Journal of Dementia Care
Guidance for authors

Introduction

These guidelines cover the following:

- Language and terminology (including equality, diversity and inclusion – EDI)
- Types of articles
- References

Language and terminology

All articles in the Journal should use language and terminology that is accessible as possible, and is not pejorative or stigmatising (see EDI section below)..

Please avoid using jargon, and clinical or technical terms should be explained in accessible language. Abbreviations and acronyms should be spelt out in full when first used in an article.

For language about dementia and people with the condition please refer to these two guides: the first was compiled by people living with dementia in the UK and the second is an up-to-date comprehensive guide from Australia:

https://dementiavoices.org.uk/wp-content/uploads/2015/03/DEEP-Guide-Language.pdf

https://www.dementia.org.au/sites/default/files/2023-10/Dementia-language-guidelines.pdf

We would normally ask authors to change the terms they use if they are not consistent with the guidelines. The only exception might be where an individual with dementia uses a term in the guide, such as “suffer”, when they are describing their own personal experience of the condition. They should not be used as a generalisation to describe people’s experience of dementia.

We are committed to the principles and practice of **Equality, Diversity and Inclusion** (EDI) and this includes language and terminology. There are a number of useful guides, such as the following three, and we would encourage you to look at these where appropriate, when drafting your article:

https://www.faraday.ac.uk/wp-content/uploads/2025/04/EDI_Language_Guide.pdf

https://www.ncl.ac.uk/mediav8/our-research/files/Inclusive%20Language%20Guide.pdf

https://www.bristol.ac.uk/style-guides/writing/inclusive/

Types of article

1. Project updates

These articles generally focus on a project or piece of work in a local area. The aim is for practitioners to share the story of their work, focusing as far as possible on what is new or different about the project or service.

The article must ALWAYS include a box of “Key Points” to consist of **4 - 6 brief bullet points.** When drafting these key points please try and focus them on the readers you most want to influence / you think the article is most relevant to e.g. dementia care practitioners / service managers / commissioners / arts practitioners / people with lived experience (if it’s people with lived experience, please also think about including one of the other groups as well).

The article should cover:

- the motivation and context for the project
- who was involved
- what work was undertaken (including method, approach and time-scales)
- financial considerations
- examples of the project at work e.g. case studies
- implications for practice
- lessons learned / critical reflection
- future plans arising from the work.

Articles may also give an update on a project or campaign or be an extended news story. Length is flexible, but would generally be **between 700 and 1500 words.** Shorter pieces are more likely to be published quickly, and Letters to the Editor are always welcome.

Please provide details of how your service or project demonstrates that **EDI values** have been considered and addressed.

We are also keen to know how **people with lived experience** - people living with dementia, care partners and family carers - have been involved at every stage.

2. Viewpoints, comments, contributions to De-Notes

We also welcome articles which express an opinion or viewpoint. These may be similar to online blogs. Views expressed will be those of the author and should not include undue criticism of a named individual or organisation. They can express controversial or provocative views but if these involve questioning accepted conventions or positions they should be measured and sensitively presented.

As we are committed to the principles and practice of EDI and the inclusion of the voice of people with lived experience, articles that challenge these positions need to be extremely carefully written with the Journal's diverse readership in mind, otherwise they are unlikely to be accepted.

3. Features

These are longer articles, generally around 2000-2800 words in length, including references and text boxes. The article must ALWAYS include:

- a list of **Key Points** or "Key Points for Practice" to consist of **5 - 8 brief bullet points.**
- a **Summary** summarising the article content in **up to 250 words**

These longer articles are intended to give more scope for depth and analysis, although they should still cover all the aspects suggested for shorter contributions (as above). A feature may report on a case study, a survey, a service reorganisation, a new project, a service evaluation, a research project, a major publication or campaign, or share good practice on a particular topic (for example, pain management). Where relevant, please also include a brief summary of any theory or principles that underpin the work being described.

When drafting the Key Points and Summary, please try and focus them on the readers you most want to influence / you think the article is most relevant to e.g. dementia care practitioners / service managers / commissioners / arts practitioners / people with lived experience (if it's people with lived experience, please also think about including one of the other groups as well).

Principles and practice of **Equality, Diversity and Inclusion**, and the involvement of **experts by experience** should also be addressed (see above).

If you are interested in submitting a feature article, in the first instance please email the editor Toby Williamson at toby@dementiapublishing.community.

Photos and illustrations are always extremely welcome, and should be sent as separate images, as high resolution as possible and in JPG. Full caption information too please.

4. Evidence for Practice/Research News

This section aims to keep readers up to date with research in dementia care and the current best evidence to support practice. We aim to provide a channel of two-way communication between researchers and practitioners, so that research findings influence practice and practitioners' concerns are fed into the research agenda.

We welcome contributions such as:

- Information on recently-completed studies available to readers.
- Notice of the publication (recent or imminent) of peer reviewed research papers with practical relevance to dementia.
- Requests or offers for sharing research information and experience in particular fields of interest.
- Short comment on important research papers recently published, drawing practitioners' attention to new evidence and key points that should inform practice.

Please send contributions for this research section to Toby Williamson (toby@dementiapublishing.community).

References

For all contributions, please supply references in Harvard style. See guidance at:

https://university.open.ac.uk/library/referencing-and-plagiarism/quick-guide-to-harvard-referencing-cite-them-right