



Dementia: “the greatest global challenge for health and social care in the 21st century”

The Lancet “Commission on Dementia”; led by Professor Gill Livingston with contributions Claudia Cooper, Sergi Costafreda, Jonathan Huntley, Rob Howard, Naaheed Mukadam, Vasilkiki Orgeta, Liz Sampson and Andrew Sommerlad, (2017).



Briefing to the Incoming Minister 2017

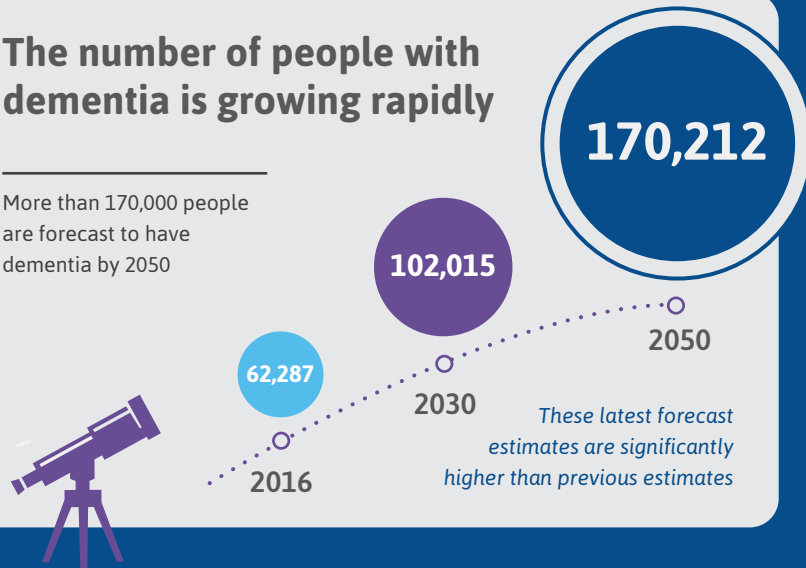
Dementia: a significant and growing health challenge

March 2017

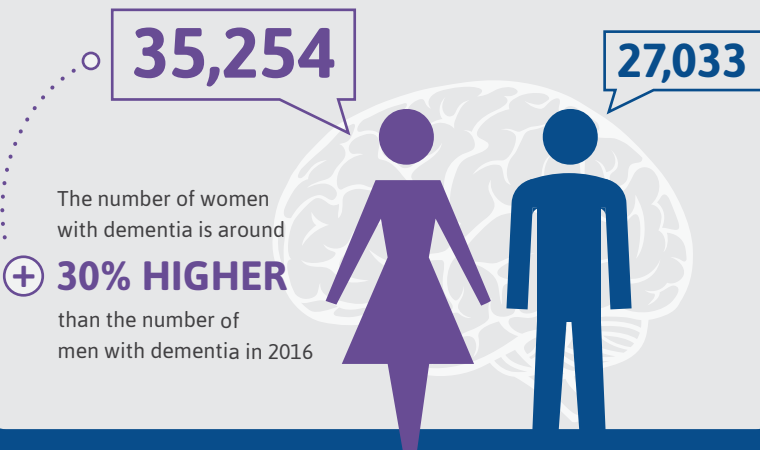


The number of people with dementia is growing rapidly

More than 170,000 people are forecast to have dementia by 2050



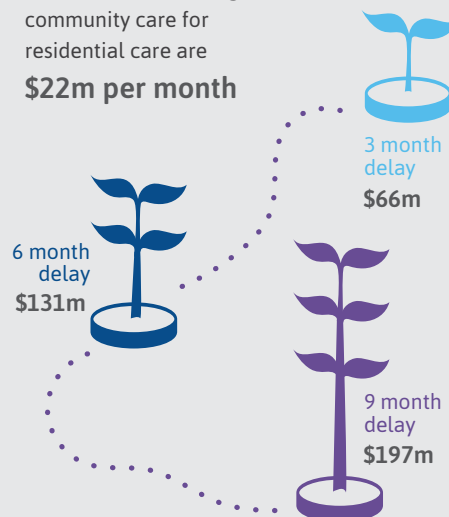
Dementia impacts more women than men



Potential benefits of change



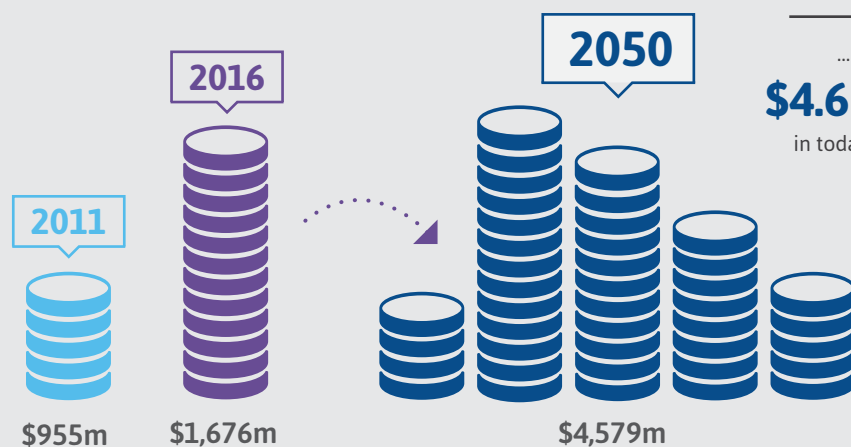
The potential net benefits of substituting community care for residential care are **\$22m per month**



Economic costs have increased

75%

since 2011



... and could be over **\$4.6 BILLION** in today's dollars by 2050

Executive Summary

- 1 New Zealand cannot afford to do nothing about the dementia challenge facing the country. Recommendations for responding effectively to this challenge are provided in this document, and are highlighted in this executive summary. The paper also makes recommendations for Budget 2018.
- 2 Like many other countries, New Zealand is experiencing extraordinary growth in the number of people living with dementia. It is estimated that over 170,000 New Zealanders will have dementia by 2050, costing the country nearly \$5 billion a year. And all these people have family and friends also significantly affected – four out of five New Zealanders are affected by dementia in some way.
- 3 The numbers, costs and nature of dementia make it one of New Zealand's biggest healthcare issues. Steps must be taken now to address this challenge as a matter of priority.
- 4 Making changes that keep people as well as possible and at home for longer will achieve estimated cost benefit ratios of \$6.60 for every \$1 invested and reduce the projected costs of \$5 billion per year.

Overall recommendation

- 5 Implement the *New Zealand Framework for Dementia Care (2013)*. This Government document outlines what must be done to address the looming dementia challenge. Alzheimers NZ recommends the *Framework* is fully implemented “to give people who are living with dementia the best possible independence and wellbeing” as stated in the *Healthy Ageing Strategy*.

Critical first steps

- 6 The critical first step is to provide funding in Budget 2018 for four related initiatives that will immediately enhance the quality of life for people living with dementia. These steps will also reduce long-term care costs:
 - a. Extend the existing preventative approaches to obesity, diabetes, and cardio-vascular disease to middle aged and older adults, by including information that will reduce the risk or delay the onset of dementia
 - b. Create the navigator services outlined in the *Framework for Dementia* at an estimated cost of \$9.6 million per year
 - c. Provide 12 months of post-diagnostic support for people diagnosed with dementia, and their family / whānau care partner at an estimated cost of \$4.8 million per year
 - d. Produce high quality **hard copy** information to support people diagnosed with dementia, and their family / whānau, at an estimated cost \$130,000.

Next recommendation

- 7 Actively support people to live well and independently with dementia for as long as is possible by:
 - a. Promoting and creating a dementia-friendly New Zealand, including through a national public awareness programme
 - d. Ensuring care partners can take planned breaks and support their own health by having access to a range of respite care options
 - c. Following the World Health Organization (WHO) recommendation to “collect and use the necessary data on epidemiology, care and resources relating to dementia [in New Zealand] in order to implement relevant policies and plans”.

The content of this document has been carefully and thoroughly reference-checked. The references are available on request.

The layout and formatting of this document is dementia-friendly. All photos have been posed by models.

Working in partnership

- 8 Alzheimers NZ urges Government to work alongside non-governmental organisations (NGOs). The NGO sector brings money, volunteers, solutions, community knowledge, and access to communities to help implement the solutions above.
- 9 Alzheimers NZ is the lead organisation at a national level representing people living with dementia. Our role and that of local Alzheimers organisations (our Members) is:
 - a. To actively support New Zealanders living with dementia on a day-to-day basis by providing in-community information, support and advice
 - b. To source high quality information and resources about dementia and its impact that assists policymakers to make informed decisions about how best to deal with what is the biggest threat to our healthcare system
 - c. To help build a dementia-friendly New Zealand.
- 10 Successfully responding to the dementia challenge is possible. Investing now will reduce the long-term fiscal burden and greatly improve the quality of life for the large numbers of Kiwis who will be impacted by dementia over the next 30 years.

Introduction

With no disease-modifying treatments for dementia currently available, health-care systems are in danger of becoming overwhelmed by the future costs of caring for people with dementia. *The Lancet Commission on Dementia Prevention, Intervention and Care, (2017)*

Rapidly increasing numbers of New Zealanders with dementia present major social, economic, health, and human rights implications for the years ahead. The diagnosis dramatically changes lives. It has a significant impact on both people with dementia and their families / whānau and other informal care partners. It also has a major impact on New Zealand's healthcare system. This paper illustrates some of the issues, provides advice on first steps to address those issues, and makes recommendations for Budget 2018.

Urgent action is required by Government to avert this looming health crisis. Solutions to these problems do exist and can make

a major difference if implemented now. Solutions recommended in this paper have the potential to both improve the quality of life for people living with dementia and reduce the projected future \$5 billion per year economic cost.

Alzheimers NZ is well placed to assist with this work. We represent people affected by Alzheimers disease and other dementias at a national level and our members support people living with the diagnosis in their local communities. We stand ready to collaborate with Government and other bodies to both help reduce dementia prevalence, and to support people living with dementia to live well.



“People think of this being about their parents, but it could be first about their partners. A lot of people are muddling through. But as more and more people are affected, and people are affected younger and younger, the more it is affecting our lives”

Robyn, Alzheimers NZ Consumer Advisory Group*

* All names in this document have been changed by request. This document includes stories and quotes from members of the Alzheimers NZ Consumer Advisory Group which represent the views and experiences of people with dementia and their care partners.

Dementia: A Major Issue for Government

What is already a public health crisis with huge impacts across societies due to the unique character of the condition, is also becoming a financial nightmare. *Dementia Innovation Readiness Index*, (2017)

Dementia presents a major challenge for Government

1 **More than 62,000 people have dementia in New Zealand.** Numbers are projected to increase to over 170,000 by 2050 in the absence of any clinical breakthrough in treatment and/or significant reduction in incidence. These numbers are just those with the diagnosis; for every one of these people there are family and friends also significantly affected. Four out of five New Zealanders know, or have known, someone with dementia, according to recent Alzheimers NZ UMR research.

2 Internationally, around 47 million people currently have dementia and the World Health Organization (WHO) estimates 75 million in 2030 and 132 million by 2050. Associated costs could reach US\$2 trillion by 2030. Alzheimer's disease and other dementias have been reported as the leading cause of death in England and Wales, and the second leading major cause in Australia.

3 Costs of dementia in New Zealand are currently over \$1.7 billion per annum and are projected to increase to \$4.6 billion in today's dollars by 2050 if nothing changes. Costs are estimated to have increased by over 75% since 2011 from \$955 million between 2011 to \$1,676 million in 2016. Increasing dementia costs will significantly increase

pressure on other parts of the health system. Reducing the projected cost increase is therefore an urgent priority.

4 The health system is already overwhelmed and struggles to provide adequate support and services to people living with dementia now. The rapidly increasing numbers projected over the next few decades could completely overload the system. Currently, it is estimated that only 50% of people with dementia have a diagnosis. Many of those with the diagnosis report inadequate, inflexible, and inconsistent services across the country.

5 Care partners have significant unmet needs placing further demands on the health sector. Dementia can cause changes in relationships, stress, loneliness, lost careers, and reduced income, putting a strain on both physical and mental health. People caring for those with dementia often ignore their own health needs in favour of the person for whom they care. Around 40% of family/whānau dementia care partners have clinically significant depression or anxiety, putting further pressures on over-stretched mental health services.

6 Insufficient access to healthcare results in human rights violations. When people with dementia cannot access the “highest attainable standard of physical and mental health” their human rights are breached. Human rights are also breached when people cannot access “... health services needed by persons with disabilities specifically because of their disabilities, including early identification and intervention as appropriate, and services designed to minimise and prevent further disabilities, including among ... older persons.” Sustainable Development Goal number three is relevant here: New Zealand is expected to *[e]nsure healthy lives and promote wellbeing for all **at all ages***” [emphasis Alzheimers NZ].

7 Other human rights violations are associated with stigma and discrimination which often follow the diagnosis. This reduces people’s ability to live full and meaningful lives and to contribute to society. Dementia is most closely correlated with age; however, it does affect younger people who are more likely to still be in the labour force. Individuals report being told to “pack up their lives” and that they are “no longer any good” for their jobs. They also describe being “treated like a third person”, or “left

out of conversations while people talk to my care partner”. Confidence loss, job loss, and social status loss follow. The nation loses out as people withdraw and dramatically reduce their contribution to wider society. Such discrimination violates New Zealand’s obligations under the United Nations Convention on the Rights of Persons with Disabilities.

8 Dementia exacerbates existing gender health inequities. Women are more likely to get dementia, more likely to care for someone with dementia, and more likely to be engaged in low paid work caring for someone with dementia. Implications for women’s health, social relationships and financial security also present human rights issues, and challenges New Zealand’s ability to achieve Sustainable Development Goal number five: *“Achieve gender equality and empower all women and girls”*.

9 Another inequity may relate to Māori and Pasifika populations. While estimates indicate a lower overall level of dementia amongst Māori and Pasifika, there is “evidence that incidence may be higher in these groups, due to a higher prevalence of cardiovascular risk factors ...”.

“People don’t change overnight; some do, [but] for most it is a slower process.”

Alzheimers NZ Consumer Advisory Group member

Dementia: Unaffordable Costs Require Major Change

We cannot afford to do nothing. There is currently no cure for dementia. Economic costs to society are estimated at \$27,000 per person per year with the diagnosis, including direct health system costs, aged and respite care costs, lower employment levels, lost taxation, days lost in sickness, community and housing modification costs, costs associated with around 40,000 care partners such as wages and taxes forgone, welfare payments, travel costs, and administration costs. Productivity losses alone for individuals with dementia are estimated at around \$240 million per year.

Increased health costs due to caring-related illness or disability are not included in the economic cost estimate. Costs incurred or income forgone due to stigma and discrimination are also not included. Even without these costs, Deloitte describes dementia as “one of the most significant public health burdens in New Zealand.”

The social, economic and human rights impacts require immediate action. Intensifying pressures on services, burnt out

care partners, and large numbers of people requiring expensive secondary and tertiary care put overwhelming demands on the health system. If nothing is done differently, care of older people will account for 50% of District Health Board expenditure by 2025/26, up from 42% in 2015/16. Clearly the sooner we act, the more we reduce both future costs and future stresses on health services.

Making changes which keep people as well as possible and at home for longer will achieve cost benefit ratios of \$6.60 for every \$1 invested and reduce the projected \$5 billion per year. The main saving comes from delayed entrance to residential care. If entry into residential care for people with dementia can be delayed on average by only three months, there is a net benefit of \$66 million. If it can be delayed by 12 months, \$262 million per annum can be saved.

Alzheimers NZ has identified four initial steps to help make this happen. These initiatives are the first steps needed to address human rights, stigma and discrimination issues, and to reduce some of the inequities involved.

“... it is not just that our issues are complex and there is no medical solution for them, but there is a real unwillingness to talk about them.”

Paola Barbarino, CEO Alzheimer's Disease International, 21 September 2017

Dealing with Dementia: First Steps

It is unlikely that the usual specialist-led approach to dementia care can expand fast enough to keep up with the increases in need, and even more unlikely that healthcare coverage can be improved without rebalancing to give primary care a more prominent role ... Increasing the role of primary care services can unlock capacity within the system for diagnosis and continuing care and may be up to 40% cheaper than specialist care in High Income countries. Alzheimer's Disease International, 2016, *World Alzheimer Report*

Alzheimers NZ seeks better lives and reduced burdens on individuals, communities and the state. We support the *New Zealand Health Strategy's* intention to see all New Zealanders "live well, stay well, and get well, and therefore spend more of their lives in health" and the *Healthy Ageing Strategy's* linked goal to "reverse or slow declines in health and function, and promot[e] and support behaviours and other factors that enhance people's capacity". We also support the *Healthy Ageing Strategy's* identification of those with dementia as a "priority population", and its commitment to implementing the "*New Zealand Framework for Dementia Care*" "... to give people who are living with dementia the best possible independence and wellbeing".

Alzheimers NZ strongly supports full implementation of the *Framework* as an urgent priority. We are disappointed that after four years there has been little progress. The result is the problem has become more urgent.

Four immediate changes which will make a major difference and assist that implementation are:

- 1 Prevention and risk minimisation – delaying or preventing the incidence of dementia by up to 35%
- 2 Dementia navigation services – efficient and more timely access to services
- 3 Post-diagnostic support – helping people to live well and to prepare for the future
- 4 High quality information resources – dispelling myths and enabling 'best practice'.

Prevention and Risk Minimisation

Prevention or delay of dementia onset is a public health priority with potential to reduce not only the disability of individuals but also the associated societal and economic burden. *Lancet Commission on Dementia, Prevention, Intervention and Care*

The lack of a cure for dementia means risk reduction is vital. Evidence compiled by Livingston *et.al.* for the *Lancet Commission on Dementia, Prevention, Intervention and Care* shows effective prevention measures have the potential to delay or prevent around 35% of dementia cases. Childhood education below age 12; active treatment of mid-life hypertension; increased physical activity; social engagement; reduced smoking; management of hearing loss, as well as management of late-life depression, diabetes and obesity can all help to reduce levels of dementia. Essentially, what is good for the heart is good for the brain.

The Lancet's recommendations are not new. Many of these activities feature in the *New Zealand Health Strategy* and in the *Healthy Ageing Strategy*. However, little is being done to target effective health promotion towards middle aged and older adults as recommended by the WHO.

Alzheimers NZ recommends quality dementia risk reduction health promotion activities be directed at middle aged and older adults. We do not have an estimate of cost for this work at this stage.

“In the absence of a cure, risk reduction is a vital tool to fight dementia. With the condition set to be the 21st century's biggest killer, it's important that as a nation we unite against dementia and each of us do [sic] what we can to reduce our risk.”

Jeremy Hughes, Chief Executive, Alzheimer's Society UK, 2017



Dementia Navigation Services

The aim is ... to help the person with dementia and their family and whānau navigate through the health and social support system. ... [Navigation services] will help by providing advice, encouraging self-management, explaining the pathway, coordinating referrals and providing a point of continuity. [When a specific navigator is involved] the role will be undertaken by a member of the person's primary health care team. *Ministry of Health, New Zealand Framework for Dementia Care, 2013*

It can be very confusing and frustrating navigating through the health and social support systems. Navigation services help smooth the path for those with dementia and their care partners. They are a priority action in the 2013 *Dementia Framework* and use of navigators is supported by the Productivity Commission. Navigation services provide the first point of contact for the person with the diagnosis, and their family / whānau, and enable them to find their way through the health and social support system. They provide advice, encourage self-management, explain the pathway, coordinate referrals, and provide a point of continuity. Some aspects of these roles are already provided; others will require a dedicated role, and others could be

provided via technology. Therefore navigator roles supplement rather than replace what already exists. Overseas evaluations of these functions show positive outcomes for people with dementia and their care partners.

Alzheimers NZ recommends navigation services are established across the country. We propose navigation is first piloted in one or two DHBs, which could be started for a fraction of the cost of a national implementation. This allows assumptions about costs to be tested, and implementation questions to be addressed.

We estimate navigation would cost around \$9.6 million per year.



Smoothing the path of the dementia journey

Selina's story*

Mum was in her 70s when she first showed signs of dementia. She never remembered to tell the doctor she was having troubles with memory, getting lost, working out what was real and what wasn't. Some days she would just say to me, "I'm so lost, I'm so muddled."

Mum wanted to stay in her own home as long as possible. I wasn't aware of what to expect next, there was no one to shine a light on what was to come and where to go. It was extremely stressful and time consuming.

I know all services are stretched as I've seen incredible nurses, doctors, caregivers, needs assessor, legal advisors, and community groups. For all the people involved, our time would be used more efficiently and we could be more productive if each person gave consistent information, and didn't need to reiterate the same information.

Having a Dementia Navigator would allow people travelling the journey from diagnosis to death - the person themselves, and their carers - to have a much smoother path, illuminated where to go next and how to navigate that next step.



Post-Diagnostic Support

The **early post-diagnostic period** is the time when the person with dementia and their family / whānau start thinking about future plans and look around for solutions. Alzheimers NZ recommends providing a minimum of 12 months post-diagnostic support services for those diagnosed with dementia and their care partners. This is already in place in Scotland where the *5 Pillars Model of Post Diagnostic Support* provides people with dementia, their families and care partners with the tools, connections, resources and plans to allow them to live as well as possible with dementia and to prepare for the future. The model has been evaluated with positive results.

One of the advantages of this approach is it can both delay the transition to residential care and reduce subsequent care requirements. The post-diagnostic support can also improve the quality of life for people with dementia and their family / whānau / care partners, and therefore reduce associated costs.

We estimate provision of 12 months post-diagnostic support including services provided in the community and through different forms of therapeutic care will require an extra \$4.8 million per annum.

High Quality Information Resources

Consultation with people with dementia and their family / whānau care partners as part of the development of the *New Zealand Framework for Dementia Care* highlighted concerns about issues including outdated information, inconsistent messages, and large amounts of information creating the risk of information overload.

Information which is easily accessible, consistent and regularly reviewed to represent 'best practice' is an essential component in supporting people with dementia and their care partners. Providing this information facilitates more timely access to support for those affected by dementia and reduces some of the associated difficulties.

Alzheimers NZ has worked with the Ministry of Health and DHBs to develop a nationally consistent suite of information resources for people with dementia and their care partners. That information is now available electronically. However, clinicians advise hard copy information is also needed.

Alzheimers NZ recommends Government funds high quality information brochures to support people with dementia and their care partners to better understand the options after diagnosis. We estimate the cost at around \$130,000.

“ People are in shock when they receive a diagnosis. They don't know to ask 'what's next'. It's not just about setting people up for the future, but also about preventing their decline. ”

Pippa, Alzheimers NZ Consumer Advisory Group*

Dementia: Next Steps

Once the initial platform is in place, Alzheimers NZ recommends attention shifts to implementing changes which support people with dementia to live well and independently for as long as is possible. Dementia-friendly communities; sufficient, flexible, quality respite care; and improved data, can all make this happen.

Dementia-friendly Communities

Most people with dementia live at home

for most of the time after the diagnosis.

Most want to continue to live their lives, and maintain their interests, activities, hobbies, and community connections. However, many do withdraw into the relative safety and comfort of their own homes and become isolated following a diagnosis. Increased isolation is associated with further cognitive decline.

Dementia-friendly communities assist older people generally, and people with dementia specifically, to live better lives where they can play a full and meaningful role in their families and in their communities, and get the help and support they need. This is acknowledged

in the *Healthy Ageing Strategy* (e.g. Action Plan numbers 1a and 11b) and is already happening with Rotorua well advanced towards becoming a dementia-friendly community. Evidence suggests that dementia-friendly communities can and should work closely with the wider concept of Age Friendly Cities.

Alzheimers NZ recommends Government take the following measures in line with the WHO *Global Action Plan on the Public Health Response to Dementia*:

- a. Establish a national public awareness programme on dementia to support and promote a dementia-friendly New Zealand; and
- b. Actively support national dementia-friendly initiatives such as the *Dementia-friendly Recognition Programme and Dementia Friends* (See Appendix 2).

“Support is the key to me leading as normal a life as possible. People knowing and treating me as the person I still am. Giving me room to live.”

Person with dementia

Respite care

Care partners can only care if they have adequate support. Without this, they can burn out, get sick, or give up. *A Guide for Carers* emphasises the importance of having a break. Respite care is an important way in which care partners can continue to care. It needs to be adequate and consistent across New Zealand, as well as meet specific regional needs, and enable care partners to plan for respite in advance.

For respite care to work it also needs to:

“Be easy to access and navigate, well-co-ordinated, proactive and responsive to the needs of family and whānau”

“Be available in a range of forms, therefore able to meet the needs of people at different ages and stages”

“Involve appropriately skilled staff, with help available to care for and support people with dementia.”

Consumer Advisory Group member, Alzheimers NZ

We have a growing collection of anecdotal evidence about the inadequacy of respite care in New Zealand. These concerns require further examination and need to be addressed as a priority because inadequate respite care risks further increasing the national health burden. Adequate levels of flexible, responsive and consistent respite care, where paid relief carers are remunerated fairly, are urgently needed.

Alzheimers NZ recommends Government ensures care partners have access to a range of respite services and the ability to plan for a break in advance as is envisaged in the *New Zealand Framework for Dementia Care* and Action 22a of the *Healthy Ageing Strategy*.

Improved data collection

We have a major data gap. New Zealand has no formal national data collection on dementia. This impacts our understanding of dementia in New Zealand, the demand for services and the costs associated with service provision.

It is unusual to have so little data about such an urgent problem, and its lack presents a

major barrier to making change. Alzheimers NZ fills some of the gap with commissioned reports from Deloitte regarding the economic impact of dementia. However, these figures are based on best estimates from overseas research and are approximations of the New Zealand situation.

As Brain Research New Zealand and others have stated, homegrown research on prevalence and other issues is needed. Alzheimers NZ notes Government already collects data about other significant conditions, such as diabetes.

The New Zealand Framework for Dementia Care commits to numerous over-arching factors including monitoring and evaluation and culturally appropriate services. It is difficult to see how these can be achieved in the absence of local data.

Alzheimers NZ recommends Government follow the WHO recommendation to “collect and use the necessary data on epidemiology, care and resources relating to dementia [in New Zealand] in order to implement relevant policies and plans”.

Dementia: Government and Community working together

Alzheimers NZ is a not for profit organisation seeking to end the negative impact of dementia. We advocate at a national level for those affected by dementia by raising awareness, providing information and resources, advocating for high quality services, and promoting and enabling research about prevention, treatment, cure and care. Our patron is Sir Richard Faull, Director the Centre for Brain Research at Auckland University.

Alzheimers NZ supports local Alzheimers organisations which provide support, education, information and related services directly to members of their communities affected by dementia. The services include assistance for newly diagnosed people about understanding and living with a dementia diagnosis; support for family, friends and whānau coping with caring; support groups and day programmes. Other non-government organisations also assist those affected by dementia and thus help reduce the burden on the State.

Not for profit organisations play a vital role in New Zealand as identified by the Productivity Commission. They bring in money, solutions, community knowledge; access to communities of people who live with dementia; access to service providers, service users, volunteers, research and

information. They also have specialist skills and are therefore not interchangeable with more generic organisations. The best solutions are found when government and not for profits work well together. Funding remains a significant issue for non-profit organisations and has important implications for their capability, capacity and ability to innovate.

We need to work together to break the silence around dementia and deal with the urgent issues. Government does this best when it works with effective non-government organisations. The non-government organisations do best when they have sufficient support to do their work. This is not the case at present. Addressing this situation means: targeted funding; services which match the needs of clients; responsiveness to Māori and Pasifika aspirations; continuous improvement and learning; meeting public expectations about equity and fairness; and, being able to provide decision-makers with information for making choices.

Alzheimers NZ is keen to work with Government and the rest of the sector to effectively meet the looming challenges of dementia, and therefore reduce its impact on individuals, families / whānau, communities, and our nation. We look forward to further discussion.

... the magnitude of prevalence and costs of dementia make it one of the most significant public health burdens in New Zealand. As such, it needs to be one of the priorities for policy-makers.

Dementia Economic Impact Report, (2017)

Appendix 1: What is Dementia?

Dementia is an umbrella term used to describe a group of conditions that affect how well our brain works.

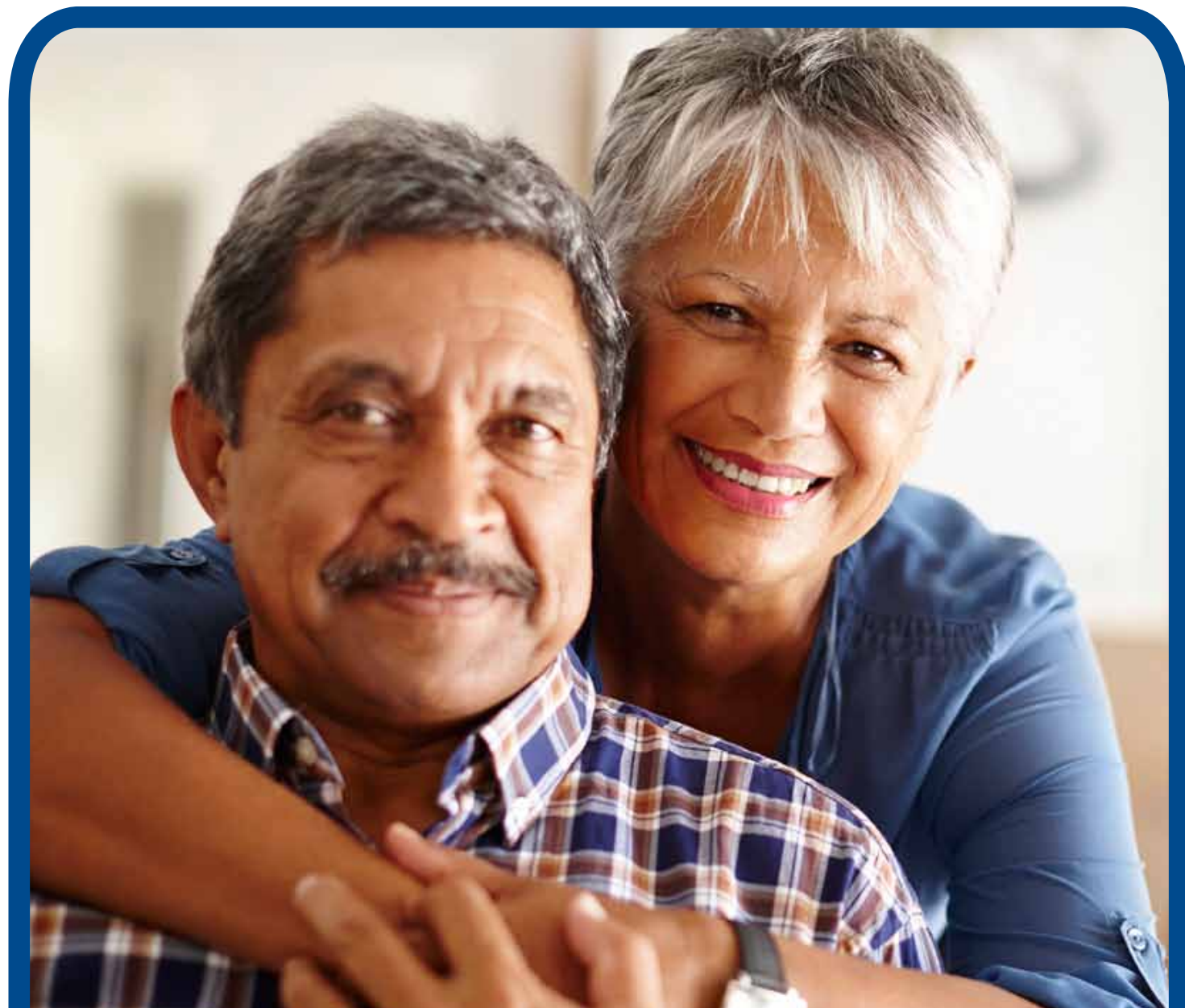
Dementia can affect anyone, and as people get older the chances of developing dementia increase.

The most common form of dementia is Alzheimer's disease – affecting around two-thirds of people with dementia.

The symptoms each person experiences depend on the parts of the brain that are affected. However, the most common

dementia symptoms include changes in memory, thinking, behaviour, personality and emotions. These changes affect a person's ability to perform everyday tasks, and interfere with their everyday lives.

Dementia is progressive, which means that for most people the changes spread through the brain gradually and lead to the symptoms getting worse. Dementia is different for everyone – what people experience, and how quickly they are affected is unique to them. What they can do, remember and understand may change from day to day.



Appendix 2: About Alzheimers NZ

Vision

Towards a world without dementia

Kia mate wareware kore te ao

Mission

A dementia-friendly New Zealand

Aotearoa, he aro nui ki te hunga mate wareware

Alzheimers NZ (www.alzheimers.org.nz) was established in 1986 and is the lead organisation at a national level representing people living with dementia. We raise awareness of dementia, provide information and resources, advocate for high quality services, and promote research on dementia and its impact.

We also support local Alzheimer's organisations, our Members, who provide services at a community level and engage directly with people with dementia and their supporters, family / whānau.

We work:

- at a national level, as part of the wider dementia community and as part of the health and social services sectors; and
- as a member of the global dementia community.

Our strategy is to build a dementia-friendly New Zealand - one in which people with dementia and their care partners are empowered, supported and included in society, able to exercise their rights and live as well as possible.

We are currently focussing our attention on:

- Delivering New Zealand-wide **dementia-friendly programmes** that challenge

individuals and organisations to become involved:

- *Dementia Friends* provides an educational programme for individuals to learn more about what it is like to live with dementia and turn that understanding into simple actions that can help people with dementia to live well.
- The *Dementia-friendly Recognition Programme* engages businesses and organisations in working with people living with dementia to embody dementia friendliness in their operations and activities.
- Producing a comprehensive set of **services and standards** for best practice dementia care designed to lift the quality of care and support, and be the 'go to' standard for dementia care and support in New Zealand.
- Providing a comprehensive suite of **information resources** for people living with dementia, and practical support and advice through our website.
- Leading a **multi-sector conversation** on how services to people with dementia need to be transformed to reflect a world of more choice, flexibility and instant access.
- Holding our 2018 **conference** which will be a platform for harnessing the best insights and knowledge from a range of sectors that can all help us to meet the dementia challenge.

The voice of people with dementia will be strongly represented in all of these initiatives, ensuring their right to determine their future is well and truly heard. Supporting them with a range of practical services remains at the core of what we do, including through our network of local Alzheimer's organisations.





Alzheimers NZ

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Email: admin@alzheimers.org.nz

www.alzheimers.org.nz

Charity registration number CC 21026

For dementia support call 0800 004 001

Alzheimers NZ is a member of Alzheimer's Disease International, the umbrella group for 85 Alzheimer's disease organisations.