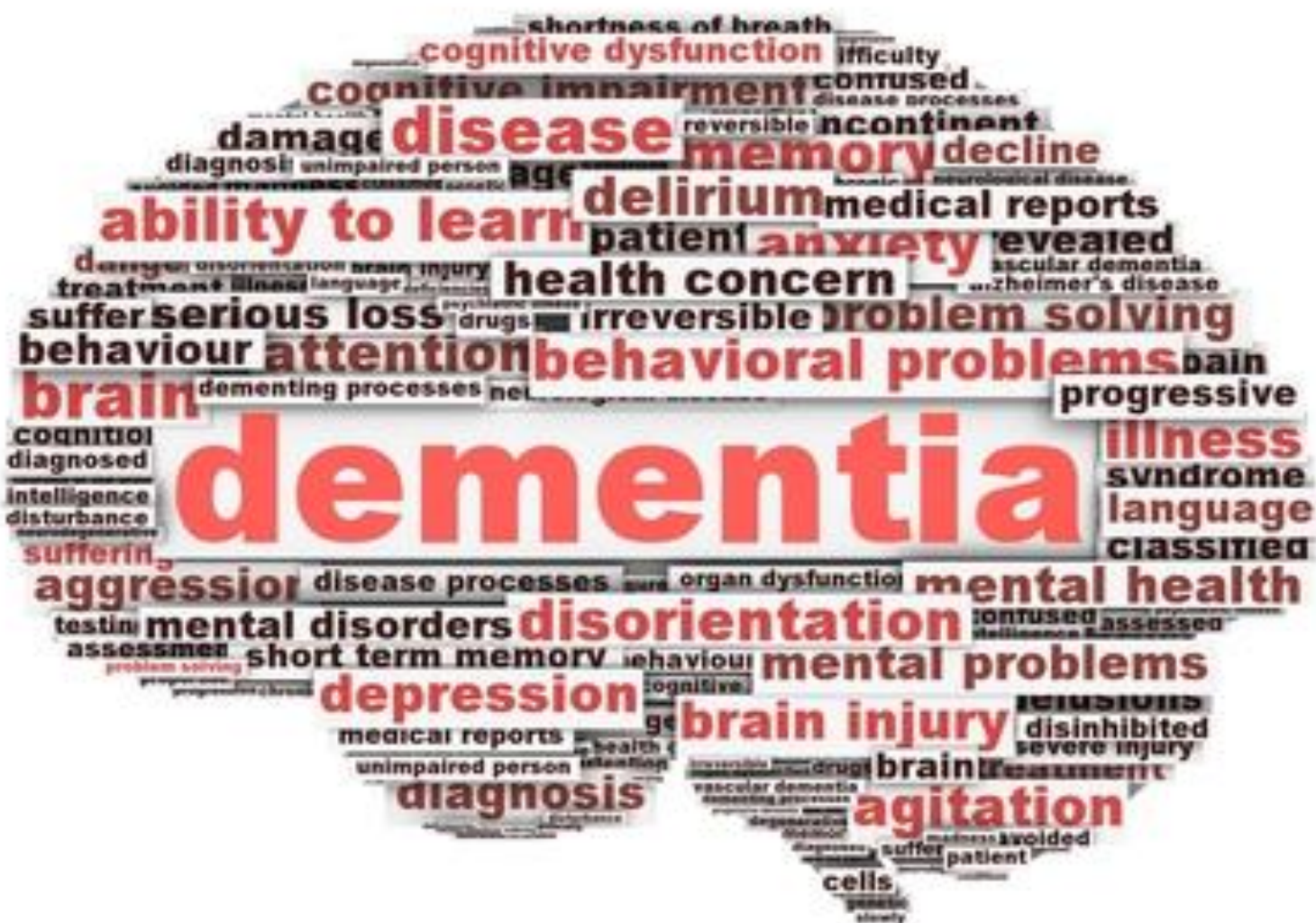


# **Assistive Technology (AT) and People with Dementia**

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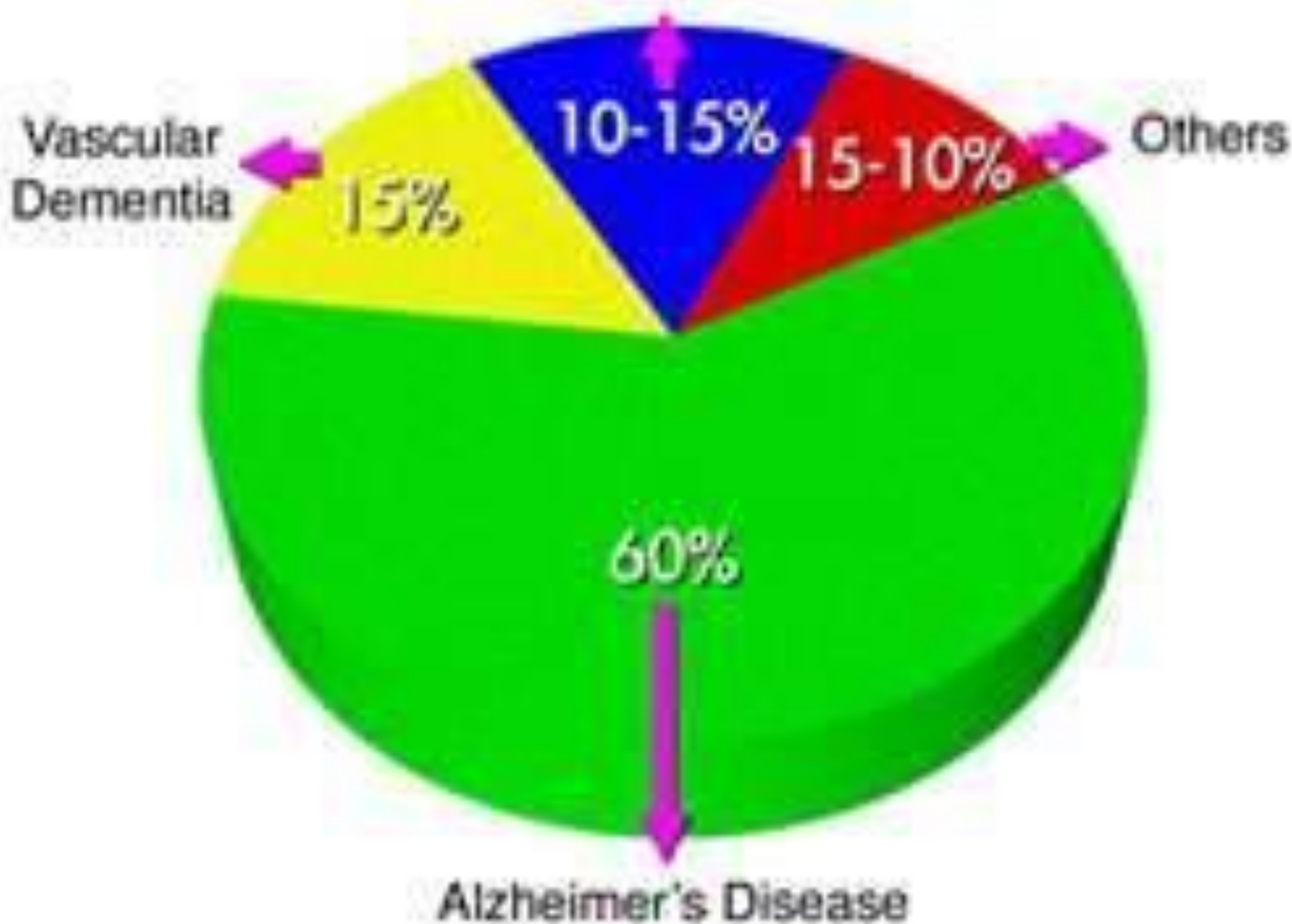


# Projected percentages of total dementia cases in the Maltese Islands for the years from 2010 to 2050

| Year | % of total population |
|------|-----------------------|
| 2010 | 1.12                  |
| 2015 | 1.25                  |
| 2020 | 1.44                  |
| 2025 | 1.66                  |
| 2035 | 1.91                  |
| 2050 | 2.00                  |

*Source: Abela et al. 2007*

# Alzheimer's Disease + Vascular Dementia



# Symptoms:

- Memory Problems
- Well-being related problems
- Communication



# Risks

- Falls
- Hypothermia
- Inappropriate use of household appliances
- Flood & Fire
- Ingestion of toxins
- Failure to take medication or over-medication due to short term memory problems



# What is Assistive Technology (AT)?



## Definition:

*'any item, piece of equipment, product or system, whether acquired commercially, off the shelf, modified or customized, that is used to increase maintain, or improve functional capabilities of individuals with cognitive, physical or communication disabilities'.*

*(Marshall, 2000:9).*



- An **active assistive** device: one which requires the direct action of the user to make it work eg. remote control, pendant button of a social alarm
- A **passive assistive** device: one which operates without the intervention of the user.

# Passive Devices

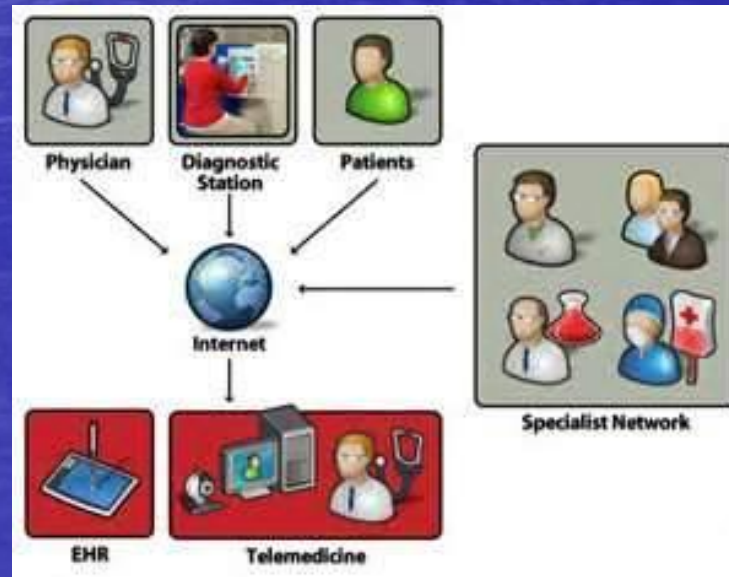
- Reminders /Prompts
- Safety Devices



- **Reminiscence/Entertainment**



- **Tele-care and telemedicine**



# Benefits of AT:

- Promote independence and autonomy both for the person with dementia and those around them;
- Help manage potential risks in and around the home;
- Reduce early entry into care homes and hospitals;
- Facilitate memory and recall;
- Reduce the stress on carers, improving their quality of life and that of the person with dementia.

*(Source: Alzheimer's Society UK Factsheet)*

# To be a Success, Assistive Technology must:

- Be in a Social Context;
- Tailor made according to one's needs;
- Control & Autonomy are retained by the user;
- Be part of a package AND NOT on its own.



# Technology Should:

- Provide the user with an experience of success;
- Have the look of a high quality product that has been designed for adults;
- Give a feeling of independence to the person;
- Should not require demanding intellectual performance from the user.

*(Bjorneby et al. (1999))*



# Considerations:

- The Risk of Social Exclusion;
- The potential threat to independence;
- Complicate people's live and environment;
- Foster a one-sided focus on a person's problems;
- The issue of consent;
- Data protection issues;
- Stigma.



*Technology cannot identify meaning and purpose behind...behaviours (Baldwin, 2006, p.57) or replace contact with staff, who provide intelligent observations, comfort, attachment (Kitwood, 1997) and re-orientation.*


# The 3 P's

- Perspectives
- Principles
- Paradigms

*(Developed by Hope and Oppenheimer (1997) and then further applied to ethical issues in general by Marshall (1999)).*

# The Way Forward

- Appropriately used technology, lead to efficient and targeted quality care.
- Our considerations about technology and dementia should be about enablement and sustaining relationships through a person-centred care.



Thank you