

Evaluating Aging in Place with Dementia: Towards a value proposition

Dr Louise Lafortune

Cambridge Public Health, University of Cambridge

NAS Workshop 13-15th September 2023 (Virtual)

Aging in place successfully

Framing

- What people call “home” does not exist in a vacuum – it is necessarily embedded in some form of interconnected community, social and policy environments.
 - whether these environments are enabling will determine whether the aging experience is successful...or not.
- Programs that support aging in place – with or without dementia – should focus on optimizing the fit between an individual and the environment they live in.
 - Challenge – The evidence base of what works, for whom, under what circumstances is thin, creating barriers for implementation & the scaling up of interventions.

Aging in place successfully

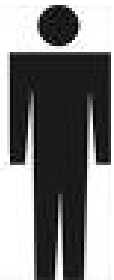
Framing for evaluation research

Promoting a successful later life can work and add value at all stages of health and frailty *if* efforts are well targeted and delivered equitably

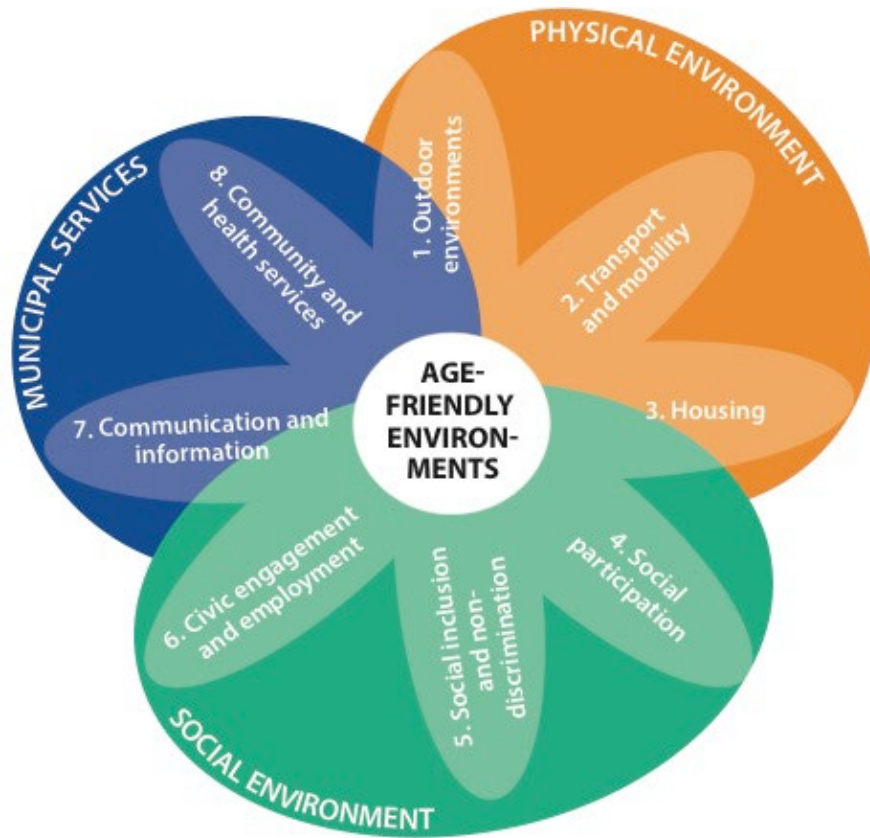
Understanding
the factors that
influence
successful
aging

Developing
interventions &
solutions
tailored to
needs

Demonstrating
what works &
adds value



Framework - Age-Friendly Cities & Community (AFC)



Individual ↔ Environment
physical, social, economic, technological, polity

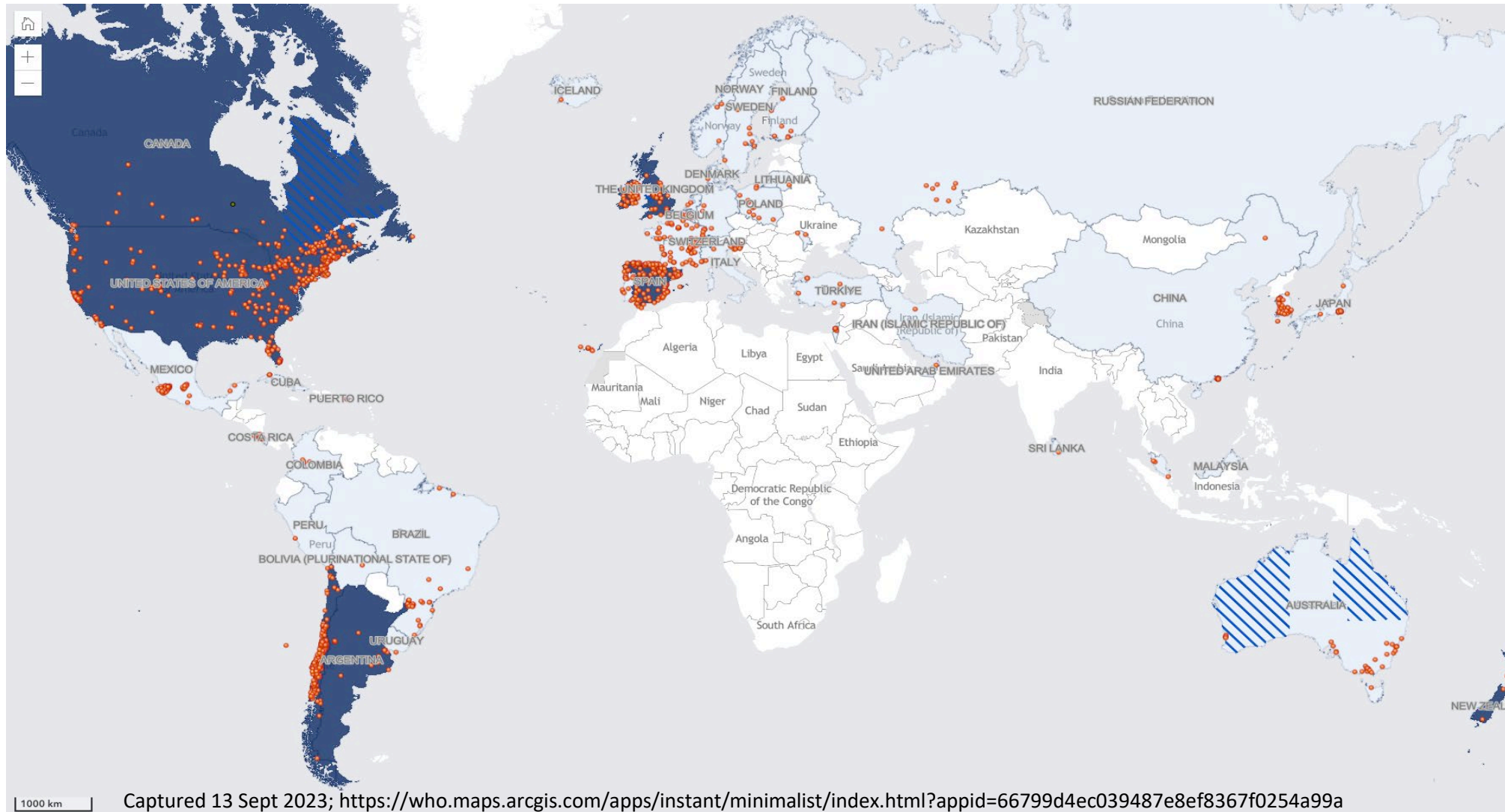
...is one in which “policies, services, settings and structures support and enable people to age actively.”

WHO 2007 & 2015

”...are created by removing physical and social barriers & implementing policies, systems, services, products and technologies that address the social determinants of healthy ageing, and enable people, even when they loose capacity, to continue to do the things they value”.

UN Decade of aging, 2021

WHO Network of Age-Friendly Communities



AFC programme - Building capacity for evaluation

Monitoring & Evaluation needs

UK network of AFC

“...we need to demonstrate what we're doing...we are being asked 'what impact are you making, how is this making a difference’”

Lack of capacity for evaluation

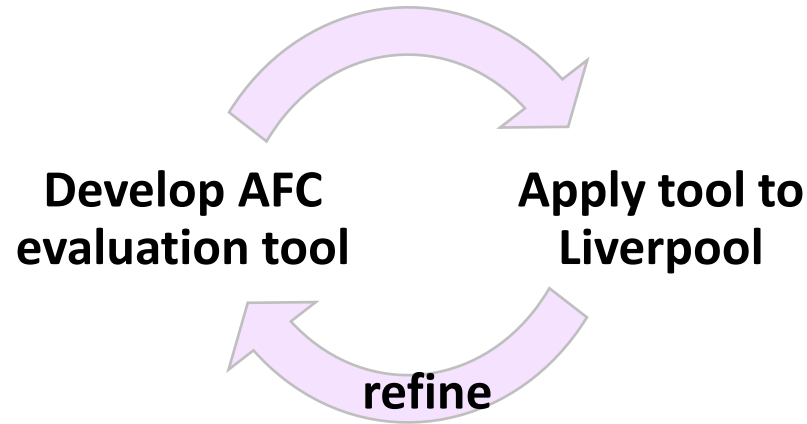
Age-Friendly Communities Evaluation Tool

	Evidence
1	Political support
2	Leadership & governance
3	Financial & human resources
4	Involvement of older people
5	Priorities based on needs assessment
6	Application of existing frameworks for assessing age-friendliness
7	Provision
8	Interventions rooted in evidence base
9	Co-ordination, collaboration & interlinkages
10	Monitoring & evaluation

AFC - S Buckner et al.

- <https://doi.org/10.1007/s12062-017-9206-2>
- <https://doi.org/10.1108/WWOP-11-2017-0032>

Age Friendly Community Evaluation Tool

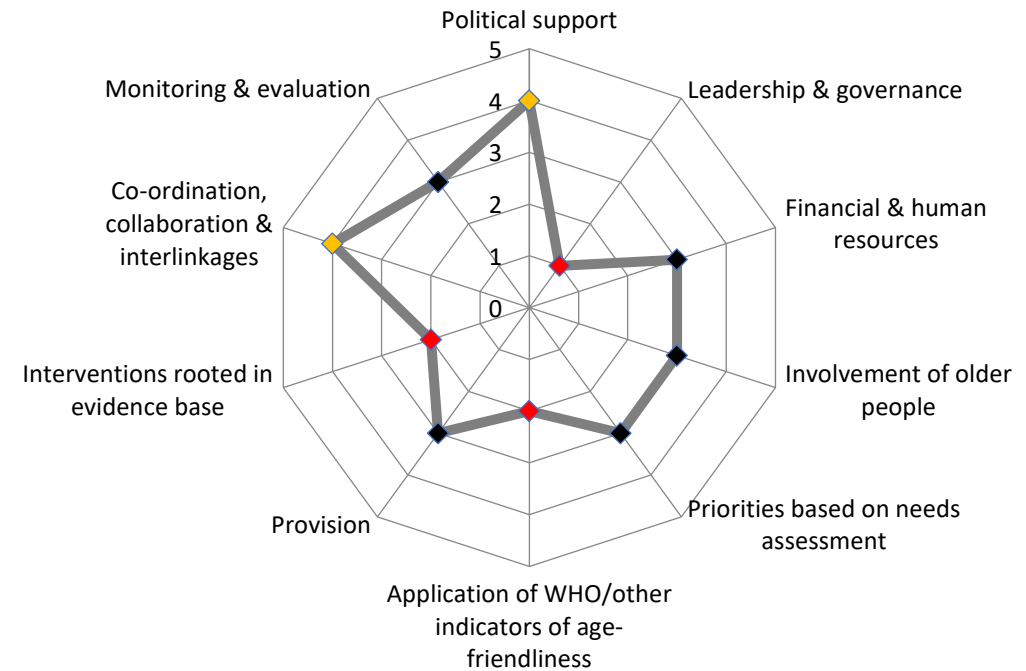


Pilot testing – is the tool flexible enough?

- Falls intervention (identified priority as part of tool development)
- Dementia friendly community (Sheffield)
- New community (Healthy New Town, Northstowe)

Age Friendly Community Evaluation Tool

	Evidence input areas
1	Political support
2	Leadership & governance
3	Financial & human resources
4	Involvement of older people
5	Priorities based on needs assessment
6	Application of existing frameworks for assessing age-friendliness
7	Provision
8	Interventions rooted in evidence base
9	Co-ordination, collaboration & interlinkages
10	Monitoring & evaluation



Building capacity for evaluation

Monitoring & Evaluation needs

UK network of AFC

“...we need to demonstrate what we're doing...we are being asked 'what impact are you making, how is this making a difference’”

Lack of capacity for evaluation

Age-Friendly Communities Evaluation Tool

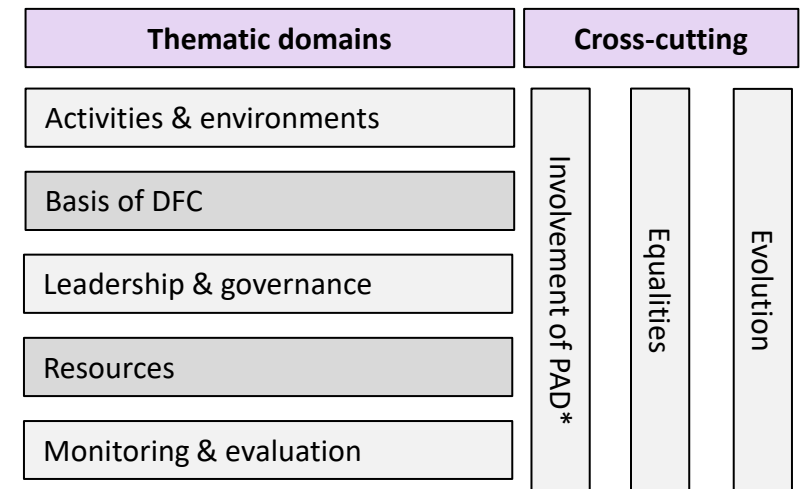
	Evidence
1	Political support
2	Leadership & governance
3	Financial & human resources
4	Involvement of older people
5	Priorities based on needs assessment
6	Application of existing frameworks for assessing age-friendliness
7	Provision
8	Interventions rooted in evidence base
9	Co-ordination, collaboration & interlinkages
10	Monitoring & evaluation

AFC - S Buckner et al.

- <https://doi.org/10.1007/s12062-017-9206-2>
- <https://doi.org/10.1108/WWOP-11-2017-0032>

Dementia Friendly Communities National Evaluation

Revised framework



*people affected by dementia

DEMCOM

- <https://doi.org/10.1002/gps.5123>
- <http://dx.doi.org/10.1177/1471301220965552>
- <https://doi.org/10.1002/gps.4987>

Dementia Friendly Communities (DFC)

Policy context

- Two Prime Minister's Challenges on Dementia (2012 & 2015)
- Target by 2020: *'Over half of people living in areas that have been recognised as DFCs'* (PMC 2015)

Practice

- DFCs come in different shapes and sizes
- Common goal: ensuring that people affected by dementia can continue to be active & valued citizens
- DFCs are not necessarily geographical communities – also communities of interest (e.g. shopping centres; churches; national banks)

Recognition process

- Alzheimer's Society provides guidance & official recognition for communities 'working towards becoming dementia friendly'

National Evaluation of DFC in England

DEMCOM

Research questions

- What are the characteristics and areas of focus of DFCs in England?
- How do different types of DFCs enable people affected by dementia (PAD) to live well?
- What is needed to sustain DFCs?
- What value do they generate?
- How can we assess DFCs?



Phase 2 - Pilot testing DFC evaluation framework

Initial framework

Areas for evidence collection ('domains')
Political support
Leadership & governance
Financial & human resources
Involvement of people affected by dementia
Priorities based on needs assessment
Application of existing frameworks for assessing dementia-friendliness
Provision
Interventions rooted in evidence base
Co-ordination & collaboration
Monitoring & evaluation



Revised framework

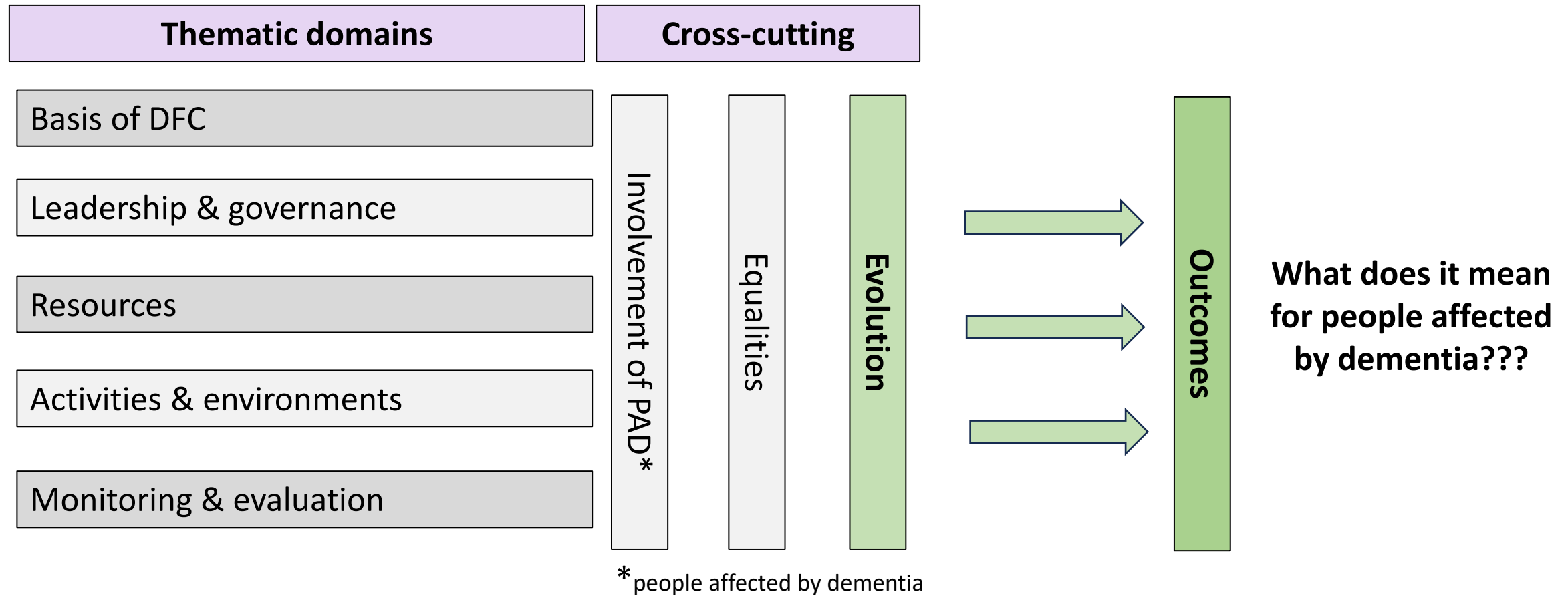
Thematic domains	Cross-cutting		
Activities & environments	Involvement of PAD*	Equalities	Evolution
Basis of DFC			
Leadership & governance			
Resources			
Monitoring & evaluation			

*people affected by dementia

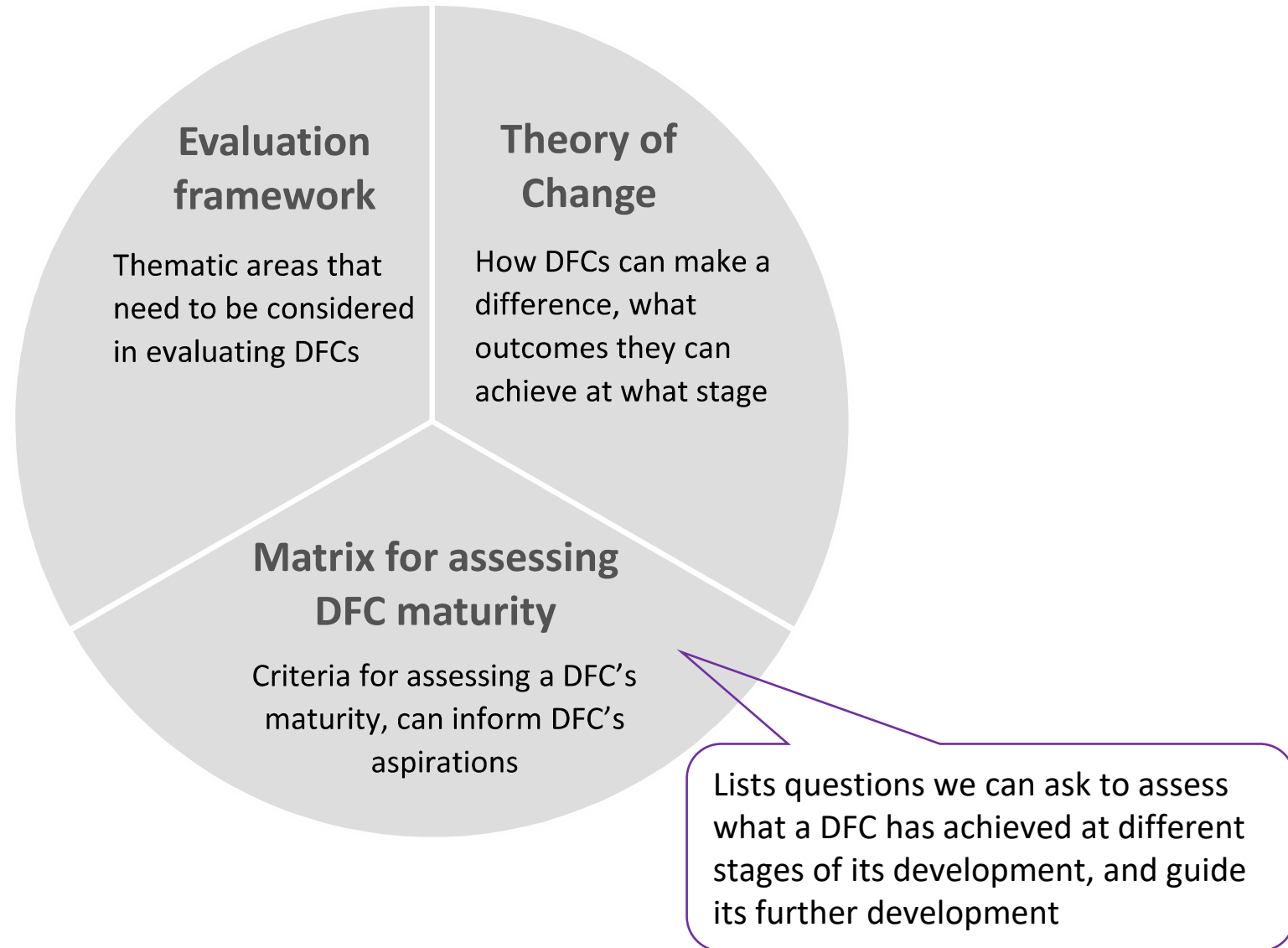
	Outcomes resulting from the DFC's efforts.
--	--

Figure 6. (a) The evaluation framework for DFCs – final iteration. b. Areas of focus of the evaluation framework domains. Buckner et al., 2022

DFC Evaluation framework



Suite of DFC Evaluation resources



Theory of change for DFC



Research

Evidence base on DFCs

Dementia is normalised

An economic perspective on DFCs

We sought to gain a better understanding of

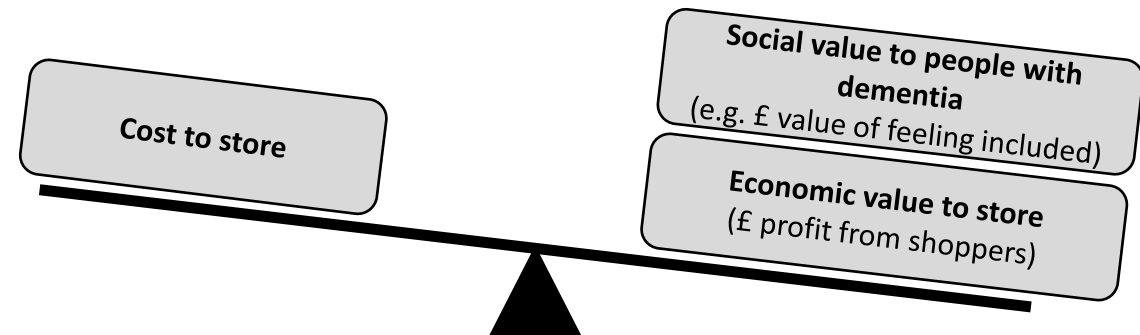
- the resources that drive DFCs
- the social value generated by DFCs

1) Resource input in case study DFCs

	Site A	Site B	Site C	Site D	Site E	Site F
Source/Flow/Sufficiency - Sustainability						
✓ Charities	++	(+++)	(+)	+++	+	++
✓ Public/Statutory funding	+++	+++		++	+++	
✓ Private sector	+					+++
✓ User charges & contributions	+	+				
✓ Fundraising	++	+++	--		++	
✓ Donations	+		+	++++		
✓ Grants			+	++	+	
Salaried staff	++	+++	-	+	++	
Volunteers	++	+	++++	+	+++	+
✓ Trained staff	+	++	+++		+++	
✓ Members of community	++	+	++++		+	++
✓ PWD	+	+++	(+)			(-)
✓ Support from partner organisations			++	+++	++	+++
Built infrastructure / technical support / Sundry						
✓ Information	+		++			++
✓ Room/venues/offices	+	+	+++	+++		
✓ printing & equipment	+		++			
✓ design support						
✓ transport services	+		++			

2) Scenarios to calculate the value generated by DFCs

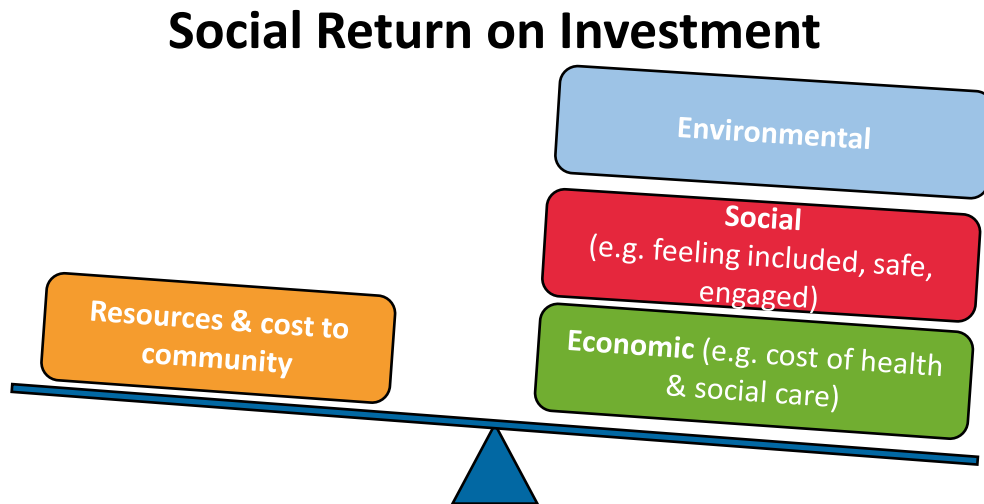
Example: A local grocery store trains staff as Dementia Friends, to help retain/attract customers living with dementia



- DFCs are assumed to have a high Social Return on Investment
- Case study findings from DEMCOM suggest this is the case
- **Gap to fill: more data needed for a thorough assessment of**
 - i) resources dedicated to DFC activity
 - ii) outcomes/impact of DFC on PAD and their communities

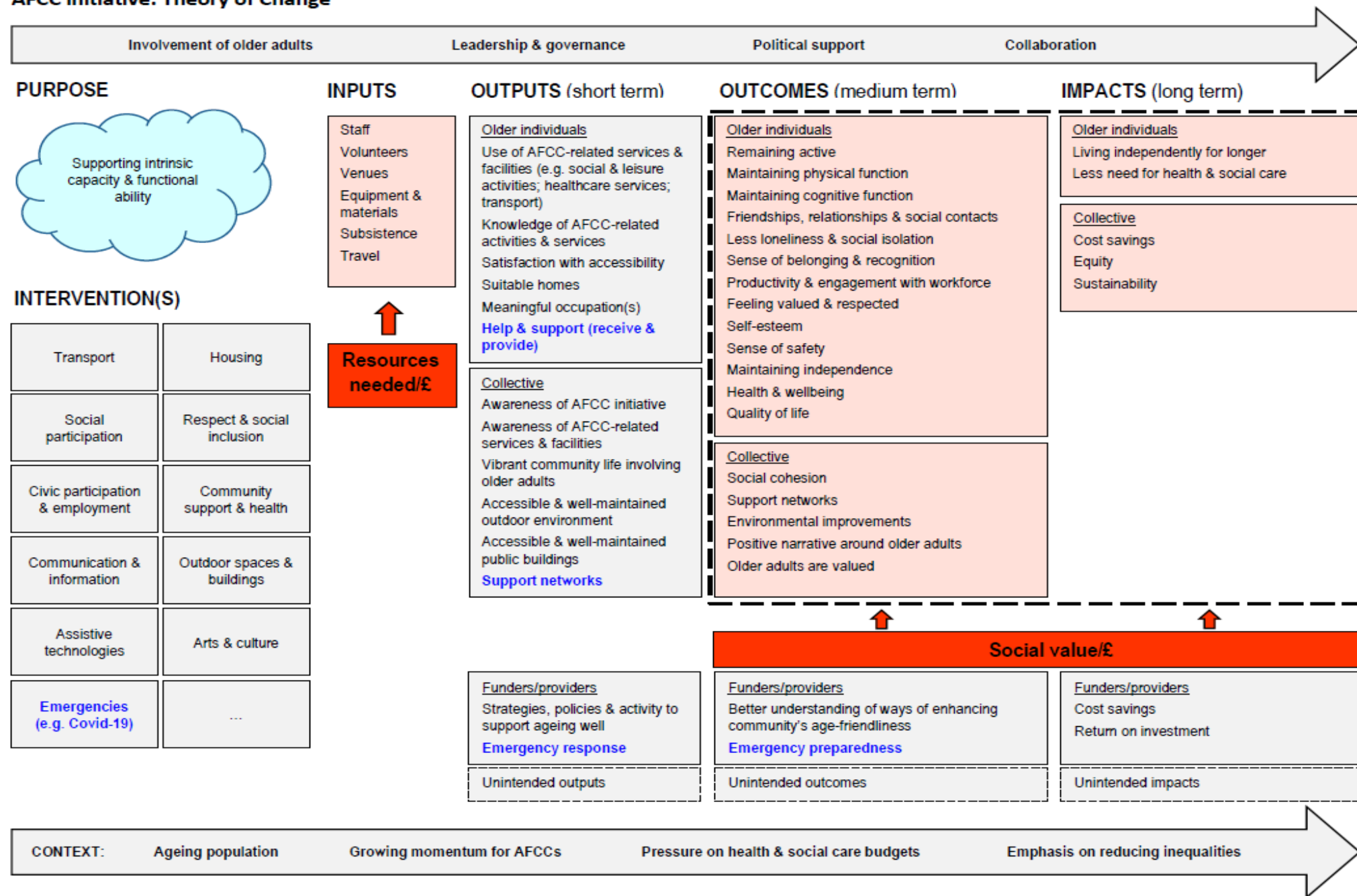
Towards a value proposition for AFC

- Efforts to assess impact of Age-Friendly Community initiatives to date...
 - ❖ Largely focused on the process / individual components
 - ❖ Much less is known about **short and long-term benefits & resources implications**



How much social value do we generate for each \$ invested in Age friendly or dementia friendly communities?

AFCC initiative: Theory of Change



Social Return on Investment of AFC

Aim

To evidence the health-related outcomes of AFC interventions & their social value for older adults, and the resources needed to sustain these complex interventions at different geographical scales.

Research questions

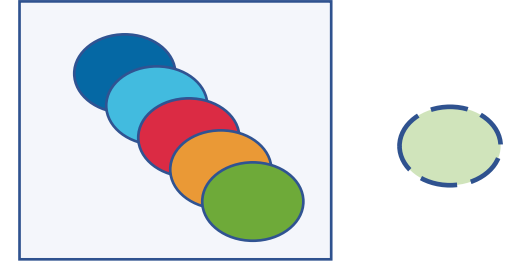
- What are the preferred health-related outcomes of AFCC interventions and their social value?
- What are the resource requirements for effective and sustainable AFCC interventions?
- Are some approaches to age-friendliness more likely to generate more social value than others?
- What should a practice-friendly resource for assessing the SROI of AFCC interventions look like?

Social return on investment

Aging-well interventions

Systematic review of the evidence

- None look at overall AFC or DFC initiatives (as expected...)
- 23 studies - 7 peer reviewed papers & 16 technical reports/grey literature
- Overall moderate to good quality evidence
 - Scope for researchers to improve it by deploying robust data collection
- Studies mostly conducted in the UK; with a few from the US
- Overall message: **Ageing well interventions – including those targeting people with dementia – generate a positive social return on investment**



SROI - Project objectives

6 complementary work packages (Oct 2020 - Nov 2023)

- Synthesise existing evidence of the social value of AFCs
- Develop a list of prioritised AFC outcomes
- Attribute monetary values to outcomes using preference-based valuation with older adults
- Characterise & quantify the resources involved in developing and sustaining AFCs
- Assess the SROI of case study age-friendly interventions
- **Develop a social value resource for age-friendly interventions that can be used in practice**

Considerations for future work

- Encourage interdisciplinary research programs – to create the knowledge space needed to understand:
 - mechanism of action of complex interventions
 - their impact on phenotypes of aging in context
 - lift barriers to the implementation of research findings
- Evaluations should embrace the complexity of aging in place with dementia
 - Engage older adults and practice stakeholders from design to implementation of evaluation (funding it helps!)
 - Develop theory of change to guide impact assessment
 - Tailor research question and methods to the maturity of the intervention

Considerations for future work

- Economic and social value implications need to be better understood to foster implementation and help sustain aging in place initiatives, programs and interventions
 - Resources implications
 - Outcomes prioritized by older adults – core measures?
 - Economic evaluations
 - Focus not only on “new” initiatives but also on what is already happening
 - Understand what works to scale up
 - Stop what doesn’t work!
- Embrace an equity lens to avoid intervention generated inequalities
 - Who is likely to benefit?
 - HIAT For equity: <https://forequity.uk/hiat/>

Funding & Acknowledgements

The work presented in this workshop was funded and supported by multiple funders:

Age friendly community projects

- NIHR School for Public Health Research
- NIHR Public Health Research Program

Dementia Friendly Community project

- DEMCOM NIHR Policy Research Programme (PR-R15-0116-21003)

Funding & Acknowledgements

- *National Evaluation of Dementia Friendly Communities: The DEMCOM Study* is funded by the NIHR Policy Research Programme, PR-R15-0116-21003
- DEMCOM was a collaboration between three universities who are all part of the Applied Research Collaboration (ARC) East of England

DEMCOM Research Management Team

University of Hertfordshire:	Prof Claire Goodman (PI) , Nicole Darlington, Dr Elspeth Mathie, Dr Andrea Mayrhofer, Dr Angela Dickinson, Pepsi Reilly, Dr Marina Buswell
University of East Anglia:	Prof Tony Arthur, Dr Anne Killelt, Dr Michael Woodward, John Thurman
University of Cambridge:	Dr Louise Lafortune, Dr Stefanie Buckner

References

- Buckner S, Mattocks C, Rimmer M, Lafortune L. An evaluation tool for age-friendly and dementia friendly communities. *Working with older people*. 2018. 22;1:48-58. DOI: <https://doi.org/10.1108/WWOP-11-2017-0032>.
- Buckner S, Mattocks C, Rimmer M, Lafortune L. An evaluation tool for age-friendly and dementia friendly communities. *Working with older people*. 2018. 22;1:48-58. DOI: <https://doi.org/10.1108/WWOP-11-2017-0032>.
- Buckner S, Lafortune L, Darlington N, Dickinson A, Killett A, Mathie E, Mayrhofer A, Woodward M, Goodman, Claire. A suite of evaluation resources for Dementia Friendly Communities: development and guidance for use. *Dementia. the international journal of social research and practice*. 2022;21(8):2381-240. DOI:<https://doi-org.ezp.lib.cam.ac.uk/10.1177/14713012221106634>
- Buckner S, Darlington N, Woodward M, Buswell M, Mathie E Arthur A, Lafortune L, Killett A, Mayrhofer A, Thurman J, Goodman C. D. Dementia Friendly Communities in England: a scoping study. *International Journal of Geriatric Psychiatry*. 16 April, 2019. DOI: <https://doi.org/10.1002/gps.5123>
- UN Decade of Ageing; accessed 8 September 2023: <https://www.who.int/initiatives/decade-of-healthy-ageing>
- WHO 2007 & 2015, accessed 8 September 2023; <https://extranet.who.int/agefriendlyworld/age-friendly-cities-framework/>
- Woodward M, Arthur A, Darlington N, Buckner S, Killet A, Thurman J, Buswell M, Lafortune L, Mathie E, Mayrhofer A, Goodman C. The place of dementia friendly communities in England and its relationship with epidemiological need. *International Journal of Geriatrics*. 2019;34:67-71. DOI: <https://doi.org/10.1002/gps.4987>
- Mathie E, Arthur A, Killet A, Darlington N, Buckner S, Lafortune L, Mayrhofer A, Dickinson E, Woodward M, Goodman C. Dementia Friendly communities: The Involvement of People living with Dementia. *Dementia: the international journal of social research and practice*. 2022; 0(0):1-20. DOI: <https://doi.org/10.1177/14713012211073200>.