

SUPPORT SYSTEMS

Family and Societal Perspectives (Neurology and medical care of neurodegenerative disorders)

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Learning Objectives

- Learning objective 1

Students will be able to discuss how global initiatives can impact on development of NDD care strategies

- Learning objective 2

Students will be able to understand how government approaches can be formulated in an integrated way

- Learning objective 3

Students will be able to Identify what specific needs of patients and their families can be addressed by NGOs and support groups



International – WHO

Global action plan on the public health response to dementia 2017 – 2025

- The Global action plan on the public health response to dementia 2017-2025 aims to improve the lives of people with dementia.
- Areas for action include: increasing prioritization and awareness of dementia; reducing the risk of dementia; diagnosis, treatment and care; support for dementia carers; strengthening information systems for dementia; and research and innovation.

Download document here:

<https://www.who.int/publications/i/item/global-action-plan-on-the-public-health-response-to-dementia-2017---2025>



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Action areas

5. The global action plan comprises seven action areas, which form the underlying structural framework:

Dementia as a public health priority



Dementia awareness and friendliness



Dementia risk reduction



Dementia diagnosis, treatment, care and support



Support for dementia carers



Information systems for dementia



Dementia research and innovation



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Global Targets (WHO)

Global target 1: 75% of countries will have developed or updated national policies, strategies, plans or frameworks for dementia, either stand-alone or integrated into other policies/plans, by 2025

Global target 5: 75% of countries provide support and training programmes for carers and families of people with dementia by 2025.



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Examples of international NGO support for NDDs

- ❑ **Dementia Alliance International (DAI)** <https://dementiaallianceinternational.org/about/about-dai>
- ❑ **Alzheimer's Disease International** <https://www.alzint.org/what-we-do/>



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Alzheimer's Disease International

Find out about our activities

[Read about our vision and strategy](#)

World Alzheimer Reports

The World Alzheimer Reports are a comprehensive source of global socioeconomic information on dementia. Each World Alzheimer Report is on a different topic, so the previous reports remain important sources of information with global relevance. [Read More](#)

ADI Conference

Alzheimer's Disease International holds its international conference every two years. The ADI conference is one of the longest running international conferences on dementia. [Read More](#)

World Alzheimer's Month

World Alzheimer's Month is the international campaign from Alzheimer's Disease International that takes place every September. [Read More](#)



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Case study looking at government NDD strategy in a European Country - France

NEURODEGENERATIVE DISEASES PLAN 2014-2019

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cab-fpa-presse@sante.gouv.fr



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The Challenge

- Neurodegenerative diseases are a challenge for health systems and research policies both in France and abroad.
- In France (pop. 68 million), there are currently over 900,000 people suffering from Alzheimer's or a related disease, over 150,000 suffer from Parkinson's and over 85,000 suffer from multiple sclerosis.
- Alzheimer's disease has become the fourth leading cause of death in France (2018).
- The prevalence of over a million sufferers in France and the seriousness of the impact of these diseases on the quality of life of both the sufferers and their caregivers requires action.



4 FOCUS AREAS, 12 CHALLENGES, 96 MEASURES

Home reading – study the French NDD strategy document, seeing whether parts of it can be made relevant to Sri Lanka:

https://solidarites-sante.gouv.fr/IMG/pdf/french_neurodegenerativediseasesplan2014_2019-2.pdf



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The Four Strategic Focus Areas

1. Life-long, country-wide care and support
2. Encouraging societal adaptation to the issues surrounding neurodegenerative diseases and reducing the social and personal consequences on everyday life
3. Developing and coordinating research on neurodegenerative diseases
4. Turning the governance of the plan into a real tool for innovation and management of public policies and health democracy



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An integrated approach

- Integrating associations for sufferers, their families and caregivers into the implementation and follow-up of the process
- Integrating the diagnosis, expertise, care and life-long support, regardless of age and location
- Integrating health and medico-social services for a global assessment of the healthcare and support needs of the sufferers and their relatives
- Integrating more research, health and social dimensions, as part of a drive to improve conditions for sufferers of neurodegenerative diseases
- Integrating France's input in the creation and implementation of research and health policies carried out on an international and European level



<https://sante.gouv.fr/IMG/pdf/pmnd-rapport-evaluation.pdf>

PLAN MALADIES NEURO- DÉGÉNÉRATIVES 2014-2019

Rapport d'évaluation d'experts
Pr Alain Grand
Pr Yves Joanette

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Evaluation (2020)

Assessors conclude

- a low overall implementation rate
- an insufficient budget (470 million euros – an earlier Alzheimer's programme on 2008 attracted 1.6 billion euros)
- partial evaluation due to a lack of data and discussions with the stakeholders
- too many measures/steps (96) to be realistically assessed
- ++ BUT some improvements in specific fields of diagnostic, research and the creation of a therapeutic patient education programme



Recommendations / discussion

- Assessors made seven recommendations, the main one being to extend the plan in the form of a roadmap created with patients' associations, with a basis in the Global Action Plan on Dementia developed by the World Health Organization (WHO).
- Need to see how functional impairments relating to specific diseases can be addressed rather than blanket neuro degenerative disease policies. Societal awareness, workplace awareness – can individuals continue working and contributing to society with support from employers?
- Aim is to consolidate some achievements such as the diagnosis strategy which now needs to be adopted by GPs.
- Some questions have insufficiently been addressed so far: dementia is clearly a question that affects older people, but answers need to be found to address to the needs of young people with dementia. That was a weakness of the former plan



Priorities

A lot of subjects related to Alzheimer and related diseases still require structural and financial efforts, including:

- Supporting dementia research
- Strengthening existing facilities
- Improving post-diagnostic support
- Timely diagnosis
- Targeted prevention measures
- Improving diagnosis, care and support for people with young onset dementia.
- Recognising dementia as a disability
- Supporting caregivers
- Raising societal awareness of the condition and its impact on the well-being of people living with dementia and caregivers



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**MINISTÈRE
DES SOLIDARITÉS
ET DE LA SANTÉ**

*Liberté
Égalité
Fraternité*

https://sante.gouv.fr/IMG/pdf/plan_pmnd_version_longue.pdf



Feuille de route maladies neurodégénératives 2021-2022



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2021- 2022 New Roadmap

Outline of strategy

Clear milestones, clear indicators, clear budgets! (unlike previous plan)

Some key actions:

- Consolidation of achievements in terms of entry into the care pathways
- Pathways and responses adapted to young patients
- Better access to research
- Adaptation of hospital care (avoidance of inappropriate hospitalisations)
- Adaptation of the Parkinson's patient's pathway (in particular neuro-stimulation)
- Prevention



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National societies /NGOs

- Alzheimer's Society (UK) <https://www.alzheimers.org.uk/> Large range of resources:

- support services

- Dementia Advisers

- Campaigning

- Resources targeted specifically at health professionals:

<https://www.alzheimers.org.uk/dementia-professionals>



Your local dementia support services

We are here to help. Find out more about the type of dementia support services available in your area.

Find your local
service

Search now



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If you need dementia support, we're here for you. Get personalised information, support and advice by calling us on 0333 150 3456.

We are here to help

Our dementia advisers will listen and give you support and advice, and connect you to help you need.

Phone support is available seven days a week:

Support line opening hours:

- Monday to Wednesday: 9am – 8pm
- Thursday and Friday: 9am – 5pm
- Saturday and Sunday: 10am – 4pm

***Calls charged at standard local rate**



Dementia Connect support line

0333 150 3456

Our dementia advisers are here for you.



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For dementia professionals

We provide a range of information services, resources and specialist training for health and social care professionals working with people who have dementia.

Make a referral to Dementia Connect

If you're a healthcare professional, you can refer somebody to Dementia Connect to receive tailored support from Alzheimer's Society.

[Make a referral](#)

Information

Resources for professionals

Make the world better for people affected by dementia with our resources for professionals.

[Read more →](#)

Information

Alzheimer's Society External Training

We provide expert dementia training services across all sectors. Our training is available through online learning and live training delivered by specially-trained experts at an affordable price.

[Read more →](#)

Support us

Conferences and Events

We organise and attend many dementia-related conferences and events. Find out more about the Alzheimer's Society Conferences, Awards and other partnership events.

[Read more →](#)

Information

Information

Information



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Case study – Alzheimers Association Slovenia - *Spominčica*



- Why selected as case history?
- Example of what can be achieved at NGO level, even with very limited resources



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Context

- Association has support groups around the country providing education, training, and a telephone helpline services to carers and patients. **The carers are the main focus.**
- Estimated 43000 sufferers of dementia in Slovenia
- On average one person with dementia needs 3 people to care for them – usually family members but this also includes medical professionals (hcps), social care and community services.
- **AS** work with healthcare professionals (hcps) is very well integrated and respected on both sides.



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Background

- **AS** founded 25 years ago by a psychiatrist who recognised the major lack was not in hospital treatment but in support for those looking after people with Alzheimer's
- Organisation now has 10-year history of employing 6 – 8 staff and coordinating regular volunteers.
- Education projects include [the Dementia Friendly Spots \(DFS\)](#) programme.
- Volunteers are kept to feel motivated by being involved with the organisation's development and decision making processes. They are listened to and know they are valued in improving quality of life for people with dementia and their families.



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Alzheimer café concept

- Running since 2012 in Slovenia
 - Community event
 - Usually free venue – library, community centre, café
 - Affected families invited (individuals with Alzheimers and carers)
 - Health professionals invited to give a talk on a given subject
 - Families share own experiences and solutions
 - Local media often invited – creates awareness and ‘normalises’ dementia
-
- **Provides KNOWLEDGE and is SOLUTION FOCUSED**
 - **Counters STIGMA**
 - **Reduces ISOLATION**
 - **Increases AWARENESS IN COMMUNITY**



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Volunteering and training



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Volunteering and training

- Volunteers need to learn how to do basic cognitive work, reading, talking or going out for a walk.
- They also need to learn skills about working with hard to deal with people who may have diverse disabilities as a result of dementia, including behavioural problems.
- Identifying the right people for the job – selection – is usually apparent during the training. Some will feel this is not for them.
- And there is also a final interview between family members and the volunteer to see whether they 'fit'.





Challenges

- Funding – no government support or major sponsors. Project funding available if you are creative. The plus side of this is that through joint projects you meet new experts in new areas and can see best practice from other perspectives
- Continuing stigma of dementia. Hard to attract volunteers to do the work. Not exciting or rewarding. Not like working with children



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Why does **AS** need to exist?

AS needs to exist because it does things no one else does. It works with families in the community where the daily challenges are. It brings everyone together (hcps, families carers, social workers), connects people and educates the wider public.



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Last word

The keys to success:

- Involve users from the very beginning. Ask what the real needs are, the deficits. Start with activities that bring them together. And then also engage with the hcps and aks for their help
- The issues raised can then collectively be brought to decision makers who can be lobbied for support and funding – local government, national government, health bodies, public health experts etc.



Watch 26 minute video about work done by the Slovenia Alzheimer's Association (Spominciča) ,

Interview with Secretary General, David Kriveč

<https://youtu.be/rEPILQvfq6U>



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Support systems A view on Sri Lankan context

Family and Societal Perspectives



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Aging population – Sri Lanka

Youth, Elderly and Disability Unit. Ministry of Health (2019)

Maduwage S. JCCPSL 2019, 25 (1)

Open Access

Cover Story



Sri Lankan 'silver-aged' population

Shiromi Maduwage

Youth, Elderly & Disability Unit, Ministry of Health, Sri Lanka

Correspondence: shiromimaduwage@yahoo.co.uk

DOI: <https://doi.org/10.4038/jccpsl.v25i1.8205>

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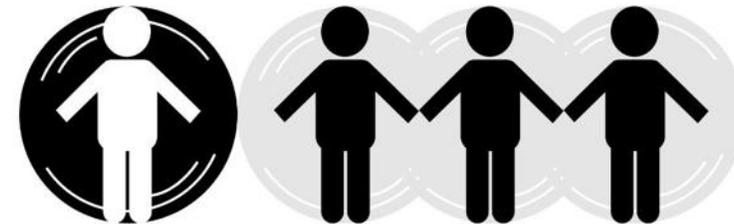
Similar to many developing countries worldwide, Sri Lanka defines elderly population as those who have completed sixty years of age and above. Sri Lankan elderly population currently represents 12.4% of the total population. Sri Lanka is one country in the world which has a rapidly ageing population. In 1953, the Sri Lankan elderly population was 5.4% and in 2003, it was 10.8% of the total population. From 1953 to 2003, within a period of 50 years, it has almost doubled in size. In 1981 and 2012, the elderly population was 6.6% and 12.4% of the total population, respectively. During 1981 to 2012, within a period of 31 years, the Sri Lankan elderly population has further doubled. It is estimated that one in four Sri Lankans will be elderly by the year 2041.

Declining fertility as well as mortality rates and increasing out-migration have become major causative factors for the increase in elderly population. Female life expectancy is higher than that of males in Sri Lanka, leading to an increasing elderly-widow population in the country. It is evident that one in every three older women is widowed. Census of Population and Housing 2012 shows that 5% of older males and 6% of older

Sri Lankan 'silver-aged' population

Sri Lanka is one country in the world which has a rapidly ageing population.

It is estimated that one in four Sri Lankans will be elderly by the year 2041.



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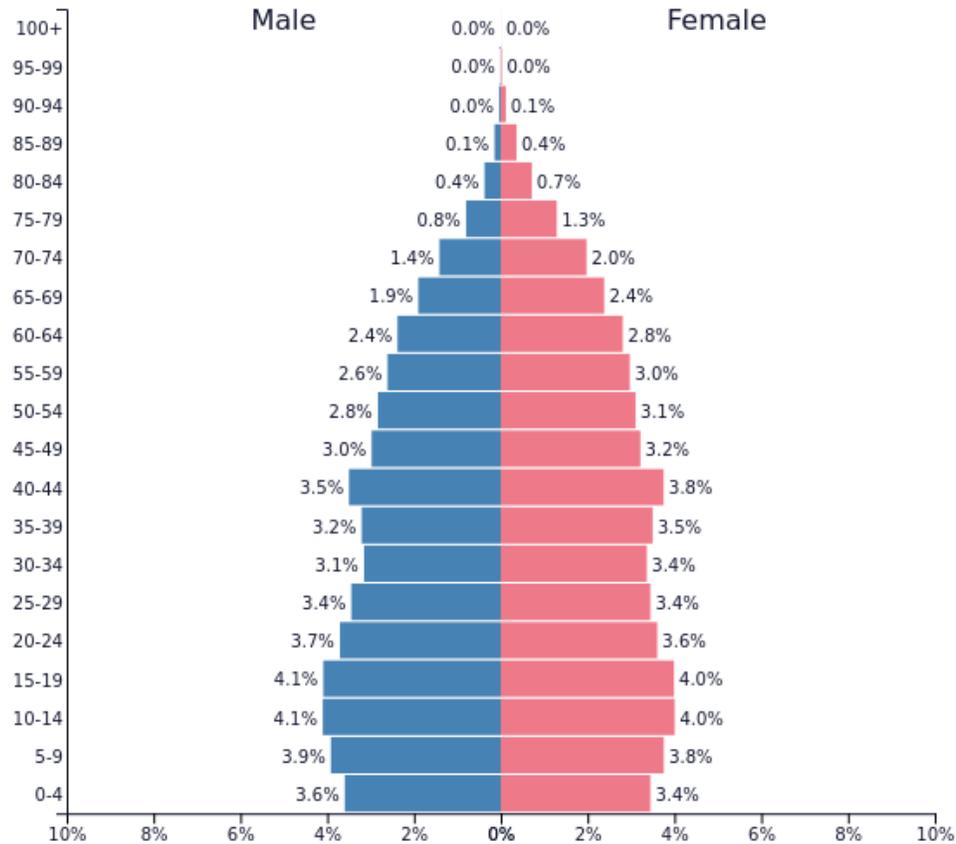
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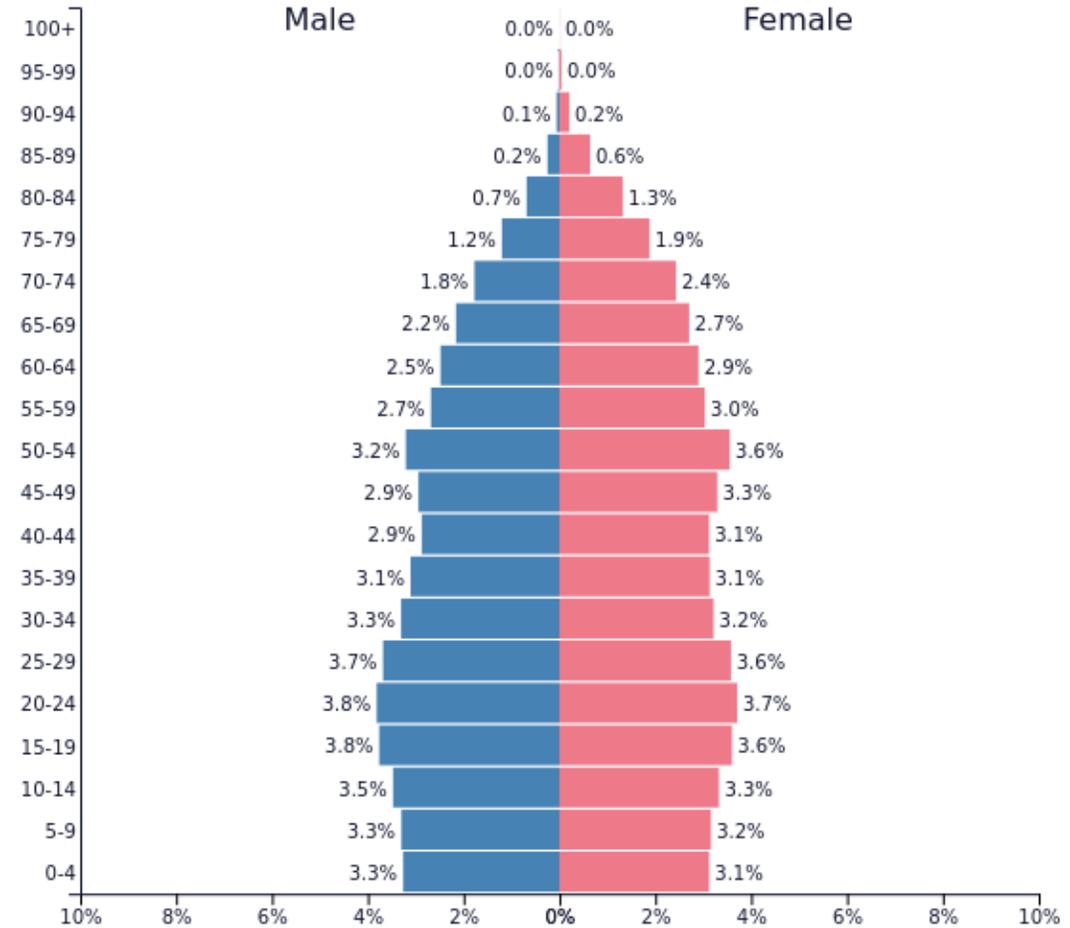
Population pyramid – Sri Lanka-2022 vs 2032

21.8 million



Sri Lanka - 2022
Population: 21,832,143

22.2 million



Sri Lanka - 2032
Population: 22,234,271

PopulationPyramid.net

PopulationPyramid.net



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Population Aged 60 and Older in South Asian Countries

E. L. Sunethra J. Perera et al. Ageing Population in Sri Lanka: Emerging Issues, Needs, and Policy Implications (2017) p.17, growth rate calculated by JICA Survey Team.
Source: JICA Survey Team

Country	Population aging rate (2012)	Population aging rate (2022)
Sri Lanka	12.4%	16.3%
India	8.5%	10.7%
Bhutan	8.4%	9.8%
Bangladesh	7.3%	9.5%
Nepal	6.8%	8.1%
Pakistan	6.3%	7.6%
Afghanistan	4.1%	4.5%

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Sri Lankan culture towards elderly



Respecting, loving and caring for elders is a prime teaching in Sri Lankan culture...

<https://dailynews.lk/2017/10/02/local/129946/world-children%E2%80%99s-and-elders%E2%80%99-day?page=3>



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Sri Lankan culture and elderly



Religious

activities/travels/pilgrimages

Peer groups



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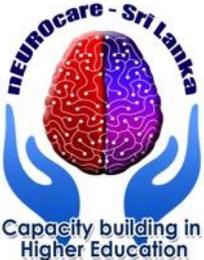
Be with grand children

Planting/gardening/household activities

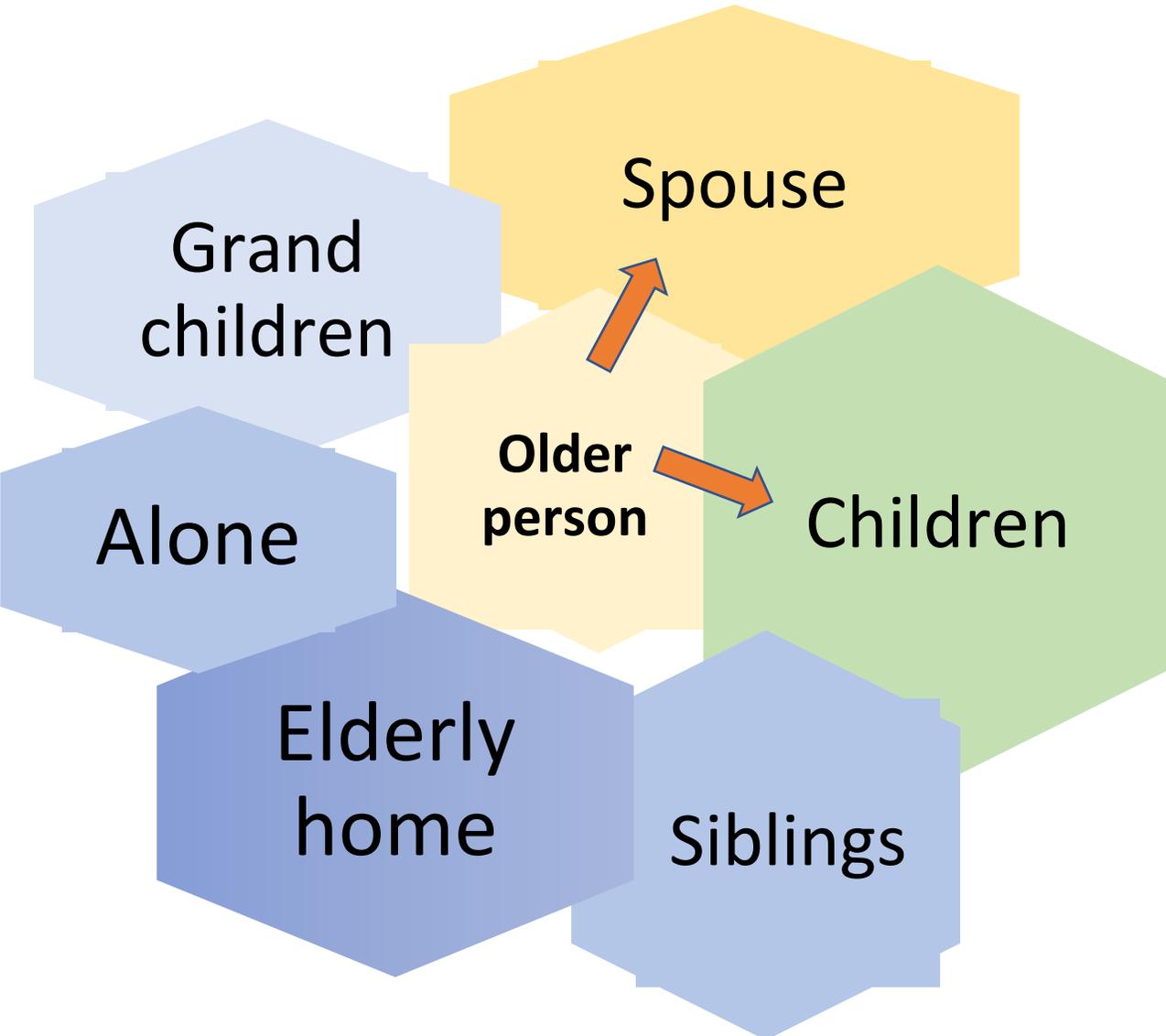


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With whom our elders live?



Majority live with spouse and/or children

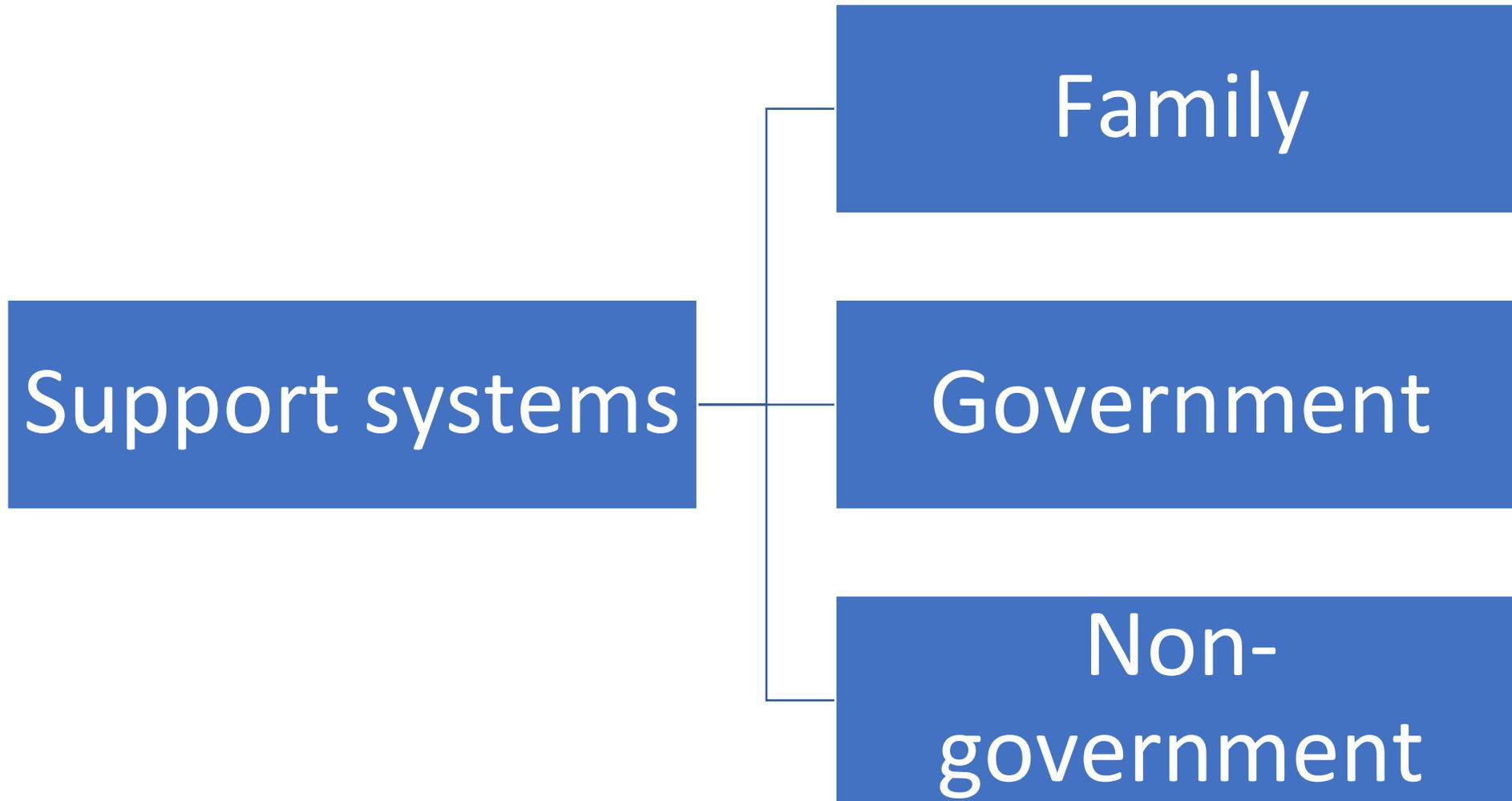


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Caring for elderly



National Secretariat for Elders

http://srilankaeldercare.gov.lk/web_2/Downloads.html

Home About Services Hierarchy Downloads

ERPO Sign In Staff Sign In

National Secretariat For Elders

Ministry of Women, Child Affairs and Social Empowerment

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முதியோர்களுக்கான தேசிய சபை மற்றும் தேசிய செயலகம்
National Council and Secretariat for Elders



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National Secretariat for Elders- “Services”

- Monthly allowance for senior citizens (for low income families)
- Maintenance of elderly homes/elder day care centers
- Provide medical aids – Spectacles, Lenses, Hearing aids, Walking aids
- Provide self-employment assistance
- Organize travel programs – “Elder Pilgrimage”
- Issuing identity cards for senior citizens
- Housing scheme



Legal Aid for Elders – Sri Lanka Government Information Centre

Government Information Centre

HOME A-Z INDEX ORGANIZATIONS GOV FORMS ABOUT US GOVSMS DOWNLOADS GALLERY HELP

CONTACT US YOU ARE HERE: HOME > JUSTICE, LAW & RIGHTS > LEGAL ASSISTANCE > LEGAL AID FOR ELDERS

Calling From Foreign Country

LATEST NEWS Q & A on Coronaviruses English / Sinhala / Tamil

PREREQUISITES Obtain Legal Aid Common

Legal Aid for Elders

Elders Desk

Nearly 2.3 million of Sri Lanka's population is senior citizens who have surpassed 60 years of age. This number constitutes about 1/5 of the total voting population of Sri Lanka. The elderly who have gained wide knowledge and immense experience is the greatest resource of a country. It can be used wisely towards the development of the country. To visit the internally displaced persons in their camps.

Protection of Rights of Elders, Act No.9 of 2000 enacted with all party support was the first attempt to recognize the challenges forced by senior citizens. The Law however, established the National Council of Elders to organize over 6500 village elders societies and provide them with service resources to develop self employment programs. Village based elders societies could be considered a success as they have generated programs on their own. However, organization of elder's societies has to be restructured so that the wealth, experience and talent lying unused with elders are harnessed for the development of our country. As elders respect human values more than the globalized middle aged people, they should be harnessed as teachers in pre-schools like in many other countries.

The Elders' Desk of the Legal Aid Commission was set up mainly for the following purposes:-

- To provide free legal advice regarding maintenance, accident claims, loss of property, pension and fundamental rights of destitute elders.

Protection of Rights of Elders, Act No.9 of 2000



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Non-government support



Health camps



Distribution of medical assistive devices



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<https://island.lk/aia-continues-societal-support-through-its-digital-vesak-dane-with-a-donation-to-helpage-sri-lanka/>



Non-government support



Free cataract surgeries



Formal training for caregivers



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Elderly care homes

- Sri Lanka currently has around 255 eldercare homes serving approximately 7,100 elder residents.
- Few governed by the government.
- The private sector operates majority of homes; not-for-profit and funded by private donations and some non-government funding.



Elderly care homes – Sri Lanka



Rest/sleep area



Dinning area



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Elderly homes – Sri Lanka

Leisure activities
Religious activities



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Sri Lanka, The Netherlands “Welcome Village”- Pannala



The project was initiated by Herman Steur, founder of the friendship association with the Netherlands

400 people can be accommodated

200 cottages

Currently 41 are residents



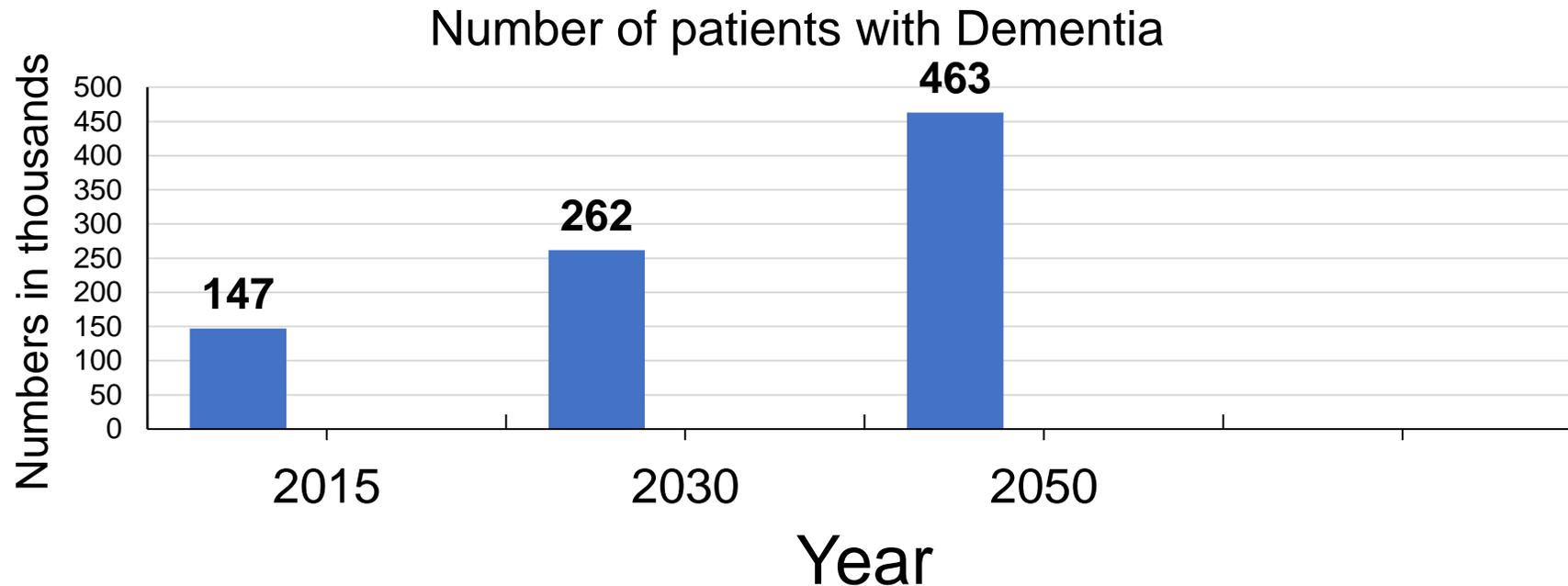
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Prevalence of NDDs in Sri Lanka

- According to the latest WHO data published in 2020 Alzheimers & Dementia Deaths in Sri Lanka reached 6,939 or 5.98% of total deaths.



(<https://www.worldlifeexpectancy.com/sri-lankaalzheimers-dementia>)



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Family care towards people with NDDs

- **Informal care** at home is often provided by family members, usually, a female.
- Untrained domestic workers are sometimes hired as caregivers.

Feeding

Bathing

Giving routine
medicine

Taking to the
doctor/regular
clinics

Toileting

Promote
rest and
sleep

Provide
safety/protection



Care givers' perspectives - Dementia

Family carers' perspectives of managing activities of daily living and use of mHealth applications in dementia care: A qualitative study

Rathnayake, Sarath; Jones, Cindy; Calleja, Pauline; Moyle, Wendy

Published in:
Journal of Clinical Nursing

DOI:
[10.1111/jocn.15030](https://doi.org/10.1111/jocn.15030)

Licence:
Other

[Link to output in Bond University research repository.](#)

Recommended citation(APA):
Rathnayake, S., Jones, C., Calleja, P., & Moyle, W. (2019). Family carers' perspectives of managing activities of daily living and use of mHealth applications in dementia care: A qualitative study. *Journal of Clinical Nursing*, 28(23-24), 4460-4470. <https://doi.org/10.1111/jocn.15030>

The most difficult activities reported by carers were bathing, toileting, dressing, transferring and feeding.

Memory impairment
Resistance to care
Communication
Poor recognition of the carers
Rejection of routine care

Lack of carer support groups
in the community



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Sri Lanka Alzheimer's Foundation (LAF)



1999

Non-government organization

Address:

110

Ketawalamulla Lane,
Colombo 09
Sri Lanka.



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Services provided by the Alz. foundation

- Memory screening/assessment
- Raising awareness and eradicating stigma towards NDDs
- Arrange caregiver support groups/meetings
- Establishment of activity centre
- Counselling
- Education on risk reduction
- Volunteer support



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Screening area – at Alzheimer’s Foundation



9am – 3pm

✓ Monday

✓ Wednesday

✓ Friday

Day
centre



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Sri Lanka Alzheimer's Foundation (LAF)



Day
centre



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Activity area – What they do?



- ✓ Art work
- ✓ Hand crafts
- ✓ Simple games

- ✓ Lunch
- ✓ Tea



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Activity time -with volunteer support staff



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Music therapy



- ✓ Singing
- ✓ Dancing
- ✓ Playing musical instrument



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Determinants of quality of life - Dementia

Jayakody and Arambepola *BMC Geriatrics* (2022) 22:745
<https://doi.org/10.1186/s12877-022-03443-3>

BMC Geriatrics

RESEARCH

Open Access

Determinants of quality of life among people with dementia: evidence from a South Asian population



Surangi Jayakody^{1*} and Carukshi Arambepola²

Jayakody, S. and Arambepola, C., 2022. Determinants of quality of life among people with dementia: evidence from a South Asian population. *BMC geriatrics*, 22(1), p.745.

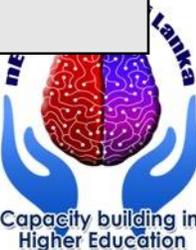
- Age
 - Sex
 - Spouse being the caregiver
 - Daughter/son being the caregiver

 - Monthly income > 20000 rupees
 - Ever employed
 - Social class middle or above
 - Good general medical health
 - Mild functional impairment
 - Good social functioning/participation
 - Little or no caregiver burden
- p<0.05



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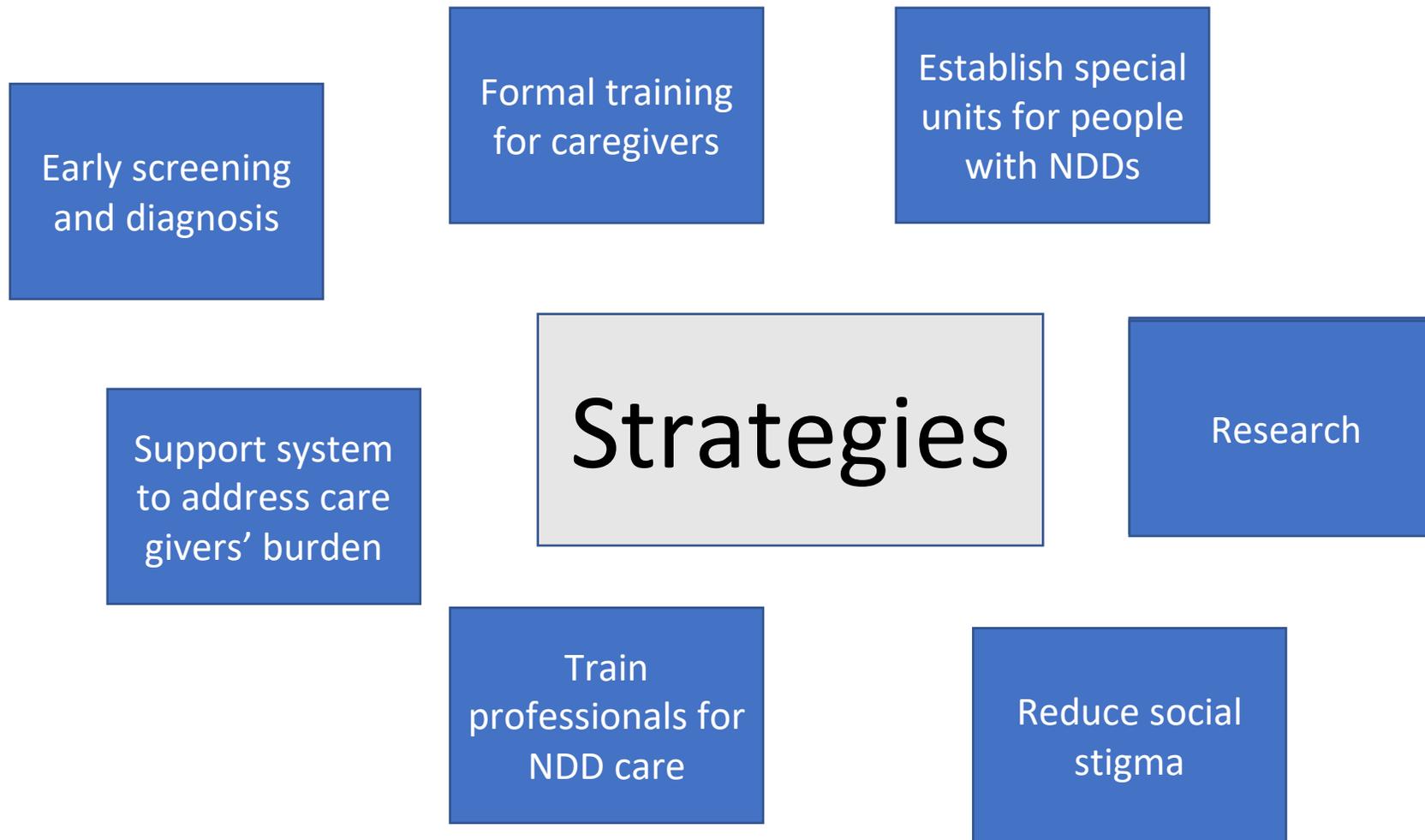
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Gaps, barriers and shortcomings identified in Sri Lanka with regards to the care of people with NDDs

- Most cases are undiagnosed – “Think that features of the patient are normal in elderly”
- Less focus on early screening
- Inadequate knowledge and skills in care for people with NDDs – Mostly ‘informal care givers’
- Lack of special care – Mostly focus on general elderly care but not NDDs





“strategies to overcome barriers”



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Legal Aspects



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Acts

- ❑ The Protection of the Rights of Elders act, No. 9 of 2000 and the Protection of the Rights of Elders (Amendment) Act, No. 5 of 2011

focus on the rights and welfare of elders in Sri Lanka

- ❑ The 2000 Act established the National Council for Elders (NCE) and National Secretariat for Elders (NSE)

assist the elders mentioning that children must provide care to their parents without neglect.

- ❑ These two acts (NCE and NSE) recommended programs to support families, and establish welfare centers, recreation centers, and daycare centers (UN, 2019).

- ❑ The Protection of the Rights of Persons with Disabilities Act (1996)

to address issues faced by disabled people in Sri Lanka regarding their rights



Policies

- ❑ National Policy for Senior Citizens of Sri Lanka (2006)
 - ❑ Defines the rights and responsibilities of older persons in Sri Lanka.



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Protection of the rights of elderly

- AN ACT TO PROVIDE FOR THE ESTABLISHMENT OF A NATIONAL COUNCIL FOR ELDERS FOR THE PROMOTION AND PROTECTION OF THE WELFARE AND THE RIGHTS OF ELDERS ; AND TO PROVIDE FOR MATTERS CONNECTED THEREWITH OR INCIDENTAL THERETO
- Be it enacted by the Parliament of the Democratic Socialist Republic of Sri Lanka as follows :-
- <https://www.lawnet.gov.lk/protection-of-the-rights-of-elders-3/>
- 1. This Act may be cited as the Protection of the Rights of Elders Act. No. 9 of 2000 and shall come into operation on such date as the Minister may appoint by Order published in the Gazette (hereinafter referred to as the “appointed date”).
- 2. There shall be established a Council called the National Council for Elders (hereinafter referred to as the “Council”



The Council shall consist of the following members :-

- (a) the Secretary of the Ministry of the Minister in charge of the subject of Social Services who shall be the Chairman of the Council ;
- (b) the Additional Secretary of the. Ministry of the Minister in Charge of the subject of Social Services who shall be the Vice Chairman of the Council ;
- (c) the Director of the Department of Social Services who shall be the Secretary of the Council ;
- (d) three members appointed by the President in consultation with the Minister to represent elders in Sri Lanka ;
- (e) five members appointed by the President in consultation with the Minister to represent voluntary organisations, that are engaged in providing services to elders and are registered under this Act:
- (f) four other members appointed by the President in consultation with the Minister, by name or office. from among professionals, members of corporate bodies and public officers.



The National Elderly Health Policy of Sri Lanka 2017

- Provide comprehensive health care for elders
- Make available well-trained personnel to effectively manage the health care of elders
- Empower elder care societies
- Identify volunteers and the community in all aspects relating to the care of older people
- Recognizes the need for long term care (LTC) and proposes to convert some underutilized health-care facilities to government-operated LTC institutions
- Propose institutions for older people in identified hospitals across the country and to develop human resources to fulfil the cadre requirements of the proposed LTC institutions for older people



International - WHO

- **Global action plan on the public health response to dementia 2017 – 2025**
 - ❑ The Global action plan on the public health response to dementia 2017-2025 aims to improve the lives of people with dementia, their carers and families, while decreasing the impact of dementia on communities and countries. It provides a set of actions to realize the vision of a world in which dementia is prevented and people with dementia and their carers receive the care and support they need to live a life with meaning and dignity.
 - ❑ Areas for action include: increasing prioritization and awareness of dementia; reducing the risk of dementia; diagnosis, treatment and care; support for dementia carers; strengthening information systems for dementia; and research and innovation.

Download document here:

<https://www.who.int/publications/i/item/global-action-plan-on-the-public-health-response-to-dementia-2017---2025>



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Sources (open access articles, links etc)

□ Links

- <http://www.socialproba.cp.gov.lk/en/social-welfare-services/services-for-the-elders.html>
- <https://gic.gov.lk/gic/index.php/en/component/info/?id=1336&catid=30&task=inf>
- <https://sric.lk/page/services-for-elders/16>



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“It is not too late to make a better change”



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Thank you



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