













Becoming Dementia Friendly: Building our capacity to support seniors

For Volunteers and Service Providers who support seniors

Information contained in this presentation is intended to offer suggestions only and should not be substituted for medical advice from a doctor or healthcare provider.





- Strengthen knowledge of dementia
- Expand understanding and coping skills for supporting someone with dementia
- Reduce stigma for persons living with dementia
- Promote a Dementia Friendly approach to supporting seniors

Agenda

- Dementia
- Signs and Symptoms
- Diseases under dementia umbrella
- Myths vs facts
- Risk reduction
- Change and challenges
- Communication
- Understanding behavior







- Dementia is a medical term that is used when there are signs and symptoms of a change in the brain's functioning
- These signs and symptoms are severe enough to reduce a person's ability to perform everyday activities
- Dementia is not a disease it is an umbrella term. Many different diseases fall under the dementia umbrella

Signs and Symptoms

- Memory loss
- Difficulties performing familiar tasks
- Difficulties with problem solving
- Changes in language speaking and understanding
- Changes in judgement
- Changes in mood or behaviour





Alzheimer's disease

- Marked by the presence of plaques in the brain formed by a naturally occurring protein
- Plaques cause the formation of neurofibrillary tangles
- These plaques and tangles cause the brain cells to die and the brain to atrophy (shrink)

Vascular dementia

- Loss of blood flow to the brain causes cells to die and the result is loss of brain function
- Possible causes include stroke, aneurism, and hardening of the arteries

Multi-infarct dementia

 Caused by multiple strokes disrupting blood flow to the brain, leading to damaged brain tissue





Korsakoff's Syndrome

- Official diagnosis of alcohol related brain changes
- If caught early on, some or significant restoration of brain health/abilities is possible

Lewy Body dementia

- Degenerative condition that may have a rapid progression
- May impact mobility, sleep disruptions and concentration





Frontotemporal dementia

- Impacts the frontal and temporal lobes of the brain where executive functions are performed
- Changes behaviour, judgement and reasoning. Often a younger onset

Mixed dementia

• Presence of one or more types of dementia simultaneously in the brain



Myths vs Facts

1. Myth: Dementia only occurs in older people

Fact: People in their 40's and 50's can develop any of the

dementias

2. Myth: *There is a cure.*

Fact: All diseases under dementia umbrella are progressive - they will get worse over time. Currently there are no cures or preventions



Myths vs Facts

3. Myth: *Aluminum causes Alzheimer's Disease*Fact: Aluminum does not cause Alzheimer's Disease

4. Myth: The diagnosis of dementia is the end to a meaningful life Fact: People diagnosed with dementia can live engaged, active, meaningful lives. Dementia does not change their sense of humor, spiritual self, enjoyment of music, family relationships, etc.





- While research has not found a way to prevent the onset of a dementia our choices can reduce our risk of developing dementia
- Walking, 3 brisk ten minute walks a day is an easy way to support brain health
- Try swimming or water walking, when pain makes walking difficult
- Challenge your brain regularly learn a new language, pick up a musical instrument, do crosswords or Sudoku
- Stay socially engaged meet with people, have conversations, laugh often
- Dance your brain remembers the steps, your muscles work out, and you can share the experience with another!

Changes and challenges

- Memory loss



- Challenges of short term memory loss can be mitigated by using calendars, sticky notes, your cell phone
- Long term memories are stored in a different part of the brain and are often very intact and vivid
- Memory loss is frustrating for both the person with dementia and their family friends

Changes and challenges - Sundowning



- When challenging behaviours occur in the late afternoon or early evening this is often referred to as Sundowning. To manage:
 - Keep afternoon schedules free from stressful events
 - Maintain routines, meals, sleep, and activities of daily living
 - Try to reduce noise levels, turn the TV down or off
 - Talk with your doctor if this is very disruptive. They may have helpful suggestions





Repetitive behaviours

Asking or saying something repeatedly is an example of short term memory loss

If they continue doing or saying the same thing over and over:

- Try changing the subject or redirecting the person
- Be reassuring as this behaviour can be an indication of stress
- Have activities at hand, such as sorting objects, folding clothes, photo albums to reminisce over, music play lists to calm, or sweeping to redirect the behavior





Agitation

 May present as irritability, easily annoyed, incessant talking, pacing or fidgeting

Consider the following possible underlying source of agitation:

- Pain or discomfort
- Medical reason such as depression, constipation, side effects of medications
- A basic need hunger, thirst, need to use the toilet, tired
- Communication challenges
- The environment too hot, too cold, too dark, too bright
- Boredom





- Communication is a complex brain function and use of language often becomes difficult for people living with dementia
- Some language challenges include finding the correct word, pronunciation and putting thoughts into meaningful sentences. Understanding and following conversations can also become difficult
- Listening requires time and attention give your undivided attention and include cues from body language





Never ever argue with a person who has dementia. You will not win and risk increasing agitation.

We always have the choice between being right and being happy.





- Following a diagnosis there can be a shift in reality. Some call this entering "Alzheimer's World"
- Dementia may prevent them from remaining in our shared reality
- It is helpful when caregivers and friends learn to view the world from the perspective of "Alzheimer's World"
- You can get a visa to visit Alzheimer's World through education, empathy and compassion





Multicultural communities face additional challenges:

- Some languages may not have a word for dementia
- There may be stigmatizing beliefs
- Traditional value system for caring for family, especially parents may no longer be available
- Loss of second or third language (reverting back to mother tongue)
- Lack of culturally diverse services





- Alzheimer Society of B.C.-www.alzheimerbc.org or www.Alzheimer.ca
- Alzheimer Disease International <u>www.dementiaallianceinternational.org</u>
- Family Caregivers of B.C. <u>www.familycaregiversbc.ca</u>
- Dementia Advocacy Canada <u>www.DementiaCanada.com</u>
- Senior Peer Counsellors of BC contact your local community services to see which organization offers this support service





- Supports social citizenship for people living with dementia
- Reduces stigma and discrimination
- Encourages people living with dementia to participate to the fullest extent possible
- Reduces barriers to participation in community programs
- For more information on supporting someone with dementia, contact the Alzheimer Society of B.C.

Thank you

For more information: www.alliesinaging.ca











