

WHAT DO PEOPLE LIVING WITH
DEMENTIA AND THEIR CARERS
THINK OF 'TRY
SOMETHING NEW'? AN
EVALUATION OF THEIR PERSPECTIVES

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A report on the evaluation of Try Something New

Background

“Try something new” is a 3 year project (August 2013 –July 2016) running across North and South West Wales. Funded by the Big Lottery and implemented in Partnership with the Community Education Service, its main aim is to help people living with dementia (PLWD) and their carers to live in a supportive environment by providing them meaningful adult learning opportunities in safe, non-threatening and non-judgemental situations.

This programme offers people with dementia and their carers the chance to take part in activity groups in a community education setting to facilitate an increase in their confidence and skills, as well as an improvement in their wellbeing by reducing the social isolation often experienced.

By developing partnerships with the Community Education Service, the Alzheimer’s Society hope to develop awareness of dementia across different communities and enable people to understand what is like living with dementia. Activities’ facilitators, course leaders, group coordinators and volunteers make sure everyone feels welcome and is able to participate.

As reported by the Alzheimer’s Society, the activity groups reflected in the current analysis started in March 2014 and ran throughout the year for 9 months, with most of the groups finishing in December 2014. Most groups ran for 6 - 10 weeks, with one 2-3 hour session per week; whereas others meet fortnightly. The total number of participants across the whole project in 2014 was 524. There were also 163 indirect beneficiaries where carers were receiving respite as a result of the people living with dementia attending the groups alone. Courses have continue to run during 2015.

Evaluation methods

Data were collected from the Try Something New participants and their carers by the Alzheimer’s Society and analysed by Dementia Services Development Centre Wales. This is derived primarily from two sources of documentation:

- 1) An individual expression of interest (EOI) form, where participants and/or their carers provided a range of information, such as the types of activities they were interested in trying, their expectations and how they hoped to benefit from taking part.
- 2) A group evaluation form, where feedback on the group activity was collected at the end of the final session by the group facilitator, through a ‘focus group’ approach.

Information from all the documentation was extracted into EXCEL files to facilitate the evaluation analyses. For the open-ended responses recorded in the focus group evaluation, a thematic content analysis was undertaken. This requires the analysts to first familiarise with the data then to generate initial codes. The next steps involve searching for themes, reviewing themes, defining and naming themes. This enables the identification and analysis of recurrent themes, and the subsequent patterns of meaning across the data. It also enables the frequency the theme occurred to be quantified.

The report is divided into two sections to reflect the two sources of information. It is based on data collected during 2014. The results are presented separately for people living with dementia and their carers.

Results – reflections on the sources of information

Every participant should have completed an EOI form, however in some cases they have not been completed. Feedback from the Try Something New team suggests that this was due to some people forgetting to bring them back or not having sufficient support to complete.

There were approximately 20 courses that were not evaluated due to finishing earlier than expected, being discontinued either because of low numbers or because of tutor availability, or people not turning up to the focus group session if it was run as an extra session (to address this, the focus group was incorporated into the final session to ensure the maximum number of responses). The focus group was not suitable for some of the service users due to their stage of dementia.

Consequently there are some perspectives on the groups that are missing, particularly from those who may have lacked some support in providing their opinions.

Some courses have continued to run, so focus group evaluations will continue to be undertaken by Alzheimer's Society staff every 3 months.

Results

Participants from fifty 'Try Something New' groups contributed to the Expression of interest Evaluation, as presented in Table 1. Most of the groups reflect arts and crafts activities (26% of the total), followed by music and exercise (10% each), and local history and IT (8% each). A diverse range of activities are reflected in the 50 groups including reminiscence, cookery, bowls, creative writing or storytelling, dance, DIY, film, music and movement, activity group and call of the wild activities.

Table 1: The range of activities in "Try Something New"

Kind of activity	Amount of groups	Percentage	Amount of participants involved	Percentage
Art (including mosaic)	8	16.00%	60	16.39%
Crafts (including willow)	5	10.00%	29	7.92%
Music (including music therapy)	5	10.00%	33	9.02%
Exercise	5	10.00%	34	9.29%
Local History	4	8.00%	59	16.12%
IT	4	8.00%	30	8.20%
Reminiscence	3	6.00%	25	6.83%
Cookery (including sugar craft)	3	6.00%	10	2.73%
Gardening	3	6.00%	16	4.37%
Bowls	2	4.00%	16	4.37%
Creative writing or storytelling	2	4.00%	8	2.19%
Dance	1	2.00%	2	0.55%
DIY	1	2.00%	5	1.37%
Film	1	2.00%	8	2.19%
Music and Movement	1	2.00%	14	3.83%
Activity Group	1	2.00%	15	4.10%
Call of the Wild	1	2.00%	2	0.55%
Total	50	100.00%	366	100%

Table 2 shows the geographical distribution of the groups who contributed to the evaluation. They reflect 11 different areas in Wales, being more popular in the Pembrokeshire area (where 9 groups took place, that is the 18% of the total), closely followed by Ceredigion (16%) and Bridgend, Carmarthenshire and Swansea areas (representing the 10% each of them). The rest of areas were those groups where organised were the Flintshire, Conwy, Denbighshire, Wrexham, Neath Port Talbot and Anglesey.

Based on the amount of forms collected, the number of participants per group varied from 2 to 18 (median=7).

Table 2: The range of activities and the amount of participants involved at each area in "Try Something New"

Area	Activity	Number of people in the groups (PLWD and Carers)	Number of groups in each area	Percentage of groups at each area
Bridgend	Christmas Craft	4	5	10.00%
	Gardening Activities	5		
	Gardening and Floristry	5		
	IT	5		
	Local History	11		
Carmarthenshire	Craft Activities	9	5	10.00%
	Christmas Craft	2		
	The Good Old Days – Reminiscence	14		
	Gardening	6		

	Zumba	3		
Ceredigion	Art	6	8	16.00%
		6		
	Mosaics	8		
	Chair Aerobics	7		
		9		
		7		
	Basic Ballroom	2		
	Music Therapy	8		
Pembrokeshire	Music Making	4	9	18.00%
		4		
	Local History	13		
	Rag Rugging Reminiscing	4		
	Rediscover your past	7		
	Activity Group	15		
	Indoor Bowls	5		
	Outdoor Bowls	11		
	Willow (crafts)	6		
Neath Port Talbot	Call of the Wild	2	3	6.00%
	Local History	17		
		18		
Swansea	Cookery	2	5	10.00%
	Percussion and Vocals	8		
	Rhythm and Voice	9		
	Vintage Craft	8		
	Yoga	8		
Conwy	Creative writing	4	4	8.00%
	Art	14		
	iPad	10		
		6		
Denbighshire	Art	7	3	6.00%
	iPad	9		
	DIY	5		
Flintshire	Art	5	4	8.00%
	Sugar Craft	2		
	Creative Storytelling	4		
	Film Club	8		
Wrexham	Art	7	3	6.00%
	Creative Space Art	7		
	Sugar Craft	6		
Anglesey	Music & Movement	14	1	2.00%
TOTAL		366	50	100%

1. What were the expectations of taking part in Try Something New prior to starting the groups?

Three hundred and sixty eight people completed an expression of interest form prior to joining a group (see Figure 1). Two were excluded due to missing or unclear information (unclear as to whether the person completing it was a person living with dementia or a carer) leaving 366 for the evaluation.

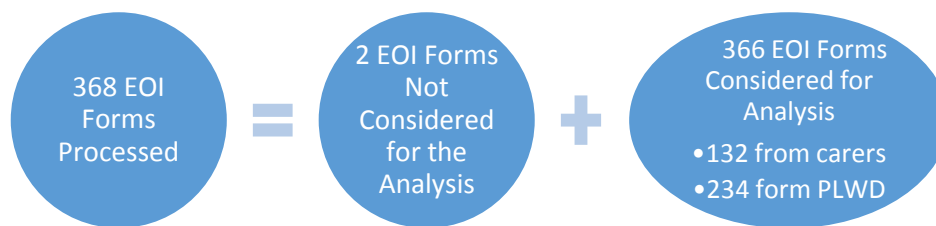


Figure 1. Number of Expression of interest forms included in the evaluation.

Table 3 shows response rates for each of the questions in the expression of interest forms, reflecting people living with dementia and carers' responses separately. In both cases, the question most completed relates to the expected benefits from taking part in the activity groups.

There is a difference between the responses from people with dementia and carers' in relation to a) their relationship with carers accompanying them to the sessions, and b) the date of birth.

Table 3. Response rates for each of the EOI's forms questions

Question	Percentage of responses in PLWD's EOI forms	Percentage of responses in carers' EOI forms
Date of Birth	76.07%	62.12%
What types of activities or courses would you be interested in or would you like to be organised?	89.74%	83.33%
Preferred day	79.91%	76.52%
Preferred time	65.81%	65.15%
More accessible locations/venues	88.89%	84.09%
Benefits expected from the service	98.29%	98.48%
PLWD will be attending on their own or with a carer	94.87%	N/A
Carers' relationship to PLWD (for those who will be attending with a carer)	62.91%	N/A
Do we have verbal consent to hold your data?	87.18%	84.09%
Person who processed the questionnaire	78.21%	83.33%
Date when the form was processed	71.79%	77.27%

Although the total number of expression of interest forms was 366, some of these were completed more than once by some people, as they attended more than one group. Figure 2 shows that 275 individuals benefitted from Try Something New, with some of these attending more than one group.

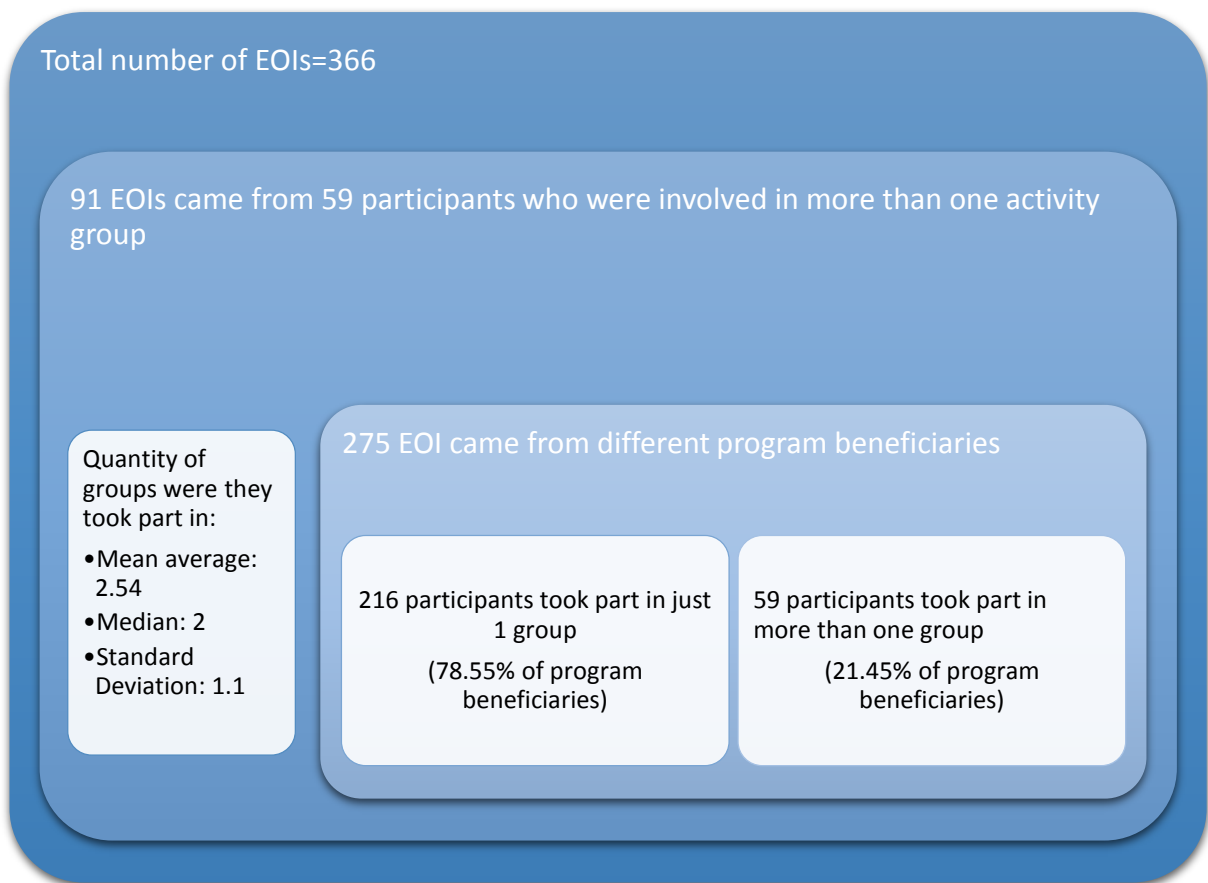


Figure 2. Description of PLWD and carer's EOI forms studied for the current analysis.

Amongst those participants who were involved in more than one activity, the median number of activities is 2.

People living with dementia's description

Age

To estimate age, it was necessary to revise data available (see Figure 3) to use in the estimations. This uses the date of birth provided in the expression of interest form, together with either the date when the expression of interest form was received by the Alzheimer's Society (or if this was missing, date received by DSDC) to estimate the participant's age.

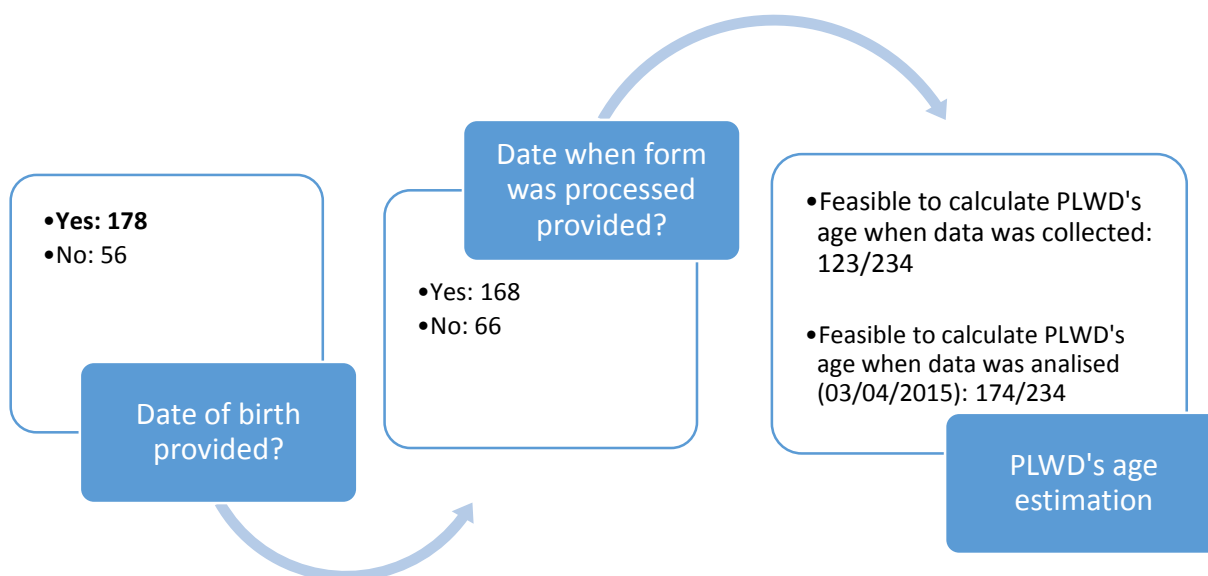


Figure 3. Available data to estimate PLWD's age

PLWD's age at data collection point (included 123 participants' data)		PLWD's age at data analysis point (included 174 participants' data)	
Range: 49 - 98 years	Mean average: 78.65 Median: 79.6 Standard Deviation: 8.96	Range: 49 - 99 years	Mean Average: 78.41 Median: 79.05 Standard Deviation: 9.51

Figure 4. PLWD's age description

This estimation implies that real values may differ slightly, but provides a very good approximation to them. Figure 4 shows that for the people living with dementia who provided enough information to estimate their age were between 49 and 98 years old, with a median around 79.3.

People living with dementia attending on their own or with carer

A total of 222 out of the 234 EOI forms from participants living with dementia completed this question (see Figure 5). Of these, 71 said they would be attending the sessions alone, 147 said they would attend with a carer and 4 responded they would attend both alone and with a carer (depending on carers' availability). Consequently, 151 PLWD at some point were going to attend the sessions

accompanied.

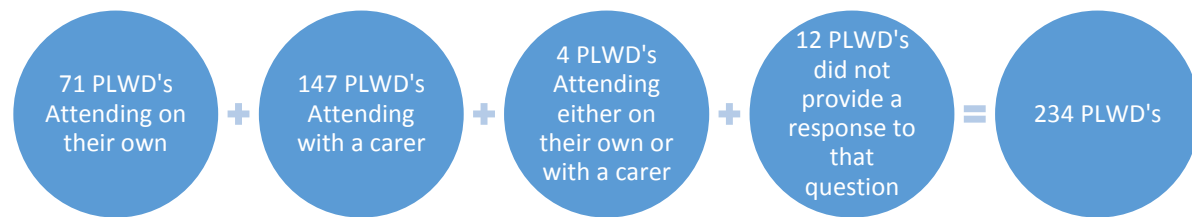


Figure 5. PLWD attending on their own, with a carer or both.

The carers' relationship to people living with dementia taking part in the groups has been analysed taking into account data from 95 of these 151 participants, who said they were going to attend accompanied always or to some of the sessions, meaning that it was not possible to obtain information from the rest of the participants (56).

Table 4 highlights who accompanied the person with dementia to the group. The majority (68.42%) were family members, mainly spouses; followed by professional carers. It was less common that people living with dementia were accompanied by befrienders or friends.

Table 4. Carers' relationship to PLWD taking part in the groups.

Relationship to PLWD	Frequency	Percentage
Family Member - Daughter (7) - Sister (2) - Husband (9) - Wife (21) - Partner (2) - Spouse (24)	65	68.42%
Carer (12) - Carer/Activity Coordinator/Staff member (7) - Carer/Personal Assistant (1) - Paid carer/friend (1) - Professional Carer (1) - Support Worker/Social Services (4)	26	27.37%
Befriender	3	3.16%
Friend	1	1.05%
Total	95	100%

What types of activities or courses would people living with dementia be interested in?

210 out of the 234 people living with dementia responded to this question.

From those 210 respondents, the amount of times that an activity or interest appeared in the EOIs were counted. Afterwards some of those activities were grouped together thematically through their common features. Figure 6 highlights the categories following this thematic aggregation.



Figure 6. Kind of activities or interests expressed by PLWD.

Table 5 shows how often an activity was requested in the EOIs. The broader areas of interest (highlighted in green) reflect a number of activities or interests (as detailed below each of the main areas of interest).

Table 5. Amount of times each activity was requested in PLWD's expression of interest forms.

Activity or Interest	Frequency	Percentage	Activity or Interest	Frequency	Percentage
Making/Creating things	172	34.61%	Sports & ball games	16	3.22%
Christmas Craft	2	0.40%	Sports	1	0.20%
Jewellery making	1	0.20%	Football	1	0.20%
Art, creative, cutting and sculpting	60	12.07%	Short mat bools	1	0.20%
Prints	1	0.20%	Ball games	1	0.20%
Painting and drawing	12	2.41%	Badminton	1	0.20%
Craft	45	9.05%	Snooker	1	0.20%
Pottery	5	1.01%	Stool ball	1	0.20%

Knitting, needlework, embroidery, crochet, sewing	15	3.02%	Bowls	8	1.61%
Hands on activities, making things	6	1.21%	Darts	1	0.20%
Scrapbooking	2	0.40%	Cooking & baking	12	2.41%
Woodwork	8	1.61%	Cooking, baking	5	1.01%
DIY	9	1.81%	Cake decorating, sugar craft	7	1.41%
Men's shed	2	0.40%	Keep fit	31	6.24%
Modelling boats, cars...	1	0.20%	Zumba	2	0.40%
Motorbikes, steam engines, old cars, steam trains	3	0.60%	Keep fit, light exercise, gentle exercise, tai-chi, movement, chair aerobics.	20	4.02%
Socialising activities	14	2.82%	Walking	9	1.81%
Having a cuppa	2	0.40%	Reading & writing	13	2.62%
Socialising, group work	8	1.61%	Reading	4	0.80%
Talking	3	0.60%	Poetry	6	1.21%
Church group	1	0.20%	Storytelling	1	0.20%
Entertaining and games	15	3.02%	Creative writing	2	0.40%
Quizzes	3	0.60%	Music & dance	57	11.47%
Jig-saw Puzzles	4	0.80%	Music	31	6.24%
Crosswords/ Sudoku	2	0.40%	Singing	22	4.43%
Board games	6	1.21%	Dancing	4	0.80%
Nature	40	8.05%	Reminiscence	13	2.62%
Animals	2	0.40%	Reminiscence, rediscover your past	12	2.41%
Nature, wildlife	2	0.40%	Family tree	1	0.20%
Fishing	1	0.20%	Audio-visual activities	13	2.62%
Astronomy	1	0.20%	Photography	5	1.01%
Gardening	30	6.04%	Films	8	1.61%
Outdoors	4	0.80%	Something fun	3	0.60%
History	34	6.84%	IT - Computers, iPad	15	3.02%
History	14	2.82%	Anything/ Don't mind	43	8.65%
Local History	19	3.82%	Don't know/ Not sure	6	1.21%
Military History	1	0.20%	Total	497	100.00%

The total number of interests obtained from the 210 forms was 497. Participants were invited to give as many responses as they wished. Consequently a median number of 2 responses were extracted from each form.

Table 5 shows the most popular activities or interest are those related to making and creating things, followed by those involving music and dance.

How do people living with dementia hope to benefit from the service?

It is important to highlight that this question was the one with the highest response rate, only 4 out of the 234 EOLs did not contain an answer to this question.

Again, as in the previous point, the number of times that a particular benefit appeared was noted and some of the responses which reflecting a broader theme were grouped into the same response category. Main categories are listed in the table below (Table 6) and marked in bold and green colour, and those alternative responses with the same meaning are also detailed in white in the same row.

The total number of benefits listed were 533, as this open question permitted participants to provide more than one benefit expected. Each person gave a median of 2 responses.

Table 6 list the expected benefits from taking part in the activities in order, starting with the most common benefit anticipated and finishing with the less representative of them.

Table 6. PLWD's expected benefits from taking part in the activities

Expected benefit from taking part in the activities	Frequency	Percentage
Engaging socially - Socialising/ Interacting/ Making new friends/ Meeting people/ Social Aspect of the group	146	27.39%
Getting involved in a activity - (Re-) Engage/Involvement in a (meaningful) activity	61	11.44%
Enjoyment and having fun	48	9.01%
Getting out the house	43	8.07%
Keeping (physically) active	36	6.75%
Trying a new activity	34	6.38%
Developing a skill/ability - Understanding, learning, know how.	33	6.19%
Engaging with an interest - Entertainment, Occupation, Distraction	32	6.00%
Stimulating my mind - Keeping my mind active/occupied, Improving my concentration, Improving my memory	19	3.57%
Getting support and companionship from equals	14	2.63%
Building up confidence	12	2.25%
Sharing and enjoying an activity together with their carer	11	2.06%
Remaining an active member in my local community - Engaging in local activities	10	1.88%
Maintaining or gaining Independence	8	1.50%

Bringing back memories - Reminiscence	4	0.75%
Reducing anxiety/ stress - Relaxing	4	0.75%
Not sure/ I don't know	4	0.75%
Combating feelings of isolation and boredom	3	0.57%
Sharing knowledge and experiences	3	0.56%
Continuing this activity at home - Applying that knowledge in daily life	2	0.38%
Receiving information from AS	2	0.38%
Giving a break to the carer	2	0.38%
Anything	1	0.19%
Providing time structure to week	1	0.19%
Total	533	100%

As reflected in the above table, the most expected benefit from taking part in the groups' organised is the social engagement (27.39%), getting involved in an activity (11.44%), enjoyment and having fun (9.01%), as well as getting out of the house (8.07%).

The rest of the responses (44.09%) could also have been grouped in bigger categories to gain more significance, but in doing so would miss important details such as the difference appreciated amongst people living with dementia between keeping physically or mentally active.

Which are the venues or locations more accessible for people living with dementia?

208 responses were provided to this question in the EOIs. As shown in Table 7, these mainly reflect preferences for an area/village/town.

Table 7. PLWD's preferred venues

PLWD's preferred venue	Frequencies	Percentages
Anywhere	29	11.79%
Any	22	8.94%
Easily accessible locations	6	2.44%
South of the country	1	0.41%
Somewhere in particular	217	88.21%
Bridgend area - Pencoed, Porthcawl, Bridgend Alzheimer's Society Office	12	4.88%
Carmarthenshire - Llanelli area, Gwalia Mynydd Mawr –Tumble -Llanelli, Felinfoel, Newcastle Emlyn, Llanybydder, In home or Ammanford area, Llandeilo, Cross Hands	42	17.07%
Ceredigion - Aberystwyth area, Cardigan, Lampeter, Aberaeron -at Min y Mor Residential Home-	31	12.60%
Pembrokeshire - Pembroke, Foundry house, Haverfordwest area, Crundale, Fishguard	26	10.57%

Neath Port Talbot - Caewern Community Centre	15	6.10%
Swansea - At the Centre, Cymbrula, Linden Centre, Mumbles, Ystradgynlais area, Sketty Park, Llys-y-Werin, Ty Waunarlwydd	36	14.63%
Conwy - Abergele, Rhos on sea	13	5.28%
Denbighshire - Rhuddlan, Ruthin, Prestatyn, Rhyl	14	5.69%
Anglesey - Llangefni	6	2.44%
Gwynedd - Bangor	2	0.81%
Wrexham - Chirk	11	4.47%
Flintshire - Holywell, Mold, Hawarden	9	3.66%
Total (PLWD responded to this question: n=208; PLWD didn't respond to this question: n=26)	246	100.00%

Carers' description

Age

Figure 7 illustrates how the age of the carer was ascertained. This uses the date of birth provided in the expression of interest form, together with either the date when the expression of interest form was received by the Alzheimer's Society (or if this was missing date received by DSDC) to estimate the participant's age.

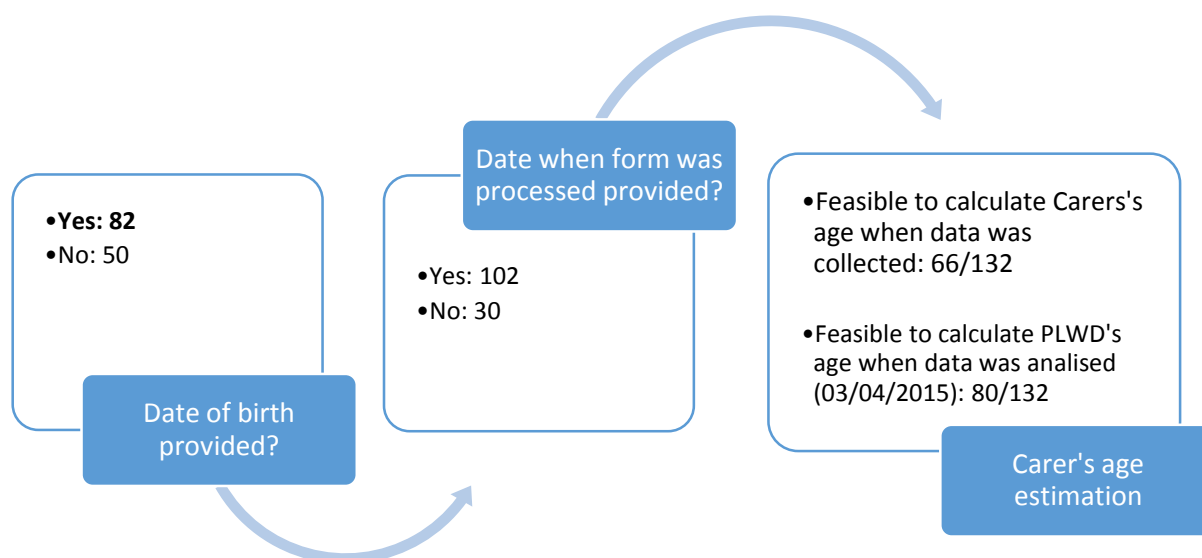


Figure 7. Available data to estimate carers' age

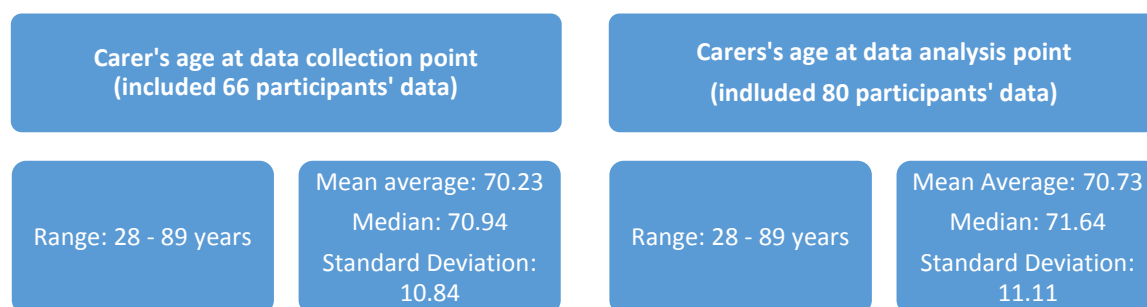


Figure 8. Carers' age description

Figure 8 shows that for the carers who provided enough information to estimate their age were between 28 and 89 years old, with a median around 71.29.

What types of activities or courses would they be interested in?

110 out of the 132 carers' expression of interest forms had responses to this question. 22 did not provided an answer.

From those 110 respondents, the amount of times that an activity or interest appeared along the forms was counted. Afterwards some of those activities were grouped together thematically to reflect their common features. Figure 9 presents the categories after conducting this thematic aggregation.

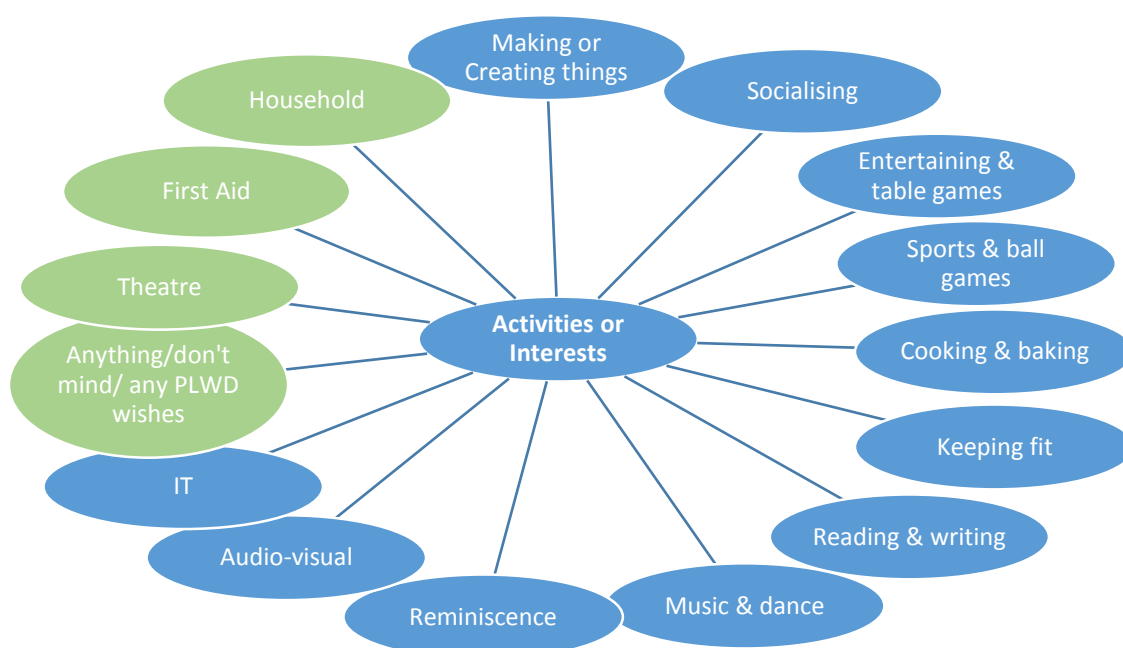


Figure 9. Activities or interests expressed by carers.

This time categories are shown in two different colours to indicate the ones that have been added (household, first aid and theatre) or modified (Anything/don't mind, which now includes also "any PLWD wishes") to the ones created for people living with dementia. For carers' analysis, the categories "don't know/not sure" and "having fun" are not reflected in their responses, so they have been deleted.

A detailed list of frequencies and percentages of occurrence for each category is provided in Table 8. Amongst carers, making or creating activities are also the most popular, followed by the "anything or don't mind" category, which in this occasion has grown in representation of those carers who responded they would be interested in taking part in any activity their relative or individual who are providing care to wants to take part in.

Table 8. Amount of times each activity was requested in carers' expression of interest forms.

Activity or Interest	Frequency	Percentage	Activity or Interest	Frequency	Percentage
Making/Creating things	77	33.48%	Sports & ball games	2	0.87%
Christmas Craft	2	0.87%	Bowls	2	0.87%
Art, creative, cutting and sculpting	25	10.87%	Cooking & baking	7	3.04%
Painting and drawing	4	1.74%	Cooking, baking, food tasting	4	1.74%
Craft	20	8.70%	Cake decorating, sugar craft	3	1.30%
Pottery	2	0.87%	Keep fit	18	7.83%
Knitting, needlework, embroidery, crochet, sewing	3	1.30%	Keep fit, light exercise, gentle exercise, tai-chi, movement, chair aerobics.	14	6.09%
Hands on activities, making things	3	1.30%	Walking	4	1.74%
Scrapbooking	11	4.78%	Reading & writing	5	2.17%
Woodwork	2	0.87%	Reading	3	1.30%
DIY	5	2.17%	Poetry	1	0.43%
Socialising activities	5	2.17%	Creative writing	1	0.43%
Having a cuppa, lunch club	1	0.43%	Music & dance	14	6.09%
Socialising, group work	3	1.30%	Music	6	2.61%
Talking	1	0.43%	Singing, choir	7	3.04%
Entertaining and games	2	0.87%	Theatre	1	0.43%
Jig-saw Puzzles	1	0.43%	Reminiscence	8	3.48%
Board games	1	0.43%	Reminiscence, rediscover your past	7	3.04%
Nature	15	6.52%	Family tree/history	1	0.43%
Astronomy	1	0.43%	Audio-visual activities	5	2.17%

Gardening	13	5.65%	Photography	2	0.87%
Outdoors	1	0.43%	Films	3	1.30%
Household/basic skills	1	0.43%	Basic first aid	2	0.87%
History	23	10%	IT - Computers, iPad	20	8.70%
History	5	2.17%	Anything/ Don't mind	26	11.30%
Local History	18	7.83%	Any activity PLWD wishes (12)		
Total				230	100%

How do you hope to benefit from the service?

As occurred with people living with dementia, this was the question with the highest response rate (98%). Only 2 out of those 132 forms did not include an answer to this question.

The number of times that a particular benefit was mentioned was noted. Some of the responses which show a clear proximity in meaning were grouped into the same response category. Compared to the list created for people living with dementia's responses, carers' one include a distinctive category "take a break as a carer", which of course could only apply to them as a benefit. In parallel, this time the category "sharing an activity together" has been adapted to the fact of sharing an activity with the person living with dementia.

The total number of benefits listed through those 130 expression of interest forms was 302, as this open question permitted participants to provide more than one benefit expected. That means that each carer specified a median of 2 benefits.

Table 9 presents the expected benefits from taking part in the activities. These are presented to reflect those identified previously for people living with dementia, so that is possible to appreciate a difference in people living with dementia's prevalent benefits compared to the ones given by carers.

Table 9. Carers' expected benefits from taking part in the activities

Expected benefit from taking part in the activities	Carer's forms Frequencies	Carer's Percentages	PWLD's Percentages
Engaging socially - Socialising/Interacting/Making new friends/Meeting people/Social Aspect of the group	80	26.49%	27.39%
Getting out the house	27	8.94%	8.07%
Developing a skill/ability Understanding, learning, know how	26	8.61%	6.19%

Sharing and enjoying an activity together with the PLWD	22	7.28%	2.06%
Benefit/interest/enjoyment for PLWD	22	7.28%	
Getting involved in a activity - (Re-) Engage/Involvement in a (meaningful) activity	21	6.95%	11.44%
Enjoying and having fun	19	6.29%	9.01%
Getting support and companionship from equals	19	6.29%	2.63%
Engaging with an interest Entertainment, Occupation, Distraction, Something to talk about	14	4.64%	6.00%
Keeping (physically) active	8	2.65%	6.75%
Receiving support and information from AS	7	2.32%	0.38%
Sharing knowledge and experiences Sharing memories and stories	7	2.32%	0.56%
Trying a new activity - I didn't know I could be creative	5	1.66%	6.38%
Stimulating my mind - Keeping my mind active/occupied, Improving my concentration, Improving my memory	6	1.99%	3.57%
Building up confidence	5	1.66%	2.25%
Taking a break as carer	4	1.32%	0.38%
Remaining an active member in my local community - Engaging in local activities	4	1.32%	1.88%
Bringing back memories - Reminiscence	2	0.66%	0.75%
Continuing this activity at home - Applying that knowledge in daily life	2	0.66%	0.38%
Combating feelings of isolation and boredom	1	0.33%	0.57%
Maintaining or gaining Independence	1	0.33%	1.50%
Not sure/I don't know	0	0%	0.75%
Reducing anxiety/stress - Relaxing	0	0%	0.75%
Anything	0	0%	0.19%
Providing time structure to week	0	0%	0.19%
Total	302	100%	100%

It is also interesting to point out that in 22 occasions carers cited the fact that they wanted to help, assist or accompany people living with dementia.

Which are the venues or locations more accessible for carers?

111 carers responded this this question (see Table 10). These are presented to reflect the carers with no preference towards the location or venue (as they respond 'any location' or provided a general answer such as "easily accessible locations" or "any") and then to the carers with preference for some specific places in Wales.

Preferences towards a particular town have been noted, as a list was created with the different towns mentioned in the forms and the area where they belong to,

whereas the occurrences' shown in the below table are reflecting the counting along areas and not specific towns.

Table 10. Carers' preferred venues

Carers' preferred venue	Frequencies	Percentages
Anywhere	23	15.86%
Any	20	13.79%
Easily accessible locations	3	2.07%
Somewhere in particular (Local)	122	84.14%
Bridgend area - Pencoed, Porthcawl, Bridgend Alzheimer's Society Office	13	8.97%
Carmarthenshire - Llanelli area, Felinfoel, Newcastle Emlyn, Llanybydder, Ammanford area, Llandeilo, Cross Hands	22	15.17%
Ceredigion - Cardigan, Lampeter, Aberaeron, Aberporth	12	8.28%
Pembrokeshire - Foundry house, Haverfordwest area, Crundale, Fishguard	18	12.41%
Neath Port Talbot - Caewern Community Centre	17	11.72%
Swansea - Ystradgynlais area	2	1.38%
Conwy - Abergele, Rhos on sea, Colwyn Bay	17	9.66%
Denbighshire - Ruthin	7	4.83%
Anglesey - Llangefni	7	4.83%
Gwynedd	1	0.69%
Wrexham - Chirk	4	2.76%
Flintshire	5	3.45%
Total (Carers responded to this question: n=111 ; Carers didn't respond to this question: n=21)	145	100.00%

Results show a clear preference for venues located in areas close to participants' place of residence.

2. What are the benefits of taking part in Try Something New – what impact has it had on people's lives?

This section uses qualitative analysis to explore the perspectives and experiences of:

- Enjoyment when taking part in the activities at the Activity Groups.
- Increase of opportunities for socialising originated by taking part in "Try Something New".
- Adoption of a more positive outlook on life.
- Improvement in living with dementia.

The total number of groups who provided feedback for the focus group evaluation was 48. One evaluation form was incomplete so has not been included.

Table 11 shows the sum of responses provided by participants along the five yes/no/don't know questions from the focus group evaluations. The proportion of replies for each question is calculated to facilitate data interpretation. The bottom two rows contain the total number of responses recorded for each question, reflecting the amount of participants giving their opinion in the focus group. The response rate estimate is derived from the assumption that the total amount of participants involved in the focus group were 267, which corresponds to the number of people who responded to the most answered question (number 4).

Table 11. Responses provided by participants to the close questions asked along focus groups.

Questions	Q1. Do you enjoy taking part in the activities at the Activity Group?			Q2. Do you have a choice about which activities you take part in?			Q3. Does coming to the Activity Group give you more opportunities for socialising?			Q4. Does coming to the Activity Group help you to have a more positive outlook on life?			Q5. Does coming to the Activity Group help you to live better with dementia?		
Responses	Yes	No	Don't know	Yes	No	Don't know	Yes	No	Don't know	Yes	No	Don't know	Yes	No	Don't know
Number of responses given	247	5	12	213	10	25	216	17	26	210	21	36	168	14	63
% of each response	93.56	1.89	4.55	85.89	4.03	10.08	83.40	6.56	10.04	78.65	7.87	13.48	68.57	5.71	25.71
Amount of responses	264			248			259			267			245		
Response rate per question	98.88%			92.88%			97.00%			100.00%			91.76%		

Frequencies shown in the above table (please see row "number of responses given" in Table 11) are clearly reflecting a positive tendency in the answers for each of the questions formulated to participants. The majority reported enjoyment, they could make a choice, they had more opportunities for socialising, it helped them to have a more positive outlook on life and to live better with dementia.

It is possible that more than 267 participants were involved in the focus group evaluation, but information was not collected about the total number of people contributing to the group evaluation. Consequently a reference quantity has been taken from the most answered question in order to facilitate data analysis.

The range of activities were split into 4 groups during the study of the verbatim responses given by participants (see Figure 10). This enables comparisons and any emergent difference in answers to be identified.

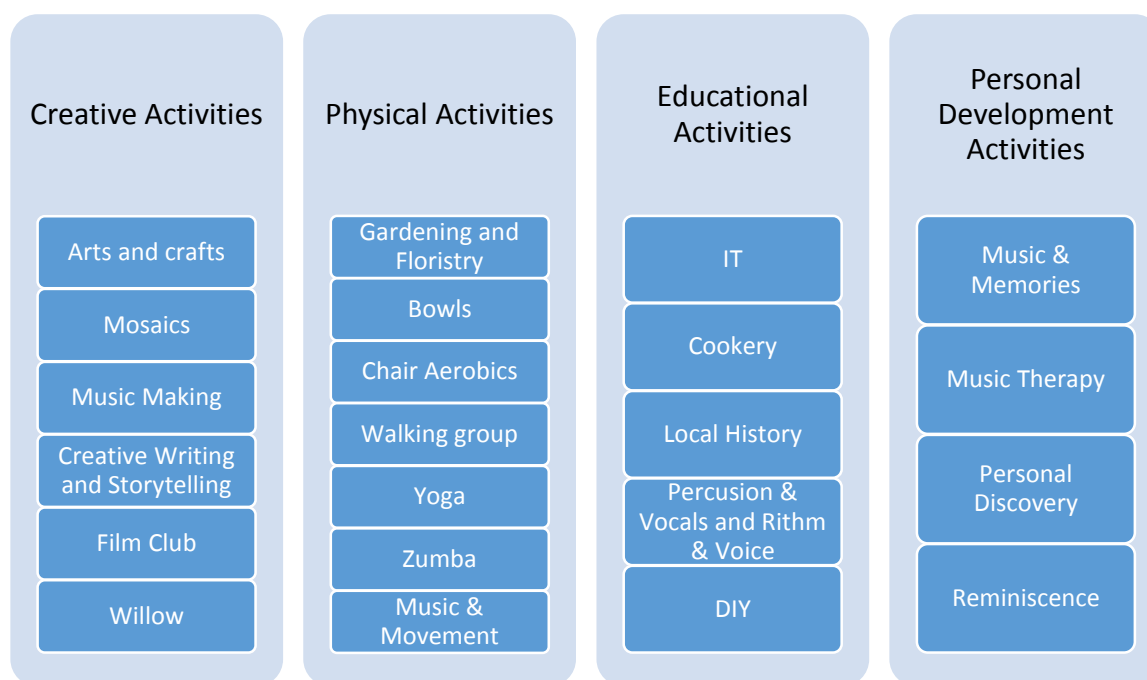


Figure 10. Activities groups divided per thematic areas.

Each of these activity areas reflect differing numbers of groups and participants (Figure 11):

Creative Activities	Physical Activities	Educational Activities	Personal Development Activities
<ul style="list-style-type: none"> •18 groups •86 participants 	<ul style="list-style-type: none"> •11 groups •66 participants 	<ul style="list-style-type: none"> •12 groups •79 participants 	<ul style="list-style-type: none"> •6 groups •36 participants

Figure 11. Number of groups and participants comprised in each activity area.

It should be noted that textual responses to question 2 (Do you have a choice about which activities you take part in?) have not been analysed further as they did not provide any additional relevant information to the analysis.

Table 12 presents the number of comments related to each theme for the different questions according to the type of activity group attended (creative, physical, educational or personal development). The total amount of comments classified according to type of activity and underlying theme across those five questions were 749.

Table 12. Number of comments related to each theme provided by participants across the different questions according to the type of group attended.

Questions/ Kind of activity	Identified themes	Creative	Physical	Educational	Personal Development
Do you enjoy taking part in the activities at the Activity Group?	Engagement with staff and volunteers	5	1	5	1
	Opportunity to develop an interest and engage with an activity	38	34	33	13
	Activity setting or characteristics	5	4	9	4
	Perceived benefits for their selves	18	15	16	11
	Perceived support and social interaction	13	7	8	7
Does coming to the Activity Group give you more opportunities for socialising?	Meeting new people and feeling part of a group	21	21	26	13
	Getting out of the house	6	4	1	1
	Engaging in conversation	10	6	2	2
	Normalising dementia	0	2	0	0
Does coming to the Activity Group help you to have a more positive outlook on life?	Improving psychological conditions	30	20	26	12
	Providing respite and knowledge about dementia to carers	0	4	0	2
	Increasing enjoyment opportunities	14	13	14	7
	The widespread of gained knowledge into daily life	1	1	2	1
	Normalising dementia	4	3	1	1
Does coming to the Activity Group help you to live better with dementia?	By having more information and normalising living with dementia	2	2	3	1
	By trying and having a new interest, something different to do	12	10	6	3
	By increasing socialising opportunities	8	7	7	7

How do you think the Activity Group could be improved?	By increasing psychological wellbeing	14	12	9	8
	By providing respite and resources to carers	3	2	2	0
	Sessions' settings	27	24	10	14
	Accessibility	0	1	4	1
	Activities' continuity	1	5	7	2
	Other recommendations	5	2	4	6
	Total amount of comments	237	200	195	117

The analyses finds that similarities in the themes across all the activity areas. It is interesting to note that, the most popular theme for each of the questions (as marked in bold text) is the same across the different activity areas, highlighting the importance of those particular themes.

For each of the questions, participants have repeated the same or a very similar explanation to describe the reasons why they have enjoyed taking part in the activities, had more opportunities to socialise, increased their positive outlook on life or learned to live better with dementia. These responses suggest that the opportunity to develop an interest and engage with an activity, as well as to meet new people and feel part of a group, together with the improvement of psychological conditions or wellbeing are the key factors for participants to benefit from the programme.

In the case of the last question (presented in Table 12), most of the suggestions made by participants as areas of improvement in the programme implementation are related to the same theme: the setting for the sessions.

Table 13 shows the percentage of responses generated by participants for the different questions, depending on the activity areas. The greatest number of responses were obtained (32.98%) for the first question (do you enjoy taking part in the activities at the Activity Group?).

The question which asks how the groups might be improved received the fewest number of responses (15.09%).

Table 13. Proportions of response given by participants taking part in each of the activity areas for each of the questions.

Questions	Creative Activities	Physical Activities	Educational Activities	Personal Development Activities	Average percentage of responses per question across activity areas
Do you enjoy taking part in the activities at the Activity Group?	33.33%	30.50%	36.41%	30.77%	32.98%

Does coming to the Activity Group give you more opportunities for socialising?	15.61%	16.50%	14.87%	13.68%	15.35%
Does coming to the Activity Group help you to have a more positive outlook on life?	20.68%	20.50%	22.05%	19.66%	20.83%
Does coming to the Activity Group help you to live better with dementia?	16.46%	16.50%	13.85%	16.24%	15.75%
How do you think the Activity Group could be improved?	13.92%	16.00%	12.82%	19.66%	15.09%

The textual responses to the focus group questions (in Table 13) are now explored in detail.

Did participants enjoy taking part in the activities at the Activity Group?

Table 14 presents the responses in relation to question 1.

Table 14. Q1: Do you enjoy taking part in the activities at the Activity Group? Proportion of responses in each activity area.

Kind of Activity/ Identified themes	Creative	Physical	Educational	Personal Development
Engagement with staff and volunteers	6.33%	1.64%	7.04%	2.78%
Opportunity to develop an interest and engage with an activity	48.10%	55.74%	46.48%	36.11%
Activity context or characteristics	6.33%	6.56%	12.68%	11.11%
Perceived benefits for themselves	22.78%	24.59%	22.54%	30.56%
Perceived support and social interaction	16.46%	11.48%	11.27%	19.44%

The most frequently occurring theme suggests the importance of having an opportunity to develop an interest and engage with an activity as the main reason for having enjoyed their experience taking part in the activities. The perceived benefits for themselves by getting involved, the perceived support and the social interaction gained through it were less frequently mentioned. The two other themes identified that received the fewest responses were those related to the activity setting and characteristics, and the engagement with staff and volunteers.

Participants enjoyed taking part in the activities, and remarked though their comments that this was thanks to the:

- ✓ **Engagement with staff and volunteers** who were described with positive adjectives as “great”, “nice”, “expert”, “magnificent”, “brilliant”

and “patient” by different participants. They “encouraged” participants and made them “get involved” and “feel welcomed” into the activity groups.

- ✓ **Opportunity to develop an interest and engage with an activity** they could carry on with in their daily life. Even when some of the participants “had never give it a go”, after accepting the “challenge” have now developed “some interest” and feel they “would like to do more” of this “absolving hobby”.

They would like to get involved in other similar groups and are willing to apply their gained knowledge at home. The fact of trying a new activity, feeling comfortable and accepted while doing it and developing a new interest, has contributed to increase their openness to the experience, to the extent that some of them expressed their intention to carry on with this interest in other settings and even try other new activities or groups.

For one of the participants involved in a creative activity, this was the first time he/she had done art “since school days in 1950s”; whilst another reflected this experience “has opened my eyes and mind so that I can take a fresh view of familiar objects and thus see them from different aspect and open them to different perspectives”.

It seems that once the barrier of trying a new activity is overcome, participants enjoy taking the challenge of “getting better each week”, as a participant of one of the physical activities pointed out. This opportunity has been used by some participants to learn about something that they “had no idea existed”, as in the case of one involved in an educational activity, enabling them to try something different. This also allowed them a “change of scene from home” and “get out into the fresh air and do something active”. This idea of keeping active was repeated amongst those taking part in physical activities.

Participants showed a clear engagement with the activity, with one saying “It shows if people are attending the group every week that are enjoying the group” and by comments like “It perked me up”. Such engagement was obvious also to carers, who pointed out that “it was lovely to see him (participant living with dementia) get involved. It’s normally difficult to get him to get up and go.” Another carer was surprised, because she “didn’t think [specific person living with dementia] would like it, but she loves it”.

Participants have also referred in various occasions to their willingness to carry on with their new interest, some of them were “looking forward to it (the activity group) restarting” while others realised that was

“something they could carry on at home” and others “would like to do more activities”.

- ✓ **Activities’ context or characteristics** were described as having a “lovely atmosphere”, “relaxing and comfortable” and “informal and flexible” along the different kind of activities organized. Two particular relevant characteristics from those activities are the fact that they useful (i.e. “it gave them something useful to do” and “I have never used an iPad before so I found it very informative. As a result I have purchased an Apple iPad”) and relevant for participants as well as inclusive to people with diverse needs (i.e. “one of the members said that despite not being able to move his feet very quickly he enjoyed moving his hands to the music”).
- ✓ **Perceived benefits for their selves** related to their physical health or psychological wellbeing –by raising confidence, independence and self-worth, apart from bringing back memories and by sharing a common interest with the person living with dementia or carer.

The physical health improvement was valued by those who were involved in physical activities, they reported it was “good for coordination and exercise” or that “it helped them to feel fitter and to have more energy”. Those in the music and movement activity felt that “the music lifted their spirits”.

Psychological wellbeing is reflected in numerous participants’ quotes, along the entire range of activities. In the creative activities, the most relevant impact was in raising self-worth “He liked bringing what he made home to show us – it gave us something to talk about with him”. A carer reported that “they would like to make a mosaic for the care home so they can show off their new skills!” Activities could also be empowering, as one carer indicates that they were “Helping my husband to achieve something worthwhile”.

In the educational activities one of the carers remarked: “It was a benefit to me because I could see he was a lot calmer. In other groups he has been quite irritable and I really noticed the difference”. A person living with dementia noted that they were able to do something which challenged expectations of their ability. Some of the carers were also able to discern this impact in their relatives as in the case of the personal development activities where one says “It was amazing to hear [participant with dementia] speak Welsh. Even though we try she won’t talk back to us. To hear her like that was fantastic”. Some of the participants valued also the impact on their wellbeing saying “Nothing else to content my mind with other than this” or increasing self-worth by saying “I didn’t know I still knew the words”.

Bringing back memories can evoke happy times for the participants, and it can help them to re-experience this emotional state in the present. There were indications of increase in self-esteem through feeling useful, facilitated by maintaining a conversation and feeling proud about what they did and lived. This has a positive impact on their wellbeing and facilitates their integrity perception by seeing themselves as leading a successful life.

Sharing a common interest between the carer and person living with dementia also promotes participants' wellbeing, not only because they can do something together again, but also because it helps them to normalise living with dementia. The carers frequently realised that the person living with dementia was still able to engage in activities that they did not expect.

- ✓ **Perceived support and social interaction** is reflected in comments describing the activity setting as a source of information about other activities available, support coming from people in the same situation and the organization for both the person living with dementia and the carers. This programme allows “people with dementia to be introduced to others and support access to do different activities”.

Perceived support has more representation along creative and educational activities participants. Whereas the enjoyment originated from social interaction is widely represented by participants from all activity groups. People living with dementia and carers like to be with people, enjoying the interaction “The social company makes you talk amongst everyone else”, other participants enjoy meeting people and making general conversation.

A couple of comments indicate they did not enjoy the activity because they did not like it, although one of them specified that enjoyed the associated conversations.

Did attending to the Activity Group give participants more opportunities to socialise?

Meeting new people and feeling part of a group was most frequently reported (Table 15) one, followed by engaging in conversation and getting out of the house. The less commonly quoted theme was normalising dementia, identified in the physical activity groups. These indicate the different outcomes that opportunities for socialising may create.

Table 15. Q3: Does coming to the Activity Group give you more opportunities for socialising? Proportion of responses in each activity area.

Kind of Activity/ Identified themes	Creative	Physical	Educational	Personal Development
Meeting new people and feeling part of a group	56.76%	63.64%	89.66%	81.25%
Getting out of the house	16.22%	12.12%	3.45%	6.25%
Engaging in conversation	27.03%	18.18%	6.90%	12.50%
Normalising dementia	0.00%	6.06%	0.00%	0.00%

The following quotes and explanations illustrate the 4 themes in table 15.

- ✓ **Normalising dementia** was mentioned by physical activities participants, saying “I can forget I have dementia” or “It was something we could do together. There’s not many things that we can do as a couple and enjoy it”. This aspect is particularly important for carers to be able to facilitate that people living with dementia can get engage in activities and promote their integration in the community.
- ✓ **Getting out of the house** was an important reason for participants from all the 4 activity groups, with more people stating this as a reason from the creative activities groups. By getting out of the house, participants had the opportunity to socialise with other than relatives who visit people living with dementia in the home and to meet new people and get involved in a new activity “gave them the incentive to go out”.
- ✓ **Meeting new people and feeling part of a group** with whom to share an interest and receive support was important. Participants highlighted they made new social contacts with whom they would like to keep in touch with after the end of the groups. This suggests a broadening social network. For one of the carers an important aspect was “meeting the same people every week and having more in common with the activity rather than just the fact of caring with someone with dementia”. One of the participants felt that keeping in touch with people who were friendly made him enjoy and “It helped me to be friendly with people”.
- ✓ The common bond from interacting with people living a similar situation was described by some participants as “lovely to meet new people and know that they understand what they are all going through “ and “ the opportunity to enjoy the company of like-minded and friendly people who accepted one’s presence mater-of-factly without question”. In the same line, some of the participants stressed the fact that they “felt part of the group – it didn’t matter if he/she forgot because they did too! We could have a laugh about it”, because attending to the group helped

some of them to accept their condition and stop thinking that there was no hope for them anymore.

- ✓ **Engaging in conversation** was important both in the session and outside of it. By engaging in conversation during the session participants could have a laugh and some of them enjoyed by listening to each other. This was also positive for those participants living in a care setting as “they could go together as a group and interact”.

In the case of some of the participants taking part in creative activities, they pointed out that they could engage in conversation with others by telling them about what they were doing in the sessions. For a couple of participants “it got them talking about what they had done together- they felt part of the group”.

Some quotes from participants living together in a care setting indicate that there were no new opportunities to socialise as they knew each other previously.

Did attending to the Activity Group help participants to have a more positive outlook on life?

The fourth question reveals five themes that may support a positive outlook on life (see Table 16).

Table 16. Q4: Does coming to the Activity Group help you to have a more positive outlook on life? Proportion of responses in each activity area.

Kind of Activity/ Identified themes	Creative	Physical	Educational	Personal Development
Improving psychological well-being	61.22%	48.78%	60.47%	52.17%
Providing respite and knowledge about dementia to carers	0.00%	9.76%	0.00%	8.70%
Increasing opportunities for enjoyment	28.57%	31.71%	32.56%	30.43%
The diffusion of gained knowledge into daily life	2.04%	2.44%	4.65%	4.35%
Normalising dementia	8.16%	7.32%	2.33%	4.35%

The vast majority of the participants responded positively to this question, emphasising that their engagement with the group had made it possible to achieve a more positive point of view on their lives. Their verbatim responses reveal that psychological wellbeing is a key factor to make this possible, followed by increasing enjoyment opportunities.

- ✓ **Improving their psychological wellbeing** included a wide variety of sub-themes or supporting arguments such as:

- Reducing isolation and loneliness feelings: “Realising one is not on their own”.
- Increasing positive feelings and mood: “[Specific person living with dementia] always had a smile on her face after being at the group”, “It was a bit of fun and left us feeling good for the afternoon” or “I came out of the group happy and felt like I’d really achieved something”.
- Reducing anxiety and promoting relaxation: “The group has been very good in keeping my worries in the dim and distant” or “everyone agreed they felt more relaxed after coming to the group”.
- Raising confidence, pride, self-satisfaction and self-worth: “I didn’t know I would be so good!”, “Made her able to do things she never thought she could because of her bad hands – she is proud of her work”.
- Feeling useful: “I like to show people what I have made – it made me feel useful”.
- Feeling brighter: “participants said that in general singing and hearing the music cheered them up and made them feel brighter”.
- Facilitating reminiscence: “Reminded me about things I used to do or have wanted to do in the past. May not want to do them all, but want to do some”.

- ✓ **Providing respite and support to carers.** By getting carers involved in the activity groups, they were able to learn more about dementia and the preserved capabilities their relatives maintain. In this way, they gained a more realistic view of dementia. There is also suggestions that it improved their personal wellbeing by providing a break from day-to-day care.

One of the carers said “I enjoy more because my husband shows some interest in something other than just sitting”. Other carers refer to the possibility to have a respite from caring as “I could be me. A break of being a carer” or “It takes my mind off caring”.

- ✓ **Increasing enjoyment opportunities** by the enjoyment from taking part in an activity or socialising with people in the group, sharing an interest with the person living with dementia or carer and challenging themselves to try something new. Some participants referred to the “genuine interest in learning new things” and the characteristics of the

group “The group has been very enjoyable and gave us something to look forward to”.

- ✓ **The diffusion of gained knowledge** into participants’ daily life.
Participants had the opportunity to apply the knowledge obtained in the group context to their personal lives. Some participants referred to the activities they could carry on doing at home “We would sing the songs at home”, “It made me do more exercise at home when I practiced what we learnt”.
- ✓ **Normalising dementia** and avoiding being dementia the centre, taking part in the activity groups and having something different to talk about “gave us something else to focus on other than his dementia”, “We didn’t talk about d word!” and each participant was “treated as an individual”.

Did attending to the Activity Group help participants to live better with dementia?

Table 17 presents the themes which enabled the participants to live better with dementia.

Table 17. Q5: Does coming to the Activity Group help you to live better with dementia? Proportion of responses in each activity area.

Kind of Activity/ Identified themes	Creative	Physical	Educational	Personal Development
By having more information and normalising living with dementia	5.13%	6.06%	11.11%	5.26%
By trying and having a new interest, something different to do	30.77%	30.30%	22.22%	15.79%
By increasing socialising opportunities	20.51%	21.21%	25.93%	36.84%
By increasing psychological wellbeing	35.90%	36.36%	33.33%	42.11%
By providing respite and resources to carers	7.69%	6.06%	7.41%	0.00%

The activity groups helped them to live better with dementia by providing opportunities for:

- ✓ **Gathering more information and normalising living with dementia**
gaining greater knowledge about dementia and preserved abilities in people living with dementia, and reduce the impact of putting dementia in the centre of their lives. One of the participants said “I feel I have learnt a bit more about dementia by seeing how other people are with it” while another one emphasised “We didn’t even mention dementia”,

showing the importance of normalising their condition, and be able to maintain other kind of conversations.

- ✓ **Trying something new and having something different to do**
reflected challenging themselves to try new things and show progress: “It helps me to try and get things right and push myself”. An opportunity to do something different “It broke our day up”, or discovering and developing an interest, carrying on with this new interest at home or giving it continuity: “We can still come up and visit the allotment even though the group has finished. It gives us something to do”. Also getting out of the home and engaging with staff and the activity itself.
- ✓ **Increasing socialising opportunities and social network** by providing something to talk about and meeting equals who can be a source of support and comprehension. The idea of “being with people who are on a similar level as you. Gives you a bit more thought – what can I do today and it’s there ready for you” was as common as empathy and understanding. “They know how I feel”, “You realise that things that annoy you annoy them too, I felt part of them”. Some were proud for having “something worthwhile to share with others”, which made them wanting to meet again (“Would like to meet them again”).
- ✓ **Improving psychological wellbeing**, such as self-worth and promoting positive states and feelings as relaxation (“I felt able to switch off and just enjoy”), feeling alive, useful (“I’ve enjoyed coming to the activity group. It’s a couple of hours stress free and being able to try one or two DIY things I would not have tried before”), proud, normal, accepted, less lonely, more confident and cheered up (“I can go in the shop and say I have Alzheimer’s. I feel much more confident”, “We had a good laugh-therapy for the heart”), as well as bringing back memories (“It helped me to jog my memories”) that help them to re-experience good times.
- ✓ **Providing respite and resources to carers**, as an opportunity to learn new skills which will make possible a better attention to the person with dementia and a source of care for the carer itself. Offering this break of the caring role to the carers benefits their wellbeing (“It brings enjoyment and respite for the family”) as well as the family one. Carers greatly value this opportunity as a “Very helpful as a complete break from how things have been for a while”.

Lessons learned

This section describes improvements suggested by the participants. Broader recommendations regarding the evaluation are also presented.

How do participants think the Activity Group could be improved?

Most of the responses (table 18) suggested changes in physical settings of the activities, followed by a wish for the activities to continue and accessibility improvements. Various other recommendations are also suggested.

Table 18. Q6: How do you think the Activity Group could be improved? Proportion of responses in each activity area.

Kind of Activity/ Identified themes	Creative	Physical	Educational	Personal Development
Sessions' settings	81.82%	75.00%	40.00%	60.87%
Accessibility	0.00%	3.13%	16.00%	4.35%
Activities' continuity	3.03%	15.63%	28.00%	8.70%
Other recommendations	15.15%	6.25%	16.00%	26.09%

- ✓ Most of changes suggested were related to various aspects of the **context and physical setting**, linked to seven sub-themes identified:
 - Number of participants: Several comments were made respect to this point, it was a key response from the different focus groups. All the participants who felt they would like to have more people taking part in the group. Two quotes as example are: "a few more coming to enjoy with us" and "a very good atmosphere that would be enhanced by more members".
 - Sessions' regularity: participants would like to have the sessions weekly, just one pointed that he would like to have them twice a week.
 - Number and length of sessions: comments refer to requesting more and lengthier sessions.
 - Sessions' environment: All the quotes were linked to the venue characteristics or the time of the year when the group started. "Bigger room – more space to do things", "Doing it here would have been better" (Oriel, Wreccsam), "Perhaps our hosts might notify visitors when the [room] is being used for courses so that no interruption occurs", "Maybe somewhere indoors too in case

weather is bad”, “Better facilities – toilet, refreshments etc – but it was good for being in an allotment”, “For the activity group to run in the Spring/Summer term so the weather is warmer and sunny“, “Venue could be nicer”. One of the participants stated “Not in a care home”.

- Sessions’ content improvements are connected to the fact of having a “wider mix of activities”.
 - Sessions’ development: specific comments related to sessions’ progress have been considered in this sub-theme:
 - “It would have been nice if instead of doing a demonstration at the beginning, it might be an idea to demonstrate one stage then help us do it then do another stage etc.”
 - “Perhaps not allow one or two people to monopolise for so long although thought they were very interesting”
 - “More attention to slow learner”
 - “Maybe handouts as I need to refer back to lessons and I forgot to take notes”
 - Sessions’ organization suggestions included:
 - “Provision of some time for group discussion of current topics of general interest might be useful and add some variety to proceedings”
 - “Everyone attending the activity group agreed that there needed to be more of a structure as to what they will be learning each week.”
 - “Also some ingredients could be bought in bulk like the spices as it wasn’t convenient for me to be buying some of the ingredients the day before.”
- ✓ A few comments on **accessibility** have been noted:
- “The parking facilities were terrible”
 - “Bigger print words”, “Louder instruction”, “Positioning so you can hear more”
 - “Someone to pick up and drop off to provide respite”

- ✓ **Activity groups' continuation**, all the quotes refer to run the groups again.
- ✓ **Other various suggestions** included:
 - "Less paperwork!", "It shocked me that people with dementia were expected to fill in lots of forms and paperwork that was presented to us on the first session. It put pressure on me as a carer to fill them both in. I found it tedious and boring"
 - More refreshments and cake instead of cookies.
 - Tutor's training: "By making sure the tutors go on an Alzheimer's/Dementia Friendly course" (this happened between the first and second session and a difference noted).
 - "Advertised a bit better", "Maybe more publicity?", "
 - "I think you could charge people, I would happily pay."
 - "To go on a day trip."
 - "More information"
 - "Sessions running from 2-4"

It is important to mention that even when participants were asked for areas of improvement, 28 positive or neutral comments were reported from the focus group evaluations. Remarking the group was "perfect the way it is", "lovely and staff friendly". One of the participants said "I don't think we could change any of it – it would spoil it", while another one stated "I loved the cakes, tea and sandwiches".

How could the evaluation of the Activity Groups be improved?

Table 19 presents a list of issues identified along the current analysis, together with suggested solutions.

Table 19. Improvements suggested for the evaluation

	Identified issue	Solution Suggested
EOI Forms	Multiple possible ways of providing the same answer	Use specific questions when asking about: <ul style="list-style-type: none"> ✓ Preferred venue ✓ Carer's relationship to PLWD
	Some PLWD's questionnaires have very similar responses (especially in care home settings)	Providing training to those who are going to administer them in order to avoid similar responses, try to get answers from PLWD.
	Data duplication in participants who take part in more than one group	Gather one questionnaire per participant, independent from the group they take part in. Create two different versions of the questionnaire for PLWD and carer.
	Confused answers	Make sure that whoever administers the questionnaire understands the purpose of each question. For example, the expected benefits from the activity are not what PLWD likes or dislikes.
	Doubts about who is filling in PLWD's form	Ask an independent closed question with answers suggested: PLWD, Carer or Carer while asking PLWD's opinion.
	Blank questions	Try to avoid them, providing categories such as N/A, Don't want to reply, Don't know, or record the reason why it was not asked/replied.
Focus Groups Evaluation	Unknown number of participants involved	Add this question in the form and also the total number of participants enrolled in this course (it could be that this specific days there are less participants than usually)
	Biased questions	Avoid using just closed/leading questions, and rephrase them to allow negative answers to emerge.
	Participants' answers interpretation	Provide just a list of quotes, not comments like "most of participants agreed that...", and if so, provide the number of participants supporting this statement.

Conclusions

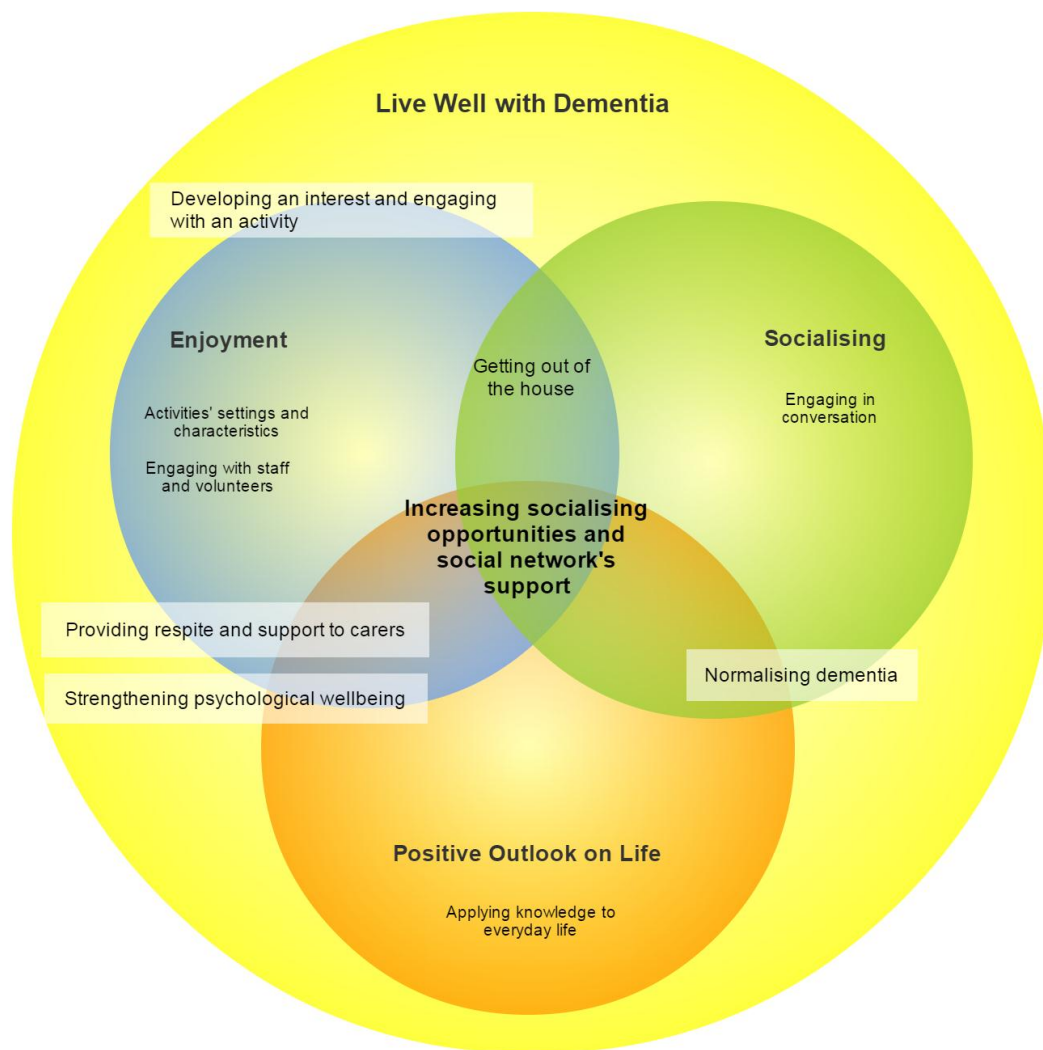


Figure 12. Key features that are linked among them and facilitating participants' wellbeing.

Figure 12, synthesises the themes reported across each of the different focus group questions. These relate to the enjoyment of the activity, the facilitation of socialising opportunities, the development of a positive outlook on life and learning to live better with dementia (represented by the four coloured circles).

Themes inside one of the circles indicates they have appeared exclusively in one of the questions (i.e. activities settings and characteristics, will have emerged as an explanation for enjoying taking part in the Activity Groups). Those which are in the overlapped areas between two or three coloured circles represent the themes that have appeared in the analysis in two or three of the questions (i.e. getting out of the house has been a resulting theme of taking part in the Activity Group, but also as a reason to increase socialising opportunities). The centre of this diagram represents the key aspect of the impact of "Try Something New", which emphasises the

importance of increasing socialising opportunities and, by that, strengthening the social network in order to increase enjoyment, have a more positive outlook on life and live better with dementia.

The aims of Try Something New are to facilitate an increase in confidence and skills, as well as improve wellbeing by reducing the social isolation often experienced by people affected by dementia. Considering the expected benefits of this programme – ascertained prior to starting the groups - it would appear from the findings that on the whole, initial expectations were met.

The findings of this evaluation suggest that the aims of this programme have been met; the people living with dementia and their carers who took part in Try Something New have been able to benefit from the activities provided.

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