

The Advanced Behavioral Intervention Design in Dementia Care (ABIDDC) Training Program: Insights and Outcomes

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What is the Advanced Behavioral Intervention Design in Dementia Care Training Program?

- NIA-funded training initiative (K07AG076616; PI: Dr. Joseph E. Gaugler; University of Minnesota) that prepares emerging dementia care scientists to design, test, refine, and disseminate behavioral interventions.
- Developed to address the lack of university curricula focused on advanced intervention design, which has potentially hindered the progression of dementia care intervention science to date.
- The ABIDDC includes:
 - 1) Formal graduate curricula** in advanced behavioral intervention design (hybrid delivery)— courses highlight intersections with dementia care science but are broadly relevant to behavioral intervention development.
 - 2) Structured peer mentoring program** that supports a cohort of early-career investigators in dementia care science.
 - 3) Integration with research resources** across the University of Minnesota and national networks that support aging and dementia research.



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NIA

ABIDDC Curriculum

- Curriculum begins with conceptual and methodological foundations of behavioral intervention development and progresses to advanced experimental designs, optimization strategies, and implementation approaches.
- Coursework follows the NIH Stage Model and combines textbook readings (Gitlin & Czaja), published papers, guest lectures, and group discussion.
- Trainees apply course concepts through research proposals, iteratively developed over the course of the class with instructor feedback.
- Courses enroll ABIDDC dementia care fellows AND others from within the University of Minnesota and beyond
- **PUBH 8817: Designing Behavioral Interventions for Older Adults and Others Across the Lifespan**
 - Intervention design, adaptations, evaluation
- **PUBH 8808: Advanced Topics in Behavioral Intervention Science Across the Lifespan (Fall 2026)**
 - Advanced intervention designs (SMART/adaptive designs, MOST designs, cultural adaptation, stepped wedge designs, pragmatic trials)
- **PUBH 8814: Mixed Methods- Integrating Quantitative and Qualitative Strategies in Research (Spring 2026)**
- **PUBH 8816: Implementation Science (Spring 2026)**
- **PUBH 6815: Community-Based Participatory Research (tentatively offered Spring 2026)**

<https://www.sph.umn.edu/research/centers/chai/education/advanced-behavioral-intervention-design-concentration/>

ABIDDC Curriculum

Please note that all syllabi are publicly available online. We encourage you to use these syllabi to identify resources or think about starting your own courses!

<https://www.sph.umn.edu/research/centers/chai/education/advanced-behavioral-intervention-design-concentration/>



ABIDDC Fellowship Program

- The program supports a national cohort of early-career dementia care scientists developing behavioral interventions that address care quality and caregiver support.
 - <https://www.sph.umn.edu/research/centers/chai/education/advanced-behavioral-intervention-design-concentration/>
- **Fellowship Components:**
 - **Structured mentorship:** individualized guidance from core faculty
 - **Peer mentorship:** Peer-to-peer support, network/community building, interdisciplinary collaboration across institutions, open discussion of issues/questions/challenges
 - **Consultancy model sessions:** Structured approach for providing group feedback on proposals and research ideas in development (more on next slide)
 - **Stipend:** \$5,000 to support professional development and/or research activities relevant to dementia care
 - **Integration with coursework:** Fellows concurrently take or audit ABIDDC courses, applying course concepts in peer discussions and mentored feedback
- **Fellows meet monthly with Dr. Gaugler**

ABIDDC Peer Consultancy Model

- Peer-to-peer mentorship
- Small group, structured problem-solving/collaborative feedback
- Generates specific, high-quality feedback efficiently
- Each participant presents a real research challenge and receives focused input from peers and Dr. Gaugler in a structured manner
- The clear structure and timed format make it accessible for early-stage ideas and questions

CONSULTANCY 101

There is one facilitator and one time keeper per group. The facilitator should have some expertise in the issue area being discussed. There are no more than 10 participants in each group. Each participant gets:

- 3-4 minutes to describe their challenge
- 1-2 minutes to answer clarifying questions from the group
- 5-7 minutes to listen to the group brainstorm ideas
- 1 minute to summarize the ideas heard

Integration with Other Research Resources

- ABIDDC encourages fellows to engage with a network of national dementia research initiatives and training programs.
- Engagement with these resources enhances research capacity, mentorship, and access to pilot funding.
- **Key Linkages:**
 - **Resource Centers for Minority Aging Research (RCMAR):** offers pilot funding for innovative research in behavioral and social science with a focus on minority aging.
 - **NIA Imbedded Pragmatic Alzheimer's Disease (IMPACT) Collaboratory:** offers training and pilot funding for pragmatic dementia care trials
 - **University of Minnesota Center for Healthy Aging and Innovation:**
 - Aging-related special interest groups
 - Idea-hatching workshops
 - Aging Work Group grant review workshops

Fellow Outcomes

July 2023 - February 2025 K07 Fellow Evaluation Data (N = 14)

Race White = 7 Black/African-American = 3 Asian American = 2 Latino/a/x = 3	Gender Identity Female = 9	Number of Center for Healthy Aging and Innovation (CHAI) Special Interest Group Meetings Attended 14
Number of CHAI Idea Hatching Workshops Attended 4	Number of CHAI Aging Work Group Meetings Attended 8	Number of CHAI Speaker Series Attended 11
National Seminars/Career Development Institutes Participated In 37	Peer-Reviewed Publications 81	
Extramural Proposals Submitted/Funded 7/2	Intramural Proposals Submitted/Funded 3/2	Postdoctoral Faculty Positions Applied For/Successfully Hired 3/2

Fellow Feedback

• Strengths

• **Intervention Science Focus**

- Fills a critical training gap, foundational to Fellows' work, and not available elsewhere

• **Scientific Goals in Dementia Care**

- Directly supports fellows' ongoing projects and preparation for K- and R-level grant submissions

• **Networking and Cohort Support**

- The cohort network is cited as the program's greatest asset. It has facilitated;
 - Concrete outputs (like joint manuscript development) and direct collaboration.
 - Providing a safe space for peer guidance re: career development, postdoctoral transitions, and sharing knowledge that helps build work.
 - Resource sharing— funding opportunities, workshops, conferences, etc.

• **Program Structure and Flexibility**

- The monthly meeting cadence works well for Fellows. Described as a perfect balance, a valuable "resource but not a burden."
- Fellows appreciate the overall flexibility, dynamism, and tailored fit for the group.

• Areas for Growth

• Using the program's infrastructure to drive more tangible collaborative outputs:

- Examples include co-authoring papers, book chapters, or jointly developing a grant proposal.
- Creating a process to map the interests of all Fellows, with intention to foster proactive, intentional collaborations

• Consider asynchronous courses to accommodate schedules

• Develop resources and/or bring in expert speakers to discuss funding opportunities and the current funding landscape.

Takeaways

• **Building Skills**

- Formal coursework in behavioral intervention design is enormously helpful for trainees.
 - If you're a trainee, we encourage you to seek out coursework when possible.
 - If you're senior faculty and in a position to develop courses or integrate intervention content, consider doing so!

• **Building Community**

- Bringing together early-career scholars with interests in dementia care intervention science can build community and networks that otherwise might not form.
- Peer mentorship is invaluable.
 - We recommend balancing open discussion with structured consultancy models.

• **Building Capacity**

- Mentorship and targeted coursework help trainees transition more successfully toward independent research in dementia care intervention science.
- Cross-institutional interdisciplinary collaborations expand access to ideas, expertise, and resources.
- Embedding these elements in early career strengthens the overall pipeline of dementia care intervention scientists.

Thank you!



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