

# Evidence *in* Context

The Issue: **Supporting the Independence of Persons with Dementia**  
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## Supporting the Independence of Persons with Dementia in Newfoundland and Labrador

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### The Issue

- Health policy makers in Newfoundland and Labrador are seeking the best evidence on interventions that have been found to support persons with mild to moderate dementia and their caregivers so as to enable people to age in place and preventing or delaying admissions into long-term care.

### The Question

*“What interventions are most effective in preventing or delaying the admission of people with dementia to long-term care?”*

### The Results

- There is promising evidence for the effectiveness of psychoeducational caregiver supports. While face-to-face educational programs are most clearly effective, there is considerable evidence to support the use of educational and psychosocial interventions offered in combination, using a variety of delivery models.
- There is partial or qualified evidence to demonstrate the effectiveness of:
  - dementia case management;
  - exercise interventions as a means of reducing functional limitations, mobility problems, and falls among people with dementia; and
  - interventions targeting performance of Activities of Daily Living (ADL), particularly when they involve face-to-face contact with health professionals.
- The evidence base is insufficient at present for the effectiveness of respite care, meditation (for caregivers) and interventions for preventing urinary incontinence.

### The Local Context

- Persons with dementia often try to access services only when they are already in crisis; decision makers should consider prioritizing early identification and outreach.
- People affected by dementia often struggle with navigating the health system, applying for support services, and accessing follow-up care; therefore, building capacity to provide support for these activities should be considered.
- Chronic shortages of qualified home-support workers are a serious impediment to the Home Support Program’s goal of supplementing family and other support networks. The lack of standardized dementia-care training for people who provide home support can compromise the ability of such workers to meet their clients’ needs and manage the behavioural symptoms of the disease.
- Expanding the number of dementia-friendly day programs can help family caregivers and create opportunities for persons with dementia to connect with health professionals and engage in therapeutic activities that may improve their physical functioning and ADL performance.
- There is a need among persons with dementia living outside of long-term care settings for a more affordable range of residential care options.
- Maximizing the potential impacts that community-based allied health workers can have on the lives of persons with dementia and their families may require additional investment in these human resources.

Read the full report here: <http://www.nlcahr.mun.ca/CHRSP/>

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