Age-Friendly and Dementia Friendly Communities

AARP Research Report: March 2016

Key Findings

'a dementia friendly community is age-friendly, but an age-friendly community is not necessarily dementia friendly'

- Both share some fundamental objectives: older adults remain independent by supporting enabling environment, strengthen community supports, and increase inclusion.
- Age-friendly avoids identifying people solely through a disability of disease specific lens; dementia friendly is more targeted and disease specific.
- Dementia friendly is more prescriptive in actions and stakeholders who need to be engaged where age-friendly is a broader framework.
- Dementia specific lens ensures that people living with dementia and their caregivers are central to the process.
- Dementia friendly emphasizes breaking down stigma while age-friendly targets ageism.

Recommendations

1. Communities new to both initiatives should attempt to integrate the two from the outset.
2. Existing age-friendly communities should review their plans to ensure they incorporate the needs of people with dementia and their caregivers.
3. Existing dementia friendly communities should leverage their work to initiate a broader conversation and commitment to the needs of all residents as they age.

Comparing the Processes of Becoming Age-Friendly or Dementia Friendly

Both age-friendly and dementia friendly planning use a community development approach: a process that brings together community members and key stakeholders to find solutions to common challenges and improve the quality of life in their communities. Age-friendly and dementia friendly planning involve, to varying degrees, engaging a wide range of community stakeholders from different sectors, alongside those affected (older people, those with dementia and caregivers), and taking them through a process to assess their communities against a core framework, and to plan and implement a program of action based on the assessment of the needs or gaps identified.

FINDINGS AND OBSERVATIONS

Timelines and Phases (see Table 1). Both AARP/WHO and DFA communities follow a four-

Table 1

THE PROCESSES INVOLVED IN TAKING ACTION

AARP/WHO Age-friendly[13]	Dementia Friendly America[14]
1. Joining the Network (Year 0) a. Obtain political commitment b. Organize stakeholders c. Establish advisory committee 2. Planning (Years 1-2) a. Involve older people b. Conduct a baseline assessment c. Identify indicators to monitor progress d. Develop action plan 3. Implementation and Evaluation (Years 3-5) a. Implement action plan b. Monitor indicators c. Measure progress d. Identify successes and remaining gaps e. Submit progress report to community 4. Continuous Improvement (Year 5+) Using feedback from evaluation, draw up new plans and continue to monitor and improve	1. Convene a. Determine community readiness b. Generate awareness c. Build an action team d. Hold a community kickoff and publicize 2. Engage a. Form a community engagement sub-team b. Adapt the engagement process to your community c. Hold an interview and focus group training and preparation session d. Develop an organized process flow and timeline e. Engage the community through interviews or focus groups 3. Analyze a. Compile and interpret the data b. Analyze findings and prioritize goals 4. Act a. Share the results and involve the community b. Create and implement a community action plan c. Gauge progress and set new goals

Table 2

SETTING OUT THE AGE-FRIENDLY AND DEMENTIA FRIENDLY FRAMEWORKS

WHO/AARP Age-friendly Eight Domains[15]	Dementia Friendly America Ten Sectors[16]
1) Outdoor Spaces and Buildings Availability of safe and accessible recreational facilities.	**1) Transportation, Housing and Public Spaces (Local Government)** Infrastructure that makes communities more livable for people with dementia and their caregivers.
2) Transportation Safe and affordable modes of public and private transportation.	**2) Businesses** Dementia-supportive customer service and environments and policies that support employee caregivers.
3) Housing A wide range of housing options for older residents; the ability to age in place; and other home modification programs.	**3) Legal and Advance Planning Services** Legal services that help vulnerable clients express their wishes early and avoid problems such as unpaid expenses.
4) Social Participation Access to leisure and cultural activities; opportunities for older residents to participate in social and civic engagement with their peers and younger people.	**4) Banks and Financial Services** Dementia friendly practices that help maintain clients' independence while protecting them from problems.
5) Respect and Social Inclusion Programs to promote ethnic and cultural diversity as well as multigenerational interaction and dialogue.	**5) Neighbors and Community Members** Raising awareness to help neighbors and community members understand and support people living with dementia.
6) Civic Participation and Employment The promotion of paid work and volunteer activities for older residents and opportunities to engage in formulation of policies relevant to their lives.	**6) Independent Living** Home-based services available to maximize independence and promote autonomy and a high quality of life.
7) Communication and Information The promotion of and access to technology to keep older residents connected to their community and friends and family.	**7) Communities of Faith** Faith communities use dementia friendly practices to provide a welcoming, compassionate environment and spiritual connection.
8) Community and Health Services Access to homecare services, clinics, and programs to promote wellness and active aging.	**8) Care Throughout the Continuum** Early diagnosis of dementia and ongoing medical care; patient education; and connecting patients and their caregivers with community resources that promote quality of life.
	9) Memory Loss Supports and Services A spectrum of settings and services needed by people with dementia – from long term care facilities and assisted and independent living residences, to home care, adult day services, and hospice.
	10) Emergency Planning and First Response Community planning and family preparation considers safety, security, and needs of people with dementia in disaster planning and emergency response.