

Dementia-Friendly New West: A Community Conversation Survey Results

1. OVERVIEW

The goal of the survey was to hear from people in New Westminster who are living with dementia to ensure the project reflected their voices and lived experiences. Caregivers and other service providers were asked to assist with completion, if needed.

The project group developed the survey questions and format with extensive feedback from people living with dementia, their caregivers, and representatives from the Alzheimer Society of B.C.

Surveys were promoted through CityPage advertisements, email and word-of-mouth. Promotional networks included:

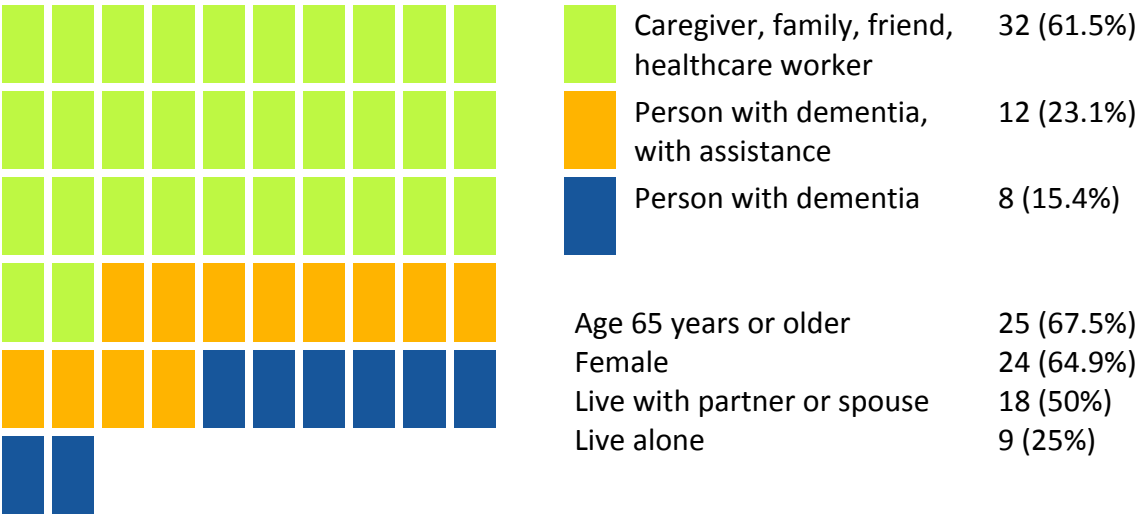
- The Alzheimer Society of B.C.
- Century House
- Fraser Health Home Health and Specialized Seniors Clinic
- Seniors groups and support programs
- Housing and care facilities.

Hard copies and drop boxes were at community locations, including Century House, City Hall, the Public Library, recreation centre, and Seniors Services Society. On request, people received the survey by mail.

2. RESULTS

A total of 52 surveys were submitted.

Diagram 1: Person completing the survey (Total = 52)



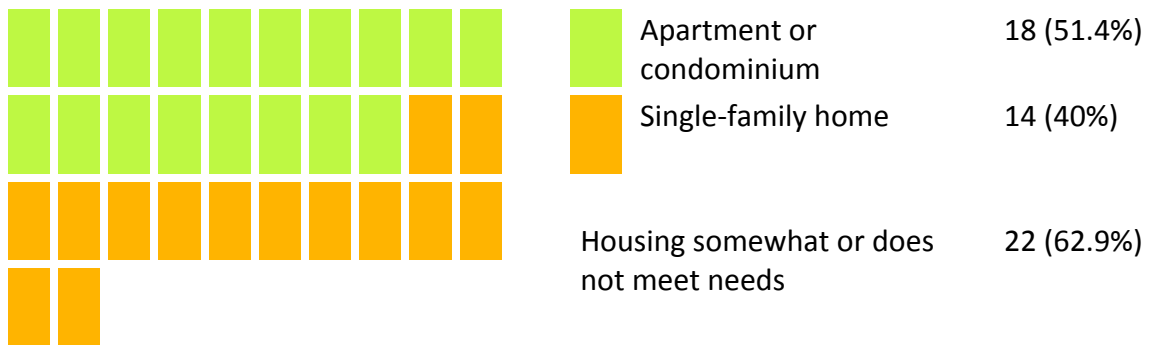
3. HOUSING TYPES

The two most common housing types were apartment or condominium and single-family house (Diagram 2: Housing types). Most respondents owned their home (21 or 60%).

Several respondents said they were looking at downsizing from their single family home due to the cost and time of maintenance. Other respondents commented on the high costs of adding accessibility features to a home.

“The elevator is sometimes confusing. I often end up on the wrong floor.”

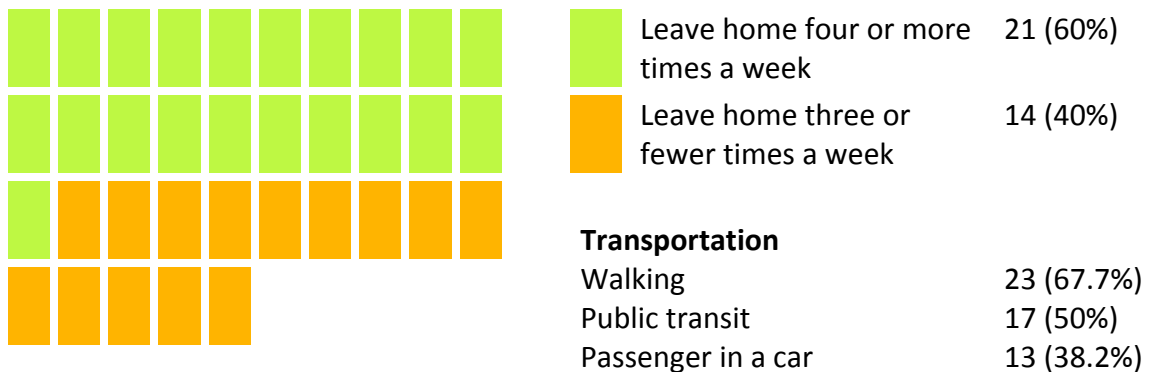
Diagram 2: Housing types and needs (32 responses)



4. SOCIAL CONTACT

While the majority of respondents leave their home four or more times a week, others are at risk of social isolation due to infrequent outings (Diagram 2: Social contact and transportation modes. Note: Respondents could select more than one transportation mode, so the percentage total exceeds 100%.)

Diagram 3: Social contact and transportation modes (35 responses)



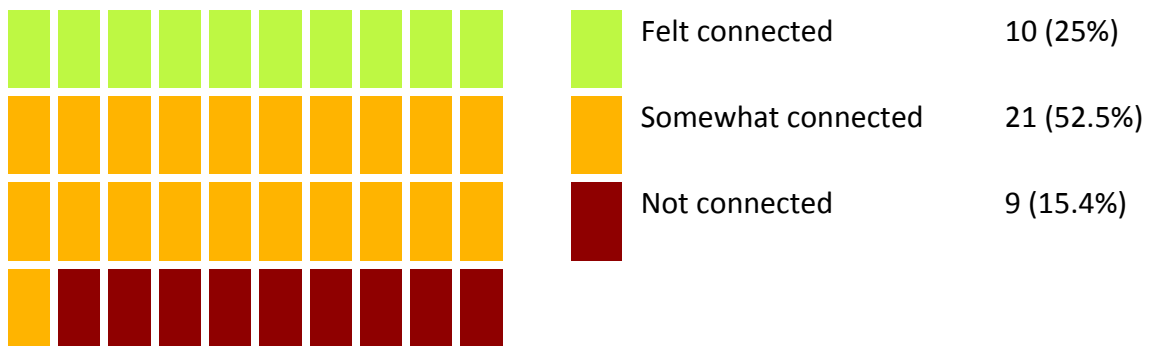
5. CONNECTING WITH NEIGHBOURS

The vast majority of responses reflect limited connections with neighbours (Diagram 4: Community connections). While some respondents exchange informal greetings with neighbours, several commented on the difficulty of making such connections in multi-family buildings such as high-rises.

“There needs to be more understanding about dementia and a willingness to reach out and offer support to neighbours....”

Recommendations to improve social connections included public education about reaching out to people living with dementia and to dispel fears about people with dementia being aggressive and violent.

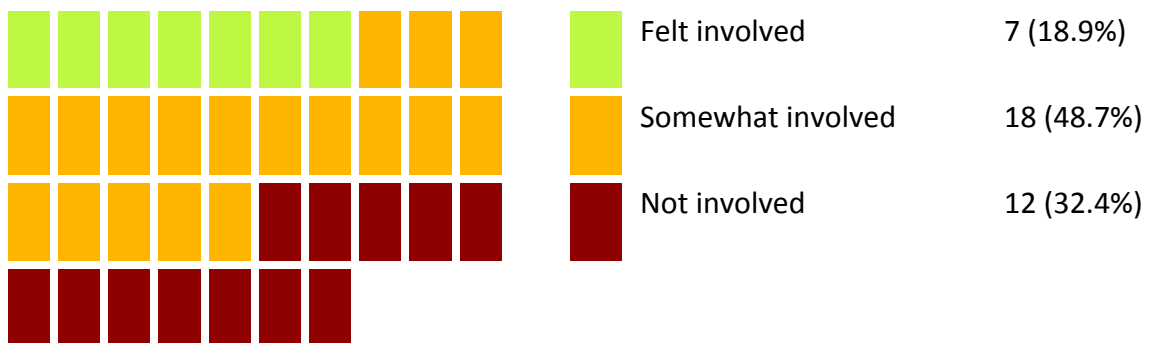
Diagram 4: Community connections (40 responses)



6. COMMUNITY INVOLVEMENT

Respondents said they are involved with their community by attending events, being part of a faith organization or visiting civic facilities such as Century House and the Public Library. However, the vast majority of responses reflect limited community involvement (Diagram 5: Community involvement). Recommendations included more drop-in and flexible programming, including programs for caregivers.

Diagram 5: Community involvement (37 responses)



7. WELCOME AND COMFORTABLE

Century House and the Public Library were the top two places where respondents felt most welcome and comfortable. They found staff to be friendly, helpful, patient and respectful. They also appreciated the relevant information and responsive programming, such as Minds in Motion.

Other places where they felt welcome and comfortable included: faith organizations, hairdresser, local café, parks and in their personal residence.

Respondents felt least welcome and comfortable in busy or crowded areas and when using public transit. Several said the intersection of Belmont and Sixth Street was particularly difficult.

Suggestions to make locations more welcome and comfortable included:

- creating places of refuge with benches and landscaping
- improve “way-finding” and signage, and
- provide employees with customer service and dementia-friends training.

“I know where I can find someone to ask questions and they are always in the same place, which makes it easy to remember.”

8. KNOWLEDGE AND PERCEPTION

The vast majority of respondents thought that knowledge about dementia was very limited; only three respondents thought people were knowledgeable about dementia (Diagram 7: Knowledge about dementia).

The perception of people living with dementia is also an issue; only three respondents thought people with dementia are viewed positively (Diagram 8: Perception of people living with dementia).

Suggestions to improve knowledge and attitudes about dementia included:

- Enhance education to dispel misinformation and myths
- Enhance access to information and resources, including in doctors’ offices and pharmacies
- Educate students
- Facilitate volunteer opportunities
- Hold community events and workshops to raise awareness
- Recruit a local champion and advocate on the issue
- Work with local newspapers to profile personal stories
- Train employees about the signs of dementia and the need to be non-judgmental, patient and respectful

“I don’t think many people know how to relate to people with dementia...”

Diagram 7: Knowledge about dementia (33 responses)

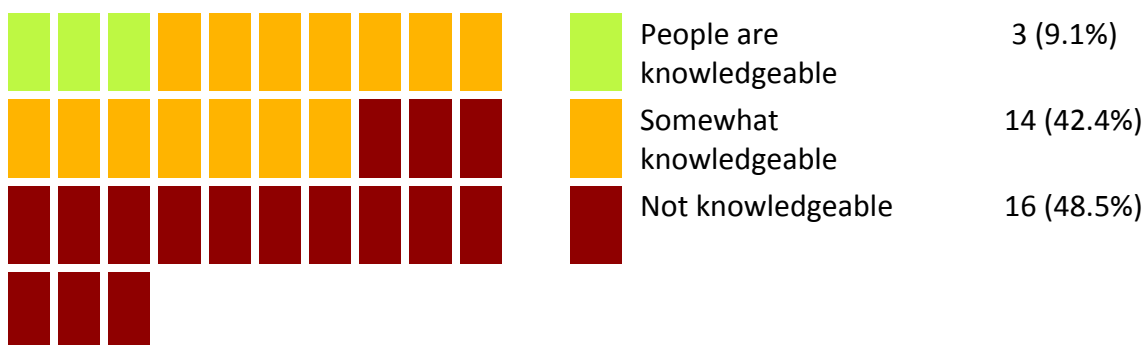
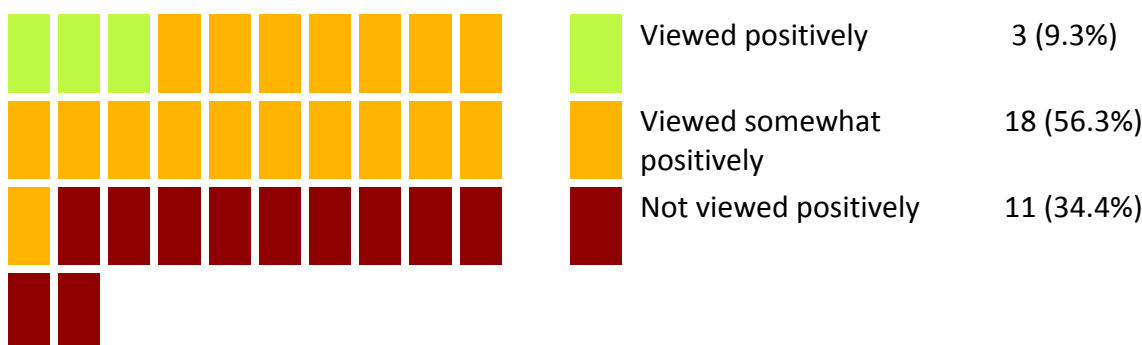


Diagram 8: Perception of people living with dementia (32 responses)



9. CHALLENGES TO LIVING AND PARTICIPATION

The majority of respondents thought the built environment was somewhat accessible and easy to use (Diagram 9: Built environment). However, the most significant challenges to living and participating in the community were related to accessibility and mobility.

Respondents cited challenges with:

- Cracked or uneven sidewalks
- Lack of curb letdowns in some neighbourhoods
- Limited supply of disabled parking
- Steep topography
- Careless drivers and traffic volumes
- Lack of accessible and affordable housing
- Poor directional signage
- Older building being demolished, which makes orientation difficult.

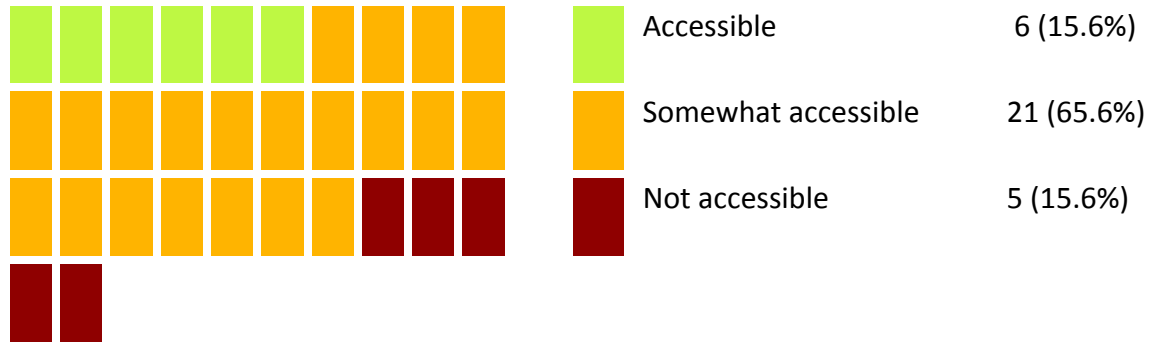
Recommendations to increase accessibility and ease of use included:

- Enhanced signage
- Improve sidewalk maintenance

“Everything is changing. It’s hard to keep up. I often don’t want to go out.”

- Provide more benches and bus shelters
- Retain historic buildings and landmarks
- Use public art to facilitate orientation and “way-finding”

Diagram 9: Built environment accessibility (32 responses)



The majority of respondents thought civic programs and services were welcoming and inclusive of people with dementia (Diagram 10: Civic programs and services). Suggestions included:

- Consult people living with dementia about program design and delivery
- Improve signage to and within facilities
- Make dementia-related resource materials available
- Offer dementia programming at facilities other than Century House
- Provide dementia-friends training to employees
- Target caregivers’ needs, as they are often overlooked.

Diagram 10: Civic programs and services (30 responses)



10. SUGGESTIONS TO IMPROVE QUALITY OF LIFE

Most respondents made at least one suggestion to improve quality of life or independence for people in New Westminister who are living with dementia. In addition to suggestions noted above, suggestions included:

Information and advocacy

- Develop a public awareness campaign to address the stigma associated with dementia.
- Provide information and resources on dementia in all civic facilities.
- Recruit a champion to be the face and spokesperson for dementia in New Westminister.

- Lobby the provincial government for increased disability benefits (as they are insufficient to afford appropriate housing and enable participation in community activities).

Community involvement

- Designate reception centres at civic facilities.
- Create a welcome ambassador program to assist persons with dementia to get more involved in community activities and events.
- Assist people with dementia to join city committees and participate in civic consultation opportunities which impact their lives.
- Create a policy (similar to the airlines) whereby families with young children and persons with a disability are provided priority entry or seating at community events.
- Create a “memory bank” at the museum and hold “reminiscence sessions” where participants recall past events or objects and socialize with each other.

Built environment

- Develop standardized signage, which is easily recognizable and facilitates ‘way-finding’ by people with dementia.
- Enhance mobility by increasing budgets for sidewalk maintenance and curb letdowns.
- Facilitate the development of more accessible and adaptable housing.
- Retain heritage buildings as they provide links to the past and are used for ‘way-finding’ purposes.
- Use public art to facilitate ‘way-finding’ for persons with dementia.

Organizations and Businesses

- Train first responders on how to identify, interact with and treat persons with dementia.
- Develop a dementia-friends on-line training program for commercial establishments and an easily recognizable symbol that the business has participated in the training and is ready and able to serve customers with dementia.
- Consider recognizing businesses and organizations that are dementia-friendly
- Designate check-outs in larger stores that are for older customers and people with dementia who need more time to unload their purchases and pay for them. Ensure staff is available to bag purchases.
- Develop a community passport program in which ten visits can earn a participant a Starbucks or Tim Horton’s gift card.
- Work with local taxi companies to accept rides at no charge for persons who may be disoriented and require transport to the hospital or a reception centre.
- Make commercial property owners more responsible and accountable for maintaining their properties, particularly related to accessibility.

“Encourage residents to reach out and to engage people with dementia and their caregivers. Nobody wants to feel on the fringes of society.”