How do older persons living with dementia journey through the long-term care system?

What you need to know:
Many older persons living with dementia and their families must rely on the long-term care (LTC) system. This research looks at how older persons with dementia journey through the LTC system, and what predicts their movement from home care (HC) into facility-based residential care (RC), as well as their unique experiences as they journey through the LTC system.

What is this research about?
For a number of reasons, many older persons living with dementia must rely on formal long-term care (LTC) services in the community. LTC services include home care (HC) which is care provided in the person’s home, and facility-based residential care (RC), often known as nursing home care. The latter is often considered a “last resort” for many older persons and their families.

This study looks at the service-use trajectories (transitions or changes in care patterns), and predictors of movement of older persons with dementia and their families in the LTC system as a whole. Limited research focuses on the LTC system as a whole continuum, as most research looks at single sectors of the system such as RC, acute hospital care, or primary care.

What did the researchers do?
The researchers analyzed service-use patterns and predictors for the entry into, and exit from services using linked administrative data collected over a 4-year period (2008-2012). The data sample includes persons aged 65 or older, and living with dementia who were clients of the publicly funded LTC system in British Columbia (BC). Dementia was identified through either an assessment indicating a form of dementia, or a minimum of one hospitalization with a diagnosis of dementia.

Using a structural life course perspective (LCP) framework which acknowledges diversity in life experiences, the researchers looked at how socio-economic factors such as age, gender, geography (rural-urban residence), marital status, living arrangement, legal guardianship, receipt of income supplements, and other health variables (e.g., chronic conditions) influenced individual experiences, and the LTC service trajectories of older adults.

UVic researchers looked at how older persons with dementia journey through the long term care system (Photo: Pixabay)
What did the researchers find?

The researchers found these characteristics in the original data sample of older adult clients of LTC with dementia (n=3,635):

• 83.2 years of age on average
• mostly women (58.9%)
• majority live in urban and suburban areas (58.9%)
• mostly not married (58.4%)
• one-third lived alone (32.6%)
• over 30% relied on income supplements (38.9%)

Further analyses of clients with all predictors (n=3,541) found:

• High proportions of HC and RC users (>50%)
• Less than half used single services (43%)

The researchers found that at the start of the LTC journey, there was a fairly equal reliance on HC and facility-based RC. Over time and for each year, mortality was highest for the RC group. Age, changes in cognitive status, and activities of daily living were important predictors of transitioning into HC or RC.

How can you use this research?

This research enriches our understanding of how older persons with dementia move through the LTC system, and the factors that influence these patterns. This study is relevant to health care planners, decision makers and policy makers, to better support planning and resource funding decisions for the range and mix of LTC services needed for people with dementia and their families.

Future studies are needed to provide a fuller picture of the overall range of services (public, private, and informal) that are used by persons with dementia, and the care that is provided by family, friends, and neighbours. In addition, future research could examine growth in the number of persons living with dementia, and the widening gaps between the type of care required, and the quality of HC and RC provided in communities.

About the researchers

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Keywords

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