dr Zubatsky is the Associate Director of the Geriatric Education Center at Saint Louis University, assisting with several older adult initiatives across the university. He also directs the Aging and Memory Clinic at Saint Louis University, a specialty clinic that provides services to families with dementia and older adult health issues. His clinical and research interests include Geriatrics, caregiving, integrated behavioral health, resiliency strategies in burnout, and resident education. Dr Zubatsky supervises master’s and doctoral student trainees who have facilitated over ten Cognitive Stimulation Therapy groups, both virtual and in-person.

Martin Orrell, University of Nottingham

Professor Martin Orrell is Director of the Institute of Mental Health, a partnership between the University of Nottingham and Nottinghamshire Healthcare NHS Foundation Trust. He led the research to develop and evaluate Cognitive Stimulation Therapy (CST) for dementia. CST is now established in NICE dementia guidance and in use in 30 countries. He has been awarded 7 major dementia care research grants totalling £17 million and has published 350+ academic papers. He is Chair of the Memory Services National Accreditation Panel (MSNAP). He is an NIHR Senior Investigator, President of the European Association of Geriatric Psychiatry, a Board member of INTERDEM, and Editor of the international journal Aging & Mental Health.
Michelle Kelly, National College of Ireland

Michelle has a doctorate in Behavioural Psychology and completed her post-doc as an Early Intervention Coordinator with the Alzheimer Society of Ireland and the Institute of Neuroscience in Trinity College Dublin. Michelle has been involved in the research and development of evidence-based interventions for dementia for over 10 years, has run numerous CST groups and has published on an all-Ireland CST research study. In June 2018, she became an accredited CST trainer. To date, Michelle has delivered over fifteen CST training events and has trained approximately 300 people in Ireland to deliver CST.

Nirupama Natarajan, Dementia Care in Schizophrenia Research Foundation (DEMCARES)

Ms Nirupama Natarajan is a psychologist and an early career researcher with the Dementia Care in SCARF (DEMCARES), Chennai, India. She holds a master's degree in Applied Psychology, with a specialization in Clinical Psychology, from the Tata Institute of Social Sciences. As a psychologist, Nirupama specializes in delivering Cognitive Stimulation Therapy (CST) for persons with dementia and supportive counseling for caregivers. Experienced in CST, she also delivers training to professionals in the field of dementia in India. Nirupama is interested in dementia care practice research, and most notably, she has worked with CST international to adapt CST and Dementia Awareness Course (DAC) for virtual delivery. She is also interested in working at the intersection of dementia and public health; and is a 2022 incoming student at the Yale School of Public Health.

Paula Schimidt Brum, Federal University of São Paulo

Paula graduated in Gerontology from the University of São Paulo (USP), a master's degree focused on memory training for the older adults with MCI from the USP School of Medicine, a doctorate focused on memory training for healthy older adults from the Department of Neurology of the USP School of Medicine, post-doctoral fellow in Cognitive Stimulation Therapy for older adults with dementia (CST) at Federal University of São Paulo-UNIFESP.
Raquel Santos de Carvalho, Pontifical Catholic University of Rio de Janeiro

Raquel Carvalho is a psychologist with experience in neuropsychological assessment and psychosocial interventions for people with dementia and caregivers. She completed her PhD in 2017 in the Institute of Psychiatry at Universidade Federal do Rio de Janeiro (Brazil) and is currently a postdoctoral researcher in the Department of Psychology at Pontifícia Universidade Católica do Rio de Janeiro (Brazil). She has worked in the project of implementation of CST in Brazil, coordinating the development of virtual CST groups and of Dementia Awareness Course in the country.

Renata Naylor-Batista, Pontifical Catholic University of Rio de Janeiro

Renata is a clinical psychologist and a Master’s Student in Clinical Psychology. She has been working with CST since 2017 and was one of the lead facilitators of the groups during the adaptation and validation of CST in Brazil. Renata is one of the Master Trainers of CST in Brazil and now runs vCST groups as part of her masters. In her private practice, she works with person-centred care and positive person work. She is a cognitive behavioural therapist and she runs CST groups and iCST for people with dementia. Her main areas of interest are: healthy and pathological ageing, person-centred care, non-pharmacological treatments, cognitive stimulation, cognitive rehabilitation, cognitive behavioural therapy, reducing dementia stigma and improving quality of life for older people.

Richard Walker, Newcastle University

Richard Walker is a Consultant and previous Director of Research & Development at North Tyneside General Hospital, and Honorary Professor of Ageing and International Health at Newcastle University. He is the Clinical Lead for the Northumbria Parkinson’s disease (PD) service. His research interests in PD include epidemiology, psychiatric symptoms, palliative care, respiratory symptoms, exercise, and sub-Saharan Africa (SSA). He was on the UK PD NICE Guidelines 2017 Development Group and the PD Quality Standard Advisory Committee for NICE. He is consultant lead for the UK Parkinson’s Excellence Network. He has a research interest in other non-communicable diseases in SSA including stroke, epilepsy, hypertension, dementia, fluorosis, and frailty. He was Associate Global Director for SSA for the Royal College of Physicians, London (2016 – 2020) and is the Clinical Lead for the Northumbria/Kilimanjaro Christian Medical Centre health link which started in 1999. He is immediate past Chair of the Movement Disorders Society African Task Force. He has published over 250 peer review papers.
Robyn Lewis, Yoga Enlightenment Australia

Robyn is a yoga teacher and therapist with more than a decade’s experience who teaches in a wide range of settings including school, community, corporate, aged care/dementia, and correctional environments as well as with special needs (NDIS) clients. She works one to one and with small groups as a yoga therapist, exploring physical, mental and emotional conditions with clients, co-creating tailored practices using the tools of yoga for health, wellbeing and healing. Her chair yoga is especially suited to pre- and post-natal women, people recovering from surgery and those in the corporate world so they can access yoga in an easier, accessible way. She offers a flexible suite of yoga styles and levels to cater to all kinds of people and tailors her instruction to individual needs. Her clients often report feeling taller, stronger and sleeping well after just a few classes. With continued practice, Robyn’s clients develop more self-awareness and self-regulation and ultimately, are empowered to practice for themselves without depending on her. Robyn conducts yoga classes for people with dementia and always works to ensure she honours the person who is there, empowering them when, sadly, they are at a stage of life with very little power. In 2020, Robyn was awarded a Churchill Fellowship for the exploration of yoga for cognitive stimulation in people with a diagnosis of dementia. Robyn completed a four-year term on the Board of Yoga Australia, the peak body for yoga in Australia and is now a senior teacher, registered mentor and part of the Yoga Australia Council of Advisors. She trains yoga teachers in her 50-hour registered chair yoga course. Robyn also serves as a palliative care volunteer.

Shreenila Venkatesan - Dementia Care in Schizophrenia Research Foundation (DEMCARES)

Shreenila is a psychologist working on adapting psychosocial interventions for people with dementia and their caregivers for use in LMIC settings. Her interests include clinical neuropsychology, effects of cognitive training on psychopathology and use of art as a therapeutic medium.
**Sridhar Vaitheswaran, Dementia Care in Schizophrenia Research Foundation (DEMCARES)**

Sridhar is a clinician with an interest in applied research in dementia in low and middle-income country settings. He runs a clinic and an inpatient unit for the elderly with mental illnesses including dementia in SCARF hospital, Chennai. His current research includes implementing cognitive stimulation therapy for dementia in India, implementing psycho-social interventions for dementia in rural communities in India, adapting interventions for caregivers of persons with dementia in India, testing the feasibility of using hybrid-face robots in engaging persons with dementia in India.

**Stephanie Pyland, Perry County Memorial Hospital**

Stephanie is a Certified Cognitive Stimulation Therapy (CST) Practitioner and Fitness Specialist at Perry County Memorial Hospital (PCMH) in Perryville, Missouri, United States. She has a Bachelor Degree in English and is a Certified Personal Trainer by the National Academy of Sports Medicine (NASM), as well as a Certified Functional Aging Group Exercise Specialist by the Functional Aging Institute (FAI). Stephanie has been involved with the CST program at PCMH for over five years. She has developed the exercise component for older adults with dementia utilized within this program. She also facilitates ten CST groups each week. She has presented at the Saint Louis University Summer Geriatric Institute conference on CST and exercise.
All in-person conference attendees

Alice Sarhanis  Midlands Partnership NHS Foundation Trust, UK
Anthony Braker  Worcestershire Health and Care NHS Trust, UK
Berenice Werle  Global Health Brain Institute, Brazil
Bob Woods  Bangor University, UK
Catherine Dotchin  Newcastle University, UK
Charlotte Stoner  University of Greenwich, UK
Daniel Mograbi  Pontifical Catholic University of Rio de Janeiro, Brazil
Danielle Proctor  UCL, UK
Debbie Hayden  Perry County Memorial Hospital, USA
Debra Blessing  AT Still University, USA
Elena Carbone  University of Padova, Italy
Ellen Khan  East London NHS Foundation Trust, UK
Emma Forde  East London NHS Foundation Trust, UK
Esther Hui  UCL, UK
Gloria Wong  The University of Hong Kong, Hong Kong
Gordon Anderson  Memory Ltd, UK
Helen Donovan  Consultant Clinical Psychologist, UK
Janet Toplis  Jersey Memory Assessment Service, UK
Janice Lundy  Perry County Memorial Hospital, USA
Janna Bohn Sylvestersen  VIA University College, Denmark
Juliette Swalwell  Worcestershire Health and Care NHS Trust, UK
Laila Øksnebjerg  Danish Dementia Research Centre, Denmark
Laura Walker  Memory Matters, UK
Louise Robinson  Newcastle University, UK
Lynde Booth  Brent Memory Service, Central and North West London NHS Foundation Trust, UK
Mark Brill  Memory Ltd, UK
Martin Orrell  University of Nottingham, UK
Max Zubatsky  Saint Louis University, USA
Michela Leocadi  Vita-Salute San Raffaele University, Italy
Michelle Kelly  National College of Ireland, Ireland
Navreen Singh  Barnet, Enfield and Haringey NHS Mental Health Trust, UK
Nirupama Natarajan  Dementia Care in Schizophrenia Research Foundation (DEMCARES in SCARF)
Paula Schimidt Brum  Federal University of São Paulo, Brazil
Raquel Santos de Carvalho  Pontifical Catholic University of Rio de Janeiro, Brazil
Richard Hawkins  Hawker Publications, UK
Richard Walker  Newcastle University, UK
Robyn Lewis  Yoga Enlightenment, Australia
Shreenila Venkatesan  Dementia Care in Schizophrenia Research Foundation (DEMCARES in SCARF), India
Sif Blandfort  VIA University College, Denmark
Simon Nielsen  Brain+, Denmark
Sophie Hester  Memory Matters I
Sridhar Vaitheswaran  Dementia Care in Schizophrenia Research Foundation (DEMCARES in SCARF), India
Stephanie Pyland  Perry County Memorial Hospital, USA
Suzanne Le Put  Jersey Memory Assessment Service, UK
Tim Nicholls  Cardiff and Vale University Health Board, UK