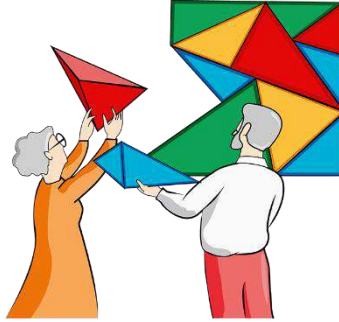




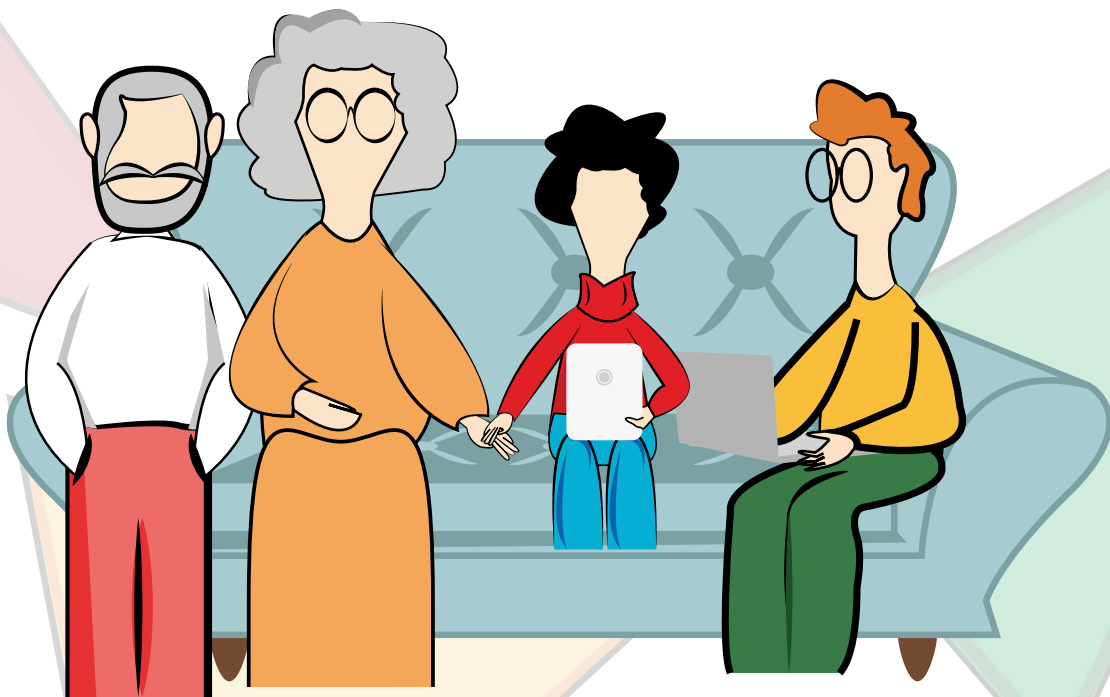
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D-care

RESPECT & RESPITE

Dementia Friendly Tools



Content

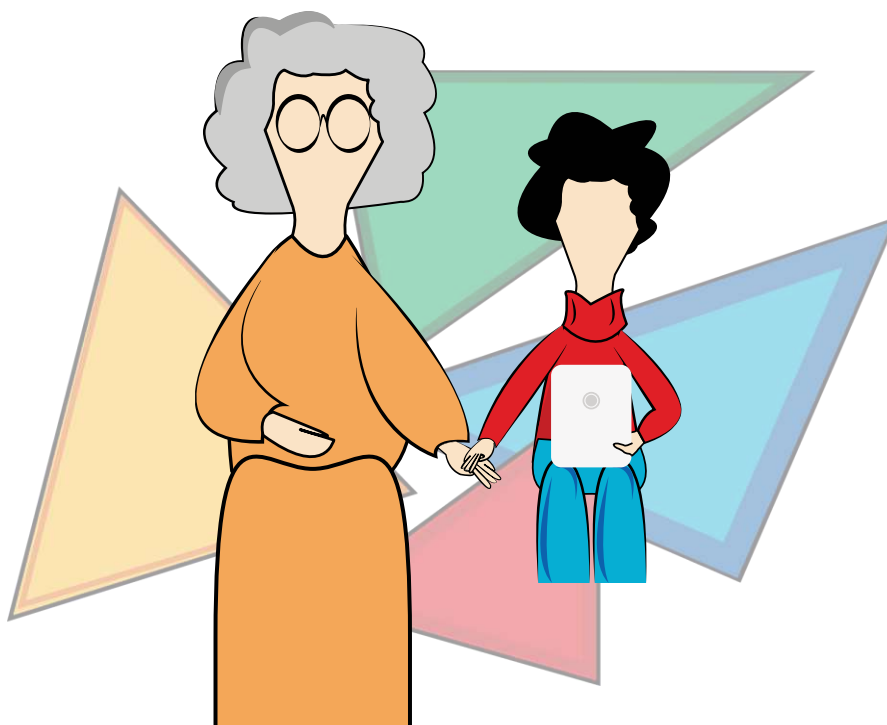
| | |
|--|----------|
| DEMENTIA FRIENDLY HOMES..... | 1 |
| INTRODUCTION | 1 |
| 1. GENERAL ASPECTS | 1 |
| 1.1. Order | 1 |
| 1.2. Colour and contrast | 1 |
| 1.3. Illumination | 1 |
| 1.4. Furniture..... | 1 |
| 1.5. Installations and accessories | 1 |
| 1.6. Atmosphere: acoustics and heating..... | 1 |
| 1.7. Floor | 1 |
| 1.8. Doors and windows | 1 |
| 1.9. Decoration..... | 1 |
| 2. SPECIFIC ROOMS OF THE HOUSE..... | 1 |
| 2.1. Entry point (Hallway)..... | 1 |
| 2.2. Kitchen..... | 1 |
| 2.3. Dining Room..... | 1 |
| 2.4. Living Room..... | 1 |
| 2.5. Bedroom..... | 1 |
| 2.6. Toilet..... | 1 |
| DEMENTIA FRIENDLY ACTIVITIES | 1 |
| INTRODUCTION | 1 |
| 1. GENERAL ASPECTS | 1 |
| 1.1. Daily Life | 1 |
| 1.2. Communicating Tips | 1 |
| 1.3. General tips for managing changes in behaviour: What can we do? | 1 |
| 1.4. Understanding symptoms | 1 |
| 2. SUPPORT AND SERVICES..... | 1 |
| 2.1. Help from the local/national authorities..... | 1 |
| 2.1.1. Dementia Support and Assessment in Italy..... | 1 |
| 2.1.2. Dementia Support and Assessment in Spain | 1 |
| 2.1.3. Dementia Support and Assessment in Greece | 1 |
| 2.1.4. Dementia Support and Assessment in Denmark..... | 1 |
| 2.1.5. Dementia Support and Assessment in UK | 1 |

DEMENTIA FRIENDLY HOMES

INTRODUCTION

In this document you will find a set of recommendations and tips for dementia-friendly homes based on person-centred design.

The information is created to improve the quality of life of people with cognitive impairment, with some help from the Etxegoxo guide.



1. GENERAL ASPECTS

1.1. Order

What can we do?

- ✓ Open spaces: promote visibility from all rooms.
- ✓ Free walking areas.
- ✓ Free working surfaces.
- ✓ Use open shelves.
- ✓ Use transparent elements or objects: cupboards, drawers, etc.
- ✓ Labelling cupboards and drawers with pictures or text.

What should be avoided?

- ✗ Eliminate potential dangers: cables, carpets, etc.
- ✗ Remove the clutter and avoid having unused items: old newspapers, letters, etc.

1.2. Colour and contrast

What can we do?

- ✓ Clear colour contrast between surfaces and surfaces and objects within the dwelling: furniture, switches, etc.
- ✓ Use colours to help perceive changes in planes: walls, floors, etc.
- ✓ Use matt and anti-reflective colours.
- ✓ Use colours to highlight risks: sharp edges, the edges of the steps.
- ✓ Use pastel colours, this tends to relax people.

What should be avoided?

- ✗ Avoid strong and bold prints.
- ✗ Do not use bright or garish colours, this tends to stress and upset people.

1.3. Illumination

What can we do?

- ✓ Have as much natural light as possible, this helps to mark the passage of time.
- ✓ Use light curtains.
- ✓ Use artificial lighting that is bright and uniform.
- ✓ Use timers, night lights or motion-sensitive lights.

What should be avoided?

- ✗ Avoid shaded areas that may confuse people.
- ✗ Do not use lighting that creates reflections, glare or undesirable effects.

1.4. Furniture

What can we do?

- ✓ Use furniture with transparent doors and panels.
- ✓ Remove confusing paintings and mirrors.
- ✓ Use light, ergonomic, stable and comfortable furniture.
- ✓ Use calendars with clear and legible text.
- ✓ Place the objects in the lines of sight.
- ✓ Use a decoration that stimulates the memory, people feel more at home when they have familiar objects around them. To this end, replace everyday items with older versions or vintage styles.

What should be avoided?

- ✗ Do not use furniture with strong lines or patterns.
- ✗ Avoid sharp or protruding edges.

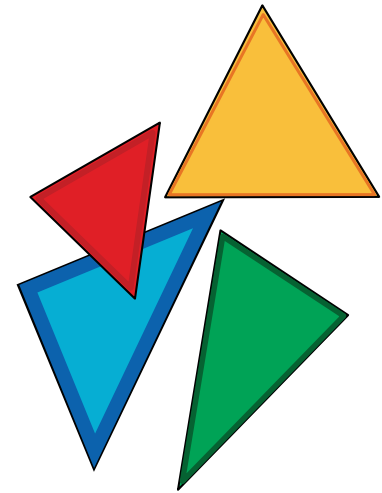
1.5. Installations and accessories

What can we do?

- ✓ The use of handrails and handholds is helpful in the whole house: stairs, toilet, shower, etc.
- ✓ Use colour-coded taps.

What should be avoided?

- ✗ Do not place sockets and switches in inaccessible places: very high areas, low contrast areas, hidden areas, etc.



1.6. Atmosphere: acoustics and heating

What can we do?

- ✓ Install thermostats to control the heating temperature and create a comfortable atmosphere.
- ✓ Include spaces with easy access to music or other positive sounds.

What should be avoided?

- ✗ Prevent unwanted sounds: use sound-absorbing materials and noise reduction strategies in floors, walls and ceilings.

1.7. Floor

What can we do?

- ✓ Use uniform colours.
- ✓ Use matt floors, without patterns or joints.

What should be avoided?

- ✗ Avoid shiny and slippery floors.
- ✗ Do not include carpets and rugs.
- ✗ Avoid having cables on the floor.

1.8. Doors and windows

What can we do?

- ✓ Provide views of outdoor spaces: install large and low windows.
- ✓ Install external glass doors if there is a garden or terrace.
- ✓ Doors should be: wide (90cm), light and easy to use, with contrast with the wall and recognisable (with colours or pictures).
- ✓ Include eye-level stickers on glass doors.

What should be avoided?

- ✗ Avoid doors with these characteristics: narrow, heavy, without contrast with the wall and with latch.



1.9. Decoration

What can we do?

- ✓ Personalise the spaces: pictures, drawings or sculptures that have a sense and meaning for the person living in the house.
- ✓ The decoration should reflect the activities that take place in that space.

What should be avoided?

- ✗ Avoid the excessive use of prints and the clutter.

2. SPECIFIC ROOMS OF THE HOUSE



2.1. Entry point (Hallway)

What can we do?

- ✓ The entry should be: intuitive, detectable, with a distinguishable and easy-to-use door-bell.
- ✓ Additional lighting at entrances and exits: install motion sensor lights on the door.
- ✓ Include seating areas near the entrance, this encourages interaction with neighbours.
- ✓ Place a small bench or table next to the door, so that you have a space to leave objects when you have your hands full.

2.2. Kitchen

What can we do?

- ✓ Use transparent doors to see the inside of the cupboards and contents.
- ✓ Incorporate sliding doors to avoid knocks.
- ✓ Place items in the line of sight.
- ✓ Use labels and/or transparent boxes and containers.
- ✓ Ensure appliances with automatic switch-off.
- ✓ Use control systems: fire or flood alarm, etc.
- ✓ Incorporate calendars or blackboards to help orientation.

What should be avoided?

- ✗ Avoid glass by using other transparent materials more impact-resistant.
- ✗ Avoid having easy access to dangerous or flammable materials, install latches.
- ✗ Do not incorporate electrical appliances inside cupboards: fridge, microwave, washing machine, etc.
- ✗ Do not use complex accessories, elements or kitchen utensils.
- ✗ Avoid a low illumination.

2.3. Dining Room

What can we do?

- ✓ Include a traditional table and chairs.
- ✓ Consider the use of contrasting colours: tablecloths, plates, cutlery, etc.
- ✓ The use of background music is recommended.

What should be avoided?

- ✗ Low illumination.
- ✗ Overloaded tables with distracting elements.

2.4. Living Room

What can we do?

- ✓ Create a peaceful space.
- ✓ Sofas should be: of a suitable height, not too soft, with high armrests and backrest for easy use.
- ✓ Place photos and personal items.
- ✓ Consider the use of contrasting colours: tablecloths, cushions, etc.
- ✓ The use of background music is recommended.

What should be avoided?

- ✗ Low illumination.
- ✗ Do not use numerous controls: tv, music player, etc.

2.5. Bedroom

What can we do?

- ✓ Provide a clear and well-lit path.
- ✓ Provide a direct line of sight from the bed to the bathroom/toilet.
- ✓ Use sensor lights to facilitate passage and prevent night falls.
- ✓ Include tags to identify items.
- ✓ Incorporate an appropriate wardrobe to promote decision-making and support the person's independence.
- ✓ Use beds that can be adjusted in order to facilitate getting in or out of bed.
- ✓ Use a monitoring device to warn of strange sounds or falls.

What should be avoided?

- ✗ Avoid obstacles and distractions.
- ✗ Avoid the clutter.
- ✗ Remove mirrors if the person does not recognise his or her reflection.

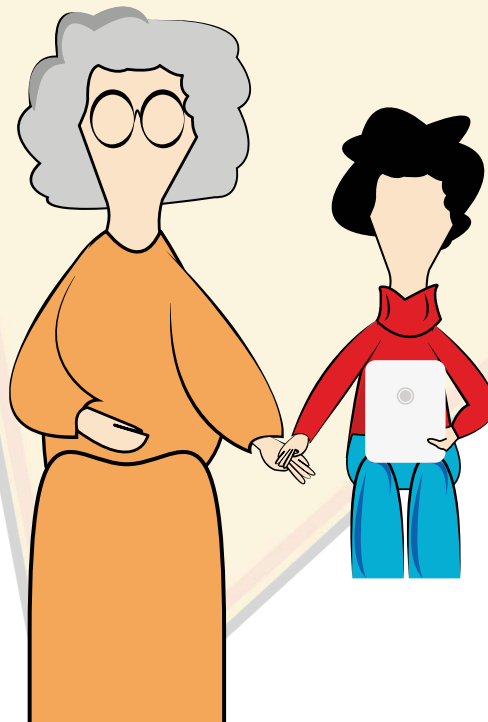
2.6. Toilet

What can we do?

- ✓ Opening of door should be: external or sliding.
- ✓ Create a large space: accessible for a wheelchair or a person to help with washing, bathing.
- ✓ Shower trays must be flush with the floor.
- ✓ Helpful elements: grab rails next to the toilet and also in the bathtub and/or shower, shower chairs, rubber elements to cover the fittings, etc.
- ✓ Install sensor lighting for night-time orientation.
- ✓ Use contrasting colours to differentiate elements: toilet lid, towels, door, etc.

What should be avoided?

- ✗ Avoid slippery floors.
- ✗ Avoid the use of latches.
- ✗ Do not install low toilets.
- ✗ Avoid mirrors if the person has lost the ability to differentiate between what they see in the mirror and reality.
- ✗ Avoid clutter.



DEMENTIA FRIENDLY ACTIVITIES

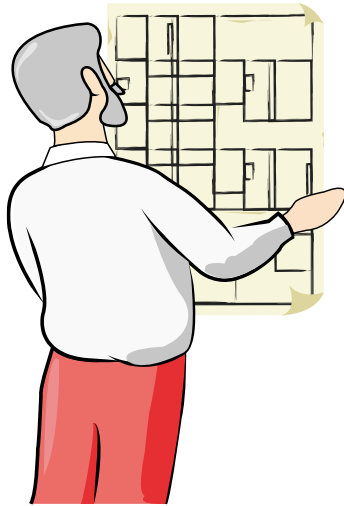
INTRODUCTION

Caring for a person with dementia poses many challenges for families and caregivers. People with dementia from conditions such as Alzheimer's and related diseases have a progressive biological brain disorder that makes it more and more difficult for them to remember things, think clearly, communicate with others, and take care of themselves.

In addition, dementia can cause mood swings and even change a person's personality and behavior. This document provides some practical strategies and activities to be carried out for dealing with the troubling behavior problems and communication difficulties often encountered when caring for a person with dementia.



1. GENERAL ASPECTS



1.1. Daily Life

Taking on the role of supporting a person with dementia is likely to have a big impact on your life. It can be positive and rewarding, but it can also present challenges and is likely to affect how you're feeling.

Tips for taking care of people with dementia

Support for you: What can we do?

- ✓ Talk to your counsellor or psychotherapist: It's a good idea to tell him/her that you're now caring for someone with dementia.

Support for them: What can we do?

- ✓ **Check to the following pages!**

1.2. Communicating Tips

What can we do?

- ✓ If the person finds verbal communication difficult, speak clearly and a little more slowly than usual (but not too slowly) and use simple words and sentences
- ✓ Try to maintain eye contact
- ✓ Stay calm and speak with a kind and patient tone as much as you can.
- ✓ Use positive body language (such as smiling, touching the person's hand and facial expressions)
- ✓ Even if you don't think the person can follow what you're saying, continue talking to them clearly as they may find this reassuring
- ✓ Consider responding to them in the way they respond to you ('mirroring' them, for example, with gestures or sounds).

What should be avoided?

- ✗ Try not to stand too close to or over someone when communicating – it may make them feel intimidated. Sit at the same level as them.
- ✗ Avoid asking too many direct open questions, such as 'What do you want to do today?' as these can be harder to process. Instead, try giving a short list of options, or just asking questions that need a 'yes' or 'no' answer

1.3. General tips for managing changes in behaviour: What can we do?

What can we do?

- ✓ Consider whether the behaviour is really a problem. If it is disrupting a particular activity such as washing or dressing, ask yourself if this task really needs to be done right now or if you could come back to it later.
- ✓ Try to remember that the person is not behaving this way on purpose. Try not to take it personally. Their sense of reality may be very different from yours and they are responding to their own needs.
- ✓ Think about what you know about the person and their life. For example, if you know someone used to work night shifts, it might explain why they want to stay awake or go out at night.
- ✓ Offer the person gentle reassurance. If you need to, try stepping away from the situation to give you both time to calm down. Try not to show feelings of frustration as it may make things worse.
- ✓ Support the person to do as much as they can for themselves. The behaviour may be their response to the feeling that they are not able to contribute or are not valued by others. If you think they are bored, support them to find things to do that are engaging and mean something to them.

What should be avoided?

- ✗ Avoid asking of changing their attitude. Sometimes it's best to leave the person to do what they want (so long as the environment is safe).



1.4. Understanding symptoms

Early stages: What can we do?

- ✓ Pay attention if they forget details of recent events
 - mislay items around the house
 - find adapting to change difficult
 - become less good at making decisions or plans
 - take longer to understand complex ideas
 - have difficulties with conversation, such as struggling to find words, repeating themselves or losing the thread of what they're saying
 - show personality or mood changes
 - lose motivation or interest in people or things (become apathetic)
 - become upset or easily annoyed at finding it harder to do things.
- ✓ Mark a calendar with the date (or try an electronic calendar which automatically changes the day and the date).
- ✓ Buy a daily newspaper (or get one delivered) – the date and the day of the week are always on the front page.



Middle stages: What can we do?

- ✓ Be careful if they are very forgetful of recent events (but still remember things from long ago, even if they confuse some details)
 - do things that may be unsafe (due to confusion or memory loss), such as leaving a gas cooker on
 - be confused about the time and place
 - become lost in places that aren't familiar
 - forget names of friends or family, or mistake one family member for another
 - walk around (this could be inside or outside during the day or night)
 - behave in ways that may seem odd – for example, putting items in strange places
 - say they've washed or eaten when they haven't or vice versa
 - become angry, upset or distressed very quickly.



Middle stages: What can we do?

- ✓ Enable the person you care for by placing labels on the doors of the toilet, bathroom and bedroom.
- ✓ Mark a calendar with the date (or try an electronic calendar which automatically changes the day and the date).
- ✓ Buy a daily newspaper (or get one delivered) – the date and the day of the week are always on the front page.
- ✓ Consider using visual reminders, such as a wall calendar, weekly planner or a noticeboard in an obvious place. They may want to record reminders in a mobile phone calendar, notebook or diary.
- ✓ Consider using more permanent reminders for tasks the person does regularly (such as a note by the door to remember their keys and wallet).
- ✓ Use visual clues that explain where items go, such as pictures or photos with words on cupboard doors.
- ✓ Keep important things like money, keys and glasses in the same place.
- ✓ Put helpful telephone numbers by the phone where the person can see them.
- ✓ Encourage visitors (friends, family and professionals) to write the time and purpose of their visit in a book.

Later stages: What can we do?

- ✓ Pay attention if they are likely to be frailer, find it harder to walk and be more at risk of falls.
- ✓ Observe if they are more agitated, become disturbed at night-time, and find it much harder to communicate or understand what's being said to them.
- ✓ Consider using visual reminders, such as a wall calendar, weekly planner or a noticeboard in an obvious place. They may want to record reminders in a mobile phone calendar, notebook or diary.
- ✓ Consider using more permanent reminders for tasks the person does regularly (such as a note by the door to remember their keys and wallet).
- ✓ Use visual clues that explain where items go, such as pictures or photos with words on cupboard doors.
- ✓ Keep important things like money, keys and glasses in the same place.
- ✓ Put helpful telephone numbers by the phone where the person can see them.

What should be avoided?

- ✘ Avoid being concentrating on what we can do rather than what we can't. He can get very frustrated with struggling to find the right words and his ability to read and write are reduced but we still have lots of lovely days and enjoy each other's company.
- ✘ If they've forgotten something that was recently said to them, avoid telling the person they have already heard it. It won't help and may make the person feel frustrated or distressed.

2. SUPPORT AND SERVICES

You may find that you're able to manage without much support from others for some time. However, we all need extra help at times, and asking for this when you need it may enable you to go on caring for longer.

Different sources of support are available from professionals and other services, including care and housing options. Dementia advice and support services are available from many local authorities.

This includes doctors and consultants, different types of nurses and other specialists. It may sometimes seem like you're interacting with lots of professionals and have to repeat what you say.

What can we do?

- ✓ Let this information close to you so as make easier for you to know early on what support you would like and need with caring. This gives you and others time to prepare.
- ✓ Remember that the role of such professionals is to provide important support for you both, to enable the person to live well with dementia and help you to care for them.

Different health professionals can help with a range of other health problems. Below you may find some professionals listed may be able to help you:

| Issues | Who can help? |
|--|---|
| Communication, eating, speech and language drinking and swallowing | Speech and language therapist |
| Maintaining skills and independence | Occupational therapist or adult social services telecare team |
| Exercising and moving around | Physiotherapist |
| Foot care | Podiatrist/chiroprapist |
| Eyesight and vision | Optometrist |
| Hearing | Audiologist |
| Behaviours that challenge (such as aggression), anxiety and restlessness | Clinical psychologist or a specialist such as a music therapist |
| Relationship and emotional issues | Counsellor or clinical psychologist |
| Nutrition | Dietitian |
| Toilet and continence problems | Continence adviser |

2.1. Help from the local/national authorities

Local authorities have a legal duty to assess the needs of people with dementia and their carers if they are asked to do so.

To get an assessment, contact your local social services. You can find the contact details on your local authority website.

2.1.1. Dementia Support and Assessment in Italy

In Italy, different types of health and social-health services are available for people with cognitive disorders and dementias.

The health and social health services for dementias surveyed by the Istituto Superiore di Sanità (ISS- Higher Institute of Health) and the Ministry of Health are:

Centers for Cognitive Disorders and Dementias (CDCD), Services responsible for the evaluation, diagnosis and treatment of cognitive disorders and dementias.

Day Centers / Integrated Day Centers: Semi-residential, public and / or affiliated or contracted socio-sanitary structures, which welcome people with dementia.

Residential Facilities: Residential, public and / or affiliated or contracted health and social health facilities, which welcome people with dementia.

Consult <https://demenze.iss.it/mappaservizi/> the online map of dementia services on the ISS Dementia Observatory website: <https://demenze.iss.it/>

Finally, at national and regional level, AUSER has promoted and developed several initiatives and the related contacts can be found as follows: <https://www.auser.it/tag/alzheimer/>

2.1.2. Dementia Support and Assessment in Spain

Confederación Española de Familiares de Enfermos de Alzheimer y otras Demencias (CEAFA)

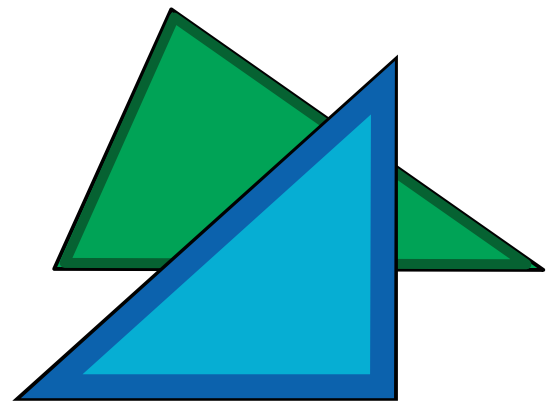
The Spanish Alzheimer's Confederation (CEAFA) is a national non-governmental organization whose goal is to work to put Alzheimer's on the political agenda, seeking the necessary social commitment and valuing knowledge in order to represent and defend the interests, needs and rights of all people living with Alzheimer's.

<https://www.ceafa.es/es>

Fundación Alzheimer España

The Fundación Alzheimer España aims to improve the quality of life of the patient, the caregiver and the family. This includes very diverse activities ranging from information (telephone help lines, interviews with caregivers and families, brochures, guides, conferences, symposiums...) to the representation of families at the level of socio-health authorities.

<http://www.alzfae.org/>



Fundación Pasqual Maragall

The Pasqual Maragall Foundation for Alzheimer's Research was created in response to the commitment made publicly by Pasqual Maragall on October 20, 2007, when he announced that he had been diagnosed with Alzheimer's disease.

<https://fpmaragall.org/>

Fundación C.I.E.N

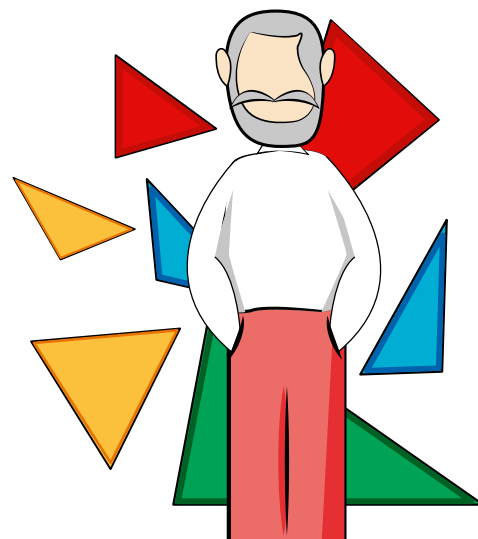
The C.I.E.N. Foundation was born with the aim of fostering the creation of a network center that supports, promotes and coordinates research in all fields of basic, clinical and epidemiological neurology, with special emphasis on problems related to diseases of the nervous system, through research centers distributed throughout the Spanish geography and articulated as monographic research centers, with scientists who work in various lines within neuroscience and have a common physical infrastructure and equipment.

<https://www.fundacioncien.es/>

Asociación de Demencia Frontotemporal

The Frontotemporal Dementia Association (ADEF) helps patients with this disease and their families. ADEF focuses its activity on carrying out important actions: Raise awareness of this disease, which is often so unknown. Help and train family members of patients.

<http://adef.es/site>



AFAGI. Asociación de Familiares, Amigos y Personas con Alzheimer u otras demencias de Gipuzkoa

AFAGI is a private organization whose mission is to improve the quality of life of people with Alzheimer's and other dementias and that of their families.

AFAGI was born in 1991, with the aim of becoming a spokesperson and defender of families, residents of the province of Gipuzkoa, affected by this disease. Today it has more than 12,000 members.

Among other functions, AFAGI carries out projects to contribute to the necessary improvement of the quality of life of all those affected by this dementia.

www.afagi.eus

2.1.3. Dementia Support and Assessment in Greece

National Observatory for Dementia and Alzheimer's disease

National Observatory for Dementia and Alzheimer's disease according to the founding law is an institution of the Ministry of Health and aims to permanently support the country's policy to deal with the disease and protect the rights of patients and their families. In addition, it takes care of the implementation of the National Action Plan by authorized health services throughout the country.

In the present period of time some of the services in Greece that provide care health for dementia are the following:

Day Care Centers

The most comprehensive services for people with dementia and carers are provided by the Day Care Centers of the program "Psychargo" under the responsibility of the non-Profit Alzheimer's Associations of Greece. These centres were implemented within the operational framework of the "Health – Welfare 2000-2006" program, co-financed by the European Union and the Ministry of Health and Social Solidarity.

Some of the organizations that operate Day Care Centers for people with dementia are:

- The Psychogeriatric Association "Nestor" – Athens (<https://www.nstr.gr/en/the-organization-nestor/>)
- Corporation for Succor and Care of Elderly and Disabled-FRODIZO (Patra) - <https://frodizo.gr/en/home/>
- Athens Alzheimer Association (<https://alzheimerathens.gr/en/>)
- "Aktios" Elderly Care Unit (<https://www.aktios.gr/elderlycare/>)
- Greek Association of Alzheimer's Disease and Related Disorders (GAARD), Thessalonki (<https://www.alzheimer-hellas.gr/index.php/en/>)

Center for the Open Care for the Elderly

Services such as The Open Protection Centers for the Elderly provide:

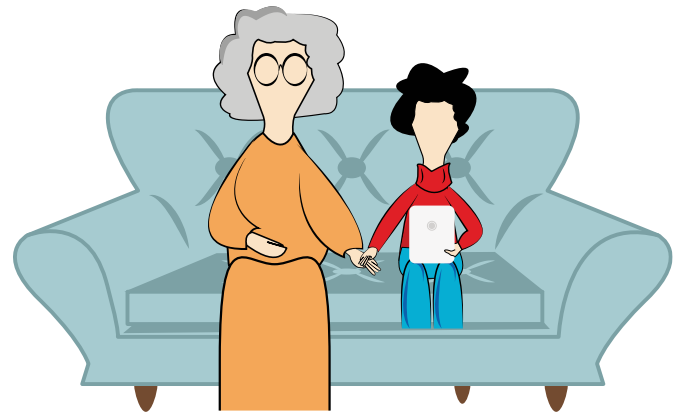
- Care and instructions for medical care
- Physiotherapy - Occupational Therapy
- Self-action groups of members that strengthen their activation
- Training, lectures, cultural events

"Home help services"

The "Help at Home" program is aimed at senior citizens that cannot fully take care of themselves. The program provides counselling and psychological support, nursing care, family assistance and company. The operation of the program is ensured by a specialized and well-organized team of health professionals. It is provided by many municipalities of the country. Information can be found indicatively on the sites of the municipalities of the country.

Long-term care facilities for the elderly in Greece

In Greece, long-term care services (which also concern the permanent living of the elderly) are provided by public organizations, non-profit organizations (Church, Charities, etc.) and by profit-making organizations (Elderly Care Units). However, Greek society is family-centered, so the care of people with disabilities and the elderly is largely offered in homes by members of their family. The Elderly Care Units in Greece cover a small percentage of existing housing needs and do not have specialized care for people with dementia.



2.1.4. Dementia Support and Assessment in Denmark

If dementia is suspected the recommended action in Denmark is to go to your GP and he/she will make an assessment, and send you to a hospital to a memory clinic where they will organize that you get all the assessment for a diagnosis of dementia.

After that the diagnosis has been made, different types of health and social-health services are available.

Homecare or daycare centres could be a possibility to help the person with dementia and the relatives. This service can be delivered from the public sector (It could be the municipalities Care centres) or from private organizations. Care Centres has specialists in dementia employed and it is free to seek their advice. The municipality's dementia coordinator, can provide ongoing assistance in terms of advice and guidance to the person with dementia and relatives, information about activity offers and application for home help for practical tasks and personal care as the need arises.

When the dementia progresses and it gets harder to take care of the person there are different arrangements for respite. The person can be admitted for a short period to a carehome facility until the relative who takes care of the person feels better or it is agreed that both persons are better off with when the person with dementia moves to a nursinghome.

There are a number of different organizations informing the public, relatives and persons with dementia:

Danish Dementia Research Centre <https://videnscenterfordemens.dk/en>

At Danish Dementia Research Centre they carry out research, provide knowledge about dementia and offer a variety of education activities, where they address professionals with various educational backgrounds, across all sectors in Denmark. It is a public institution.

Health Denmark <https://www.sundhed.dk/>

Sundhed.dk is the shared digital universe of citizens and health professionals about health and disease. The Vision of Sundhed.dk is a user-oriented health universe that creates value and coherence for both citizens and health professionals, and that helps citizens to master their own health. The government, the regions and the municipalities are behind sundhed.dk.

Sundhed.dk's steering group is tasked with ensuring clear priorities for action and decisions in sundhed.dk within the framework of the Board's strategy. The Steering Group is responsible for ensuring that the partners' contributions to health.dk are used strategically, and that these priorities are anchored in the organizational backgrounds of the Steering Group members and in joint government cooperation on health.dk in general.

The following are some of NGOs:

Danish Alzheimer society <https://www.alzheimer.dk/>

The Alzheimer's Association is a membership organization dedicated to improving the lives of people with dementia and their families. They advise, inform and support research into dementia.

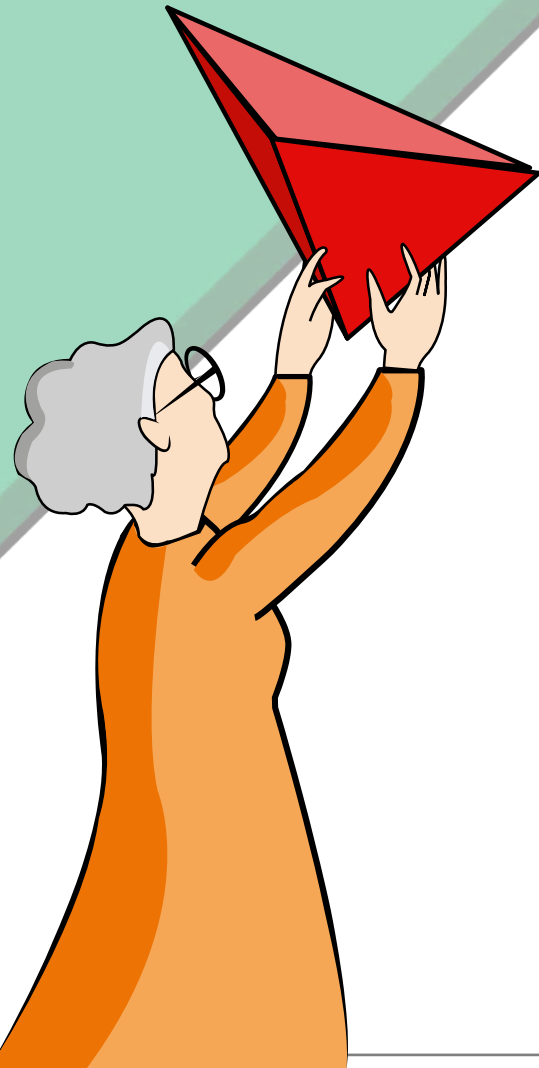
They are an association for everyone with an interest in dementia and our membership includes people with dementia, their relatives and professionals in the field of dementia. Members share a common belief that everyone affected by dementia should have the opportunity to live a full and meaningful life.

Dan Age <https://www.aeldresagen.dk/>

Dan Age creates space for good lives - regardless of age. The work of the national association is based on its members and their commitment in the association's local branches and committees.

Dan Age organize 925,000 members. The association is organized into 215 local branches, which are run by volunteer local committees. In 57 municipalities there are two or more local branches. There is a coordinating committee that acts as a common voice to the municipality.

Dan Ages bodies are made up entirely of volunteers who contribute their time and commitment. This means that the work of the national board, coordination committees and local boards is voluntary and unpaid.

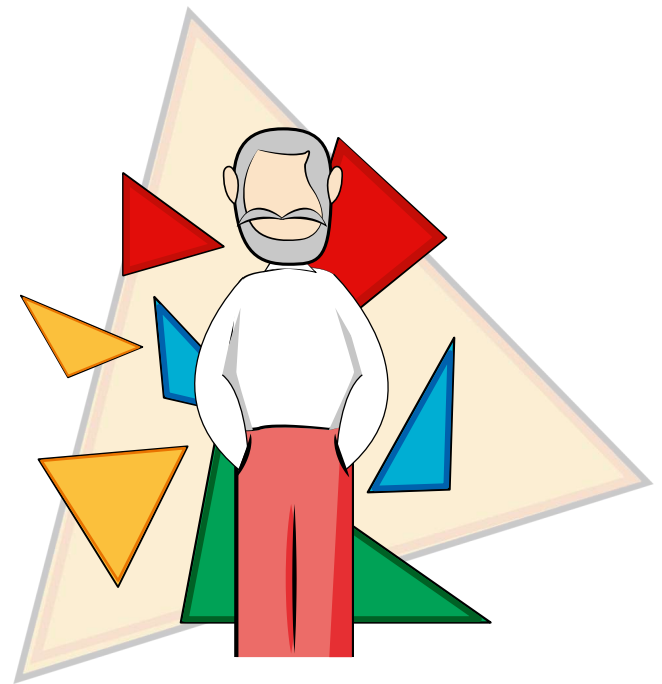


Relatives in Denmark www.danskeparørende.dk

Relatives in Denmark was founded in May 2014 as an interest group for relatives across diagnoses. We see political advocacy as our most important task - including working to ensure that relatives are offered the necessary support by the healthcare system and municipalities. This means that we concentrate on advocacy and spreading understanding of the conditions and needs of carers. In the long term, we are working to develop more member services.

Relatives in Denmark attaches great importance to cooperation with other organizations.

Internationally, Relatives in Denmark is a member of Eurocarers, the umbrella organisation for carers' associations and stakeholders in the EU, and of the International Alliance of Carer Organisations, a global association of carers' associations.



2.1.5. Dementia Support and Assessment in UK

There are many support organisations throughout the UK. It is worth noting that the four different nations (England, Scotland, Wales and Northern Ireland) differ in their health and social care support. Dementia Care will often be treated as social care, even funding is different – often referred to as a ‘postcode lottery’ as it can be very different from one area to another.

Listed here are organisations which are UK wide; a quick search on google will list many organisations which can be specific and local.

Alzheimer’s Society

<https://www.alzheimers.org.uk/find-support-near-you>

This website will assist anyone to find support in their local area, including local groups

We offer peer-or professionally led groups for caregivers, individuals living with Alzheimer's and others dealing with the disease. All support groups are facilitated by trained individuals. Many locations offer specialized groups for children, individuals with younger-onset and early-stage Alzheimer's, adult caregivers and others with specific needs.

Age UK

<https://www.ageuk.org.uk/services/in-your-area/dementia-support/>

Age UK will also assist people to find support, groups, carers and other in the local area

Over 850,000 people in the UK are living with dementia - that's one in six people over 80. We offer community-based support services for people living with dementia and their carers to improve their quality of life.

Dementia UK

<https://www.dementiauk.org/>

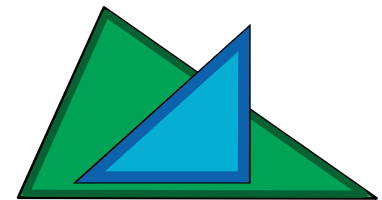
Dementia UK is a charity that provides Admiral Nurses for families affected by dementia. Call our Dementia Helpline to find out how we can support you. Looking for information or advice about dementia or Alzheimer's? Call our Dementia Helpline for free on 0800 888 6678 for support from our dementia specialist Admiral Nurses. The Helpline is open from 9am to 9pm Monday to Friday and 9am to 5pm on Saturday to Sunday.

Dementia Support Groups

<https://www.dementia.co.uk/groups>

Find dementia support groups & organisations in the UK. We provide contact details of national & local dementia services. Find telephone numbers, websites and contact details of groups organisations that specialize in dementia care and support.

These support groups can help you with information and help you find support groups and organisations in your local area that you live.



National Health Service – Dementia Choices

<https://www.nhs.uk/conditions/dementia/>

This site offers information for people with dementia and their families and friends. It aims to raise awareness of dementia, as well as help people create networks and better understand the impact of the condition. There are also links to lots of information on dementia and sources of local and national support.