

The New Brunswick Dementia Strategy:  
Thoughts and Recommendations from the  
New Brunswick Association of Social Workers



April 2019



## The New Brunswick Dementia Strategy

On June 22<sup>nd</sup>, 2017, the Canadian Federal Government committed to implementing a national dementia strategy, which is expected to be rolled out in late 2019. To align itself with federal aims, the province of New Brunswick is working to develop its own provincial strategy, which will be informed through consultations with the people of New Brunswick. As the province with Canada's oldest and most rapidly aging population, a provincial dementia strategy is key to addressing the unique needs of New Brunswickers. Presently, "there are an estimated 13,000 people in New Brunswick living with dementia and approximately 7 New Brunswickers develop dementia every day. By the year 2038 the number of people with dementia is expected to double" (Horizon Health Network, n.d.).

It is critical that the provincial dementia strategy that is developed is comprehensive and provides wrap-around services for New Brunswickers living with and affected by the disease. Dementia affects not only the individuals who receive the diagnosis, but also the friends, families, and systems that care for them. For this reason, a comprehensive dementia strategy must provide increased support for all the people living with dementia, as well as those caring for them. Due to their employment, training, and expertise, social workers play a key role in supporting all New Brunswickers, including those living with dementia and their care partners.

Education should be provided to people living with dementia early in the disease so they can prepare for the future (Fazio et al., 2018). Education is key for early detection and disease management, along with reducing stigma and misunderstanding associated with the disease. On a larger scale, education on dementia should be readily available for all members of society. Studies have found that the "treatment of hypertension... more childhood education, exercise, maintaining social engagement, reducing smoking and management of hearing loss, depression, diabetes, and obesity might have the potential to delay or prevent a third of dementia cases" (Livingston et al., 2017, p. 2673). With the possibility of preventing and/or delaying certain types of dementias through these methods, there should be targeted efforts to educate all New Brunswickers on these preventative measures and the benefits of living healthy, balanced lifestyles so they are able to make informed decisions for themselves.

To live healthy lives, it is critical that New Brunswickers have access to food that nourishes them both physically and mentally. Increasing access to food subsidy programs is important for all New Brunswickers, as it can help everyone in the province access healthy food that can ultimately help delay or prevent the onset of dementia later in life. In addition to making healthy food more accessible, the province of New Brunswick should ensure all older adults have medical coverage to cover the cost of the medications and medical services they require. Although there is no cure for dementia, medications can be prescribed to help manage symptoms associated with the disease.



Education and social participation are equally important to living health and fulfilling lives, particularly when it comes to dementia. There is an overarching lack of understanding regarding dementia that often leads to people who receive the diagnosis to not realize that they can live well with the disease. Due to the lack of understanding on what living with dementia entails, people diagnosed with dementia often become isolated, which in turn leads to their health declining and them needing higher levels of care. Due to this cycle, education and social participation must be made key pillars in the provincial dementia strategy.

There should also be increased coverage for technologies such as mobility devices and assistive technology that provide older adults increased freedom and help them complete daily tasks of living. Aging technologies should be financially accessible to older adults so that they are able to exercise choice in aging and live at home for as long as possible. There is a vast array of technologies that are designed to assist individuals with dementia including daily prompts and reminders, clocks and calendars, medication aids, locator devices, communications aids, sensory and mental stimulation devices, alarm systems, automatic lights, shut-off devices, water isolation devices, plugs, fall sensors, and so on (Alzheimer's Society, n.d.). These technologies provide individuals with added safety and security and can prolong their ability to remain at home.

Furthermore, the cost of accessing home care and residing in nursing homes, residential care facilities, and memory care homes must be heavily subsidized to ensure that low-income older adults are able to afford their housing and care while having money left over for personal necessities. Memory care homes and special care homes should be fully subsidized, as these facilities with special designations often surcharge. Poverty is an issue that disproportionately affects older women, as they often have not had the career opportunities of their male counterparts throughout their lives, earned less than men, and stayed home to raise their children (Justice in Aging, 2018).

Provincial legislation must be updated to adequately protect the human rights of older adults. For example, the Family Services Act does not recognize financial abuse to be a type of abuse (Government of New Brunswick, 1980). People with dementia are particularly vulnerable to all types of abuse since they can have difficulty recognizing, remembering, or communicating what they are experiencing (Alzheimer's Society, 2011). Since individuals with dementia are particularly at-risk, they must be protected through provincial legislation. There should also be a streamlined process in the legal system that allows for people who lose capacity to appoint a power of attorney in a timely manner. At this time, once someone has lost the capacity to make decisions for themselves, they must access a committee of persons through the courts to appoint a power of attorney or provide them with a Public Trustee, which often has a long wait-time attached to it.



It is particularly important that older adults are supported to live at home, as there is a shortage of beds in nursing homes, residential facilities, and hospital beds in New Brunswick. CBC News reported that, as of October 31<sup>st</sup>, 2018, 751 people were waiting for placement in nursing homes with 484 of these individuals waiting in hospital (CBC News, November 20<sup>th</sup>, 2018). For those with dementia, the wait could be even longer. As the Department of Social Development states, “experience has indicated that a gap exists in the provision of residential care for seniors with psychogeriatric needs... these individuals tend to have greater needs than can be provided for within the regular nursing home setting” (2018, n/a). Many seniors reside in hospital beds while waiting for a space in a care facility and it has been found that “within days of being placed in the hospital, a senior’s physical mobility and mental well-being are significantly decreased” (Province of New Brunswick, 2017).

Older adults living with dementia need to be better supported in community through early diagnosis and home-based care, before they reach the point where they are in crisis in hospital. There needs to be better provision of both home and community services. People can and do live in their home communities for many years after a dementia diagnosis. There is a need for more innovative, community-based approaches to support people with dementia aging in place. Now is a critical time for the Government of New Brunswick to develop aging in place strategies and provide financial support for informal caregivers. Informal caregivers are the unpaid people providing support to older adults in New Brunswick, often they are friends and family members. Currently, more than eight million Canadians are family caregivers. As the Caregivers’ Guide states, “it is no longer a question about if someone will assume the role of caregiving, rather it is when” (Department of Social Development, 2016, p. 1).

Informal caregivers are the hidden pillar of the healthcare system; by delaying entry into a hospital, nursing home, or special care home, informal caregivers save costs and increase institutional capacity while allowing older adults to continue living in their communities. In fact, it has been found that by delaying entry into an institutional setting by just one month the system could serve 1,000 more people within existing capacity (Canadian Institute for Health Information, 2017).

Often, informal caregivers are unable to work due to caring for their loved ones. This can put financial strain on families during vulnerable times. Formalized processes for informal caregivers must be implemented and must include education, training, psychosocial support, emotional support, and financial benefits. It is critical that informal caregivers are adequately supported in caring for their loved ones at home, particularly when there is a shortage of beds in residential facilities, as is the current reality. For families who are caring for their loved ones at home, renovations must often be made to ensure the residence is safe and accessible for all.



There should be subsidies provided to cover the costs of renovations and devices that are needed in order to properly care for loved ones at home.

Considering the difficulty that those with dementia have in finding a residential facility where they can reside, there needs to be serious investments made in home care. Not all older adults have loved ones who are able to be their caregivers at home. For these people, it is critical that they have timely access to home care assessments and services in their own home. Older adults with dementia should have access to physicians who they can regularly meet with for checkups, evaluations, and assessments. Since transportation is often a barrier to accessing services, investing in physicians who do home visits would help bridge this gap. While this is particularly true and important for New Brunswickers with dementia, it is important that all older adults have access to regular medical care, as physicians are critical in detecting early symptoms of dementia.

It is important that there is an investment in programs that allow older adults to stay active within their communities and access the services needed to engage in life-long learning. Research has found that “activity and recreation have been shown to be beneficial to the person living with dementia. Encouraging participation in daily chores and maintaining hobbies and shared past activities have been shown to improve mood, reduce agitation, and improve quality of life for persons living with dementia” (Guerrieo Austrom et al., 2018, p. 52). The provincial dementia strategy must work to alleviate barriers that prevent older adults from maintaining existing routines, hobbies, and social relations.

The provincial dementia strategy should invest in the creation of dementia-friendly communities. Dementia-friendly communities refer to “communities at large that are inviting and supportive of individuals with dementia as well as their caregivers” (Senat Canada, 2016, p. 14). In order to develop dementia-friendly communities, the stigma surrounding dementia must first be reduced or eliminated through education and awareness. Business owners and service providers in a dementia-friendly community will ultimately “create a safe and inviting environment in which dementia sufferers and their caregivers feel welcome” (Senat Canada, 2016, p. 14).

Social workers play an important role in developing and implementing a comprehensive dementia strategy. In order to provide adequate psychosocial support and education to those living with dementia and their loved ones, social workers must be employed in the agencies that work with and support these individuals and their families. There should be an investment in hiring social workers in long-term care, extra-mural programs, and residential facilities, to ensure this ever-growing need is met. A huge gap and area of need are employing social workers in nursing homes and residential care facilities across New Brunswick. Social workers are uniquely qualified to offer support through transitional periods, help clients cope with



grief, and meet the psychosocial needs of both residents and their families. For individuals and families experiencing dementia, having access to these services through a registered social worker is key. For older adults across the continuum of care, it is important that all systems involved with them adopt a collaborative, person-centered approach to caring for them. Social workers can play a key role in developing and actualizing this collaborative process.

While it is our hope that the provincial dementia strategy incorporates feedback from all types of individuals and disciplines, it is critical that consultations are conducted with those living with dementia and their care partners. Consulting those with lived experience will ensure that the strategy is comprehensive and provides wrap-around services for all New Brunswickers affected by the disease. The dementia strategy must focus on prevention, education, care, and wellbeing and must address dementia as the “societal, health, and social issue” it is, “emphasizing the complex combination of health and social needs of persons living with dementia and their caregivers” (Canadian Academy of Health Sciences, 2019, p. xi). The NBASW hopes to play a role in the development and execution of the provincial dementia strategy going forward.



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