

## DTA Guest Lecture: Resources to Support the Care of Aboriginal and Torres Strait Islander People Living with Dementia - 25th June, 2020

### Audience Q&A's

QUESTIONS	ANSWERS
Is there a particular type of dementia that is more prevalent in these communities?	Like many older populations, Alzheimer's disease is most common, followed by vascular dementia. Many presentations also have mixed dementia (multiple types) or unspecified dementia (where is it difficult to pinpoint a specific cause/type). Rates of dementia due to head trauma are unusually high (but less common than Alzheimer's or vascular) and probably reflect the high prevalence of head injury or traumatic brain injury (~30-50% in previous dementia studies). More specific information on the types of dementia observed in this population can be found here: <a href="https://caringforspirit.neura.edu.au/research/dementia-in-our-mob-and-around-the-world/#types">https://caringforspirit.neura.edu.au/research/dementia-in-our-mob-and-around-the-world/#types</a>
Some of the early slides, the stats were quite old - 2012, is that because there is no newer data?	This question seems to refer to the dementia prevalence estimates published by the AIHW. These estimates are currently being revised and new figures will likely be published soon.
Can you give more information about the link between early childhood trauma and risk of dementia.	There is growing evidence around the world of the link between significant early stress or adverse childhood events and the risk of dementia in later life. This could be caused by alterations to neurodevelopment which cause lasting changes in brain structure and function as well as the stress/emotion regulation systems. It could also relate to a cascade of poorer health and social outcomes for adults surviving childhood trauma, which are in turn risk factors for dementia. The study referenced in the presentation is: Radford, K., K. Delbaere, B. Draper, H. Mack, G. Daylight, R. Cumming, S. Chalkley, C. Minogue and G. A. Broe (2017). Childhood stress and adversity is associated with late-life dementia in Aboriginal Australians. American Journal of Geriatric Psychiatry. <a href="https://doi.org/10.1016/j.jagp.2017.05.008">https://doi.org/10.1016/j.jagp.2017.05.008</a>
Can you please share with us, types of health services available for Aboriginal elders thank you.	Health, community and aged care services: Government, NGO/Non Government organisations, private providers, and Aboriginal community controlled health and/ or aged care services.
Will you publish your QOL tool? Would be a great tool to use more widely and validate in other states.	The development of the GSGL has been published - Smith K, Gilchrist L, Taylor K et al. "Good Spirit, Good Life: A Quality of Life Tool and Framework for Older Aboriginal Peoples." The Gerontologist (2020).
I would like to know better ways, as an aged care nurse, to encourage our indigenous residents family members to become more involved in their care, be made to feel welcome and realise their input matters to us.	Would recommend accessing the recommendations from our website available once the GSGL package is launched ~21st July - <a href="http://www.aboriginalageingwellresearch.com">www.aboriginalageingwellresearch.com</a>
Did you do any specific work regarding dementia in the Northern Territory (particularly in remote locations)?	Not currently, we validated the KICA there in 2007.
Is the KICA tool accepted as a good assessment for ACFI purposes?	Yes KICA is one of the supplementary assessment tools for cognition
It was shared earlier that Aboriginal people don't use 'quality of life' as a term, however, 'good spirit, good life' is more appropriate. During the webinar it was still referred to as good quality of life.	Yes, we need to be more consistent.

<p>Given the low correlation between GSGL and available supports and services, and higher correlation with respect, elder role and culture - I'm wondering what that says about attempting to improve access to dementia services as a priority when working with Aboriginal communities.</p>	<p>It doesn't mean that respectful services and supports that meet needs are not important (they were identified by qualitative interviews as important), but that has less impact on overall score. Scores on this item were high (services were respectful) even when other item scores were lower. We partnered with and recruited mostly from services that had a strong reputation in the community for their programs, and so this may have skewed this item's data.</p>
<p>Has there been any reasearch into the early dementia into elders who have recently been hospitalised?</p>	<p>Not specifically</p>
<p>In terms of Korsakoff's syndrome, what would the percentage be within the communities.</p>	<p>Korsakoff's syndrome is caused by malnutrition which is often related to alcohol abuse. Dementia due to alcohol abuse was rarely diagnosed in the Koori Growing Old Well Study (urban/regional NSW study of people aged 60+), affecting about 1% of the people in this study. Alzheimer's disease was by far the most common type of dementia diagnosed. Vascular dementia was also relatively common. Similar results were found in remote areas (Kimberley study in Western Australia, Smith et al 2008), dementia due to alcohol abuse is rare in Aboriginal people, and the prevalence of drinking alcohol is low (in those aged over 45 years- drink alcohol 37%, drink every day only 11%).</p>
<p>Does it cost to do the online training modules?</p>	<p>There is no cost for the online training modules.</p>
<p>How do you get to the training modules on the website? Are the modules live yet?</p>	<p>The training modules are not yet available as we are in the final stages of completion. They will be completed shortly and following evaluation will be launched for use later this year. Once they have been completed you will be able to access via the Caring for Spirit website. If you would like to be get updated on when the training modules are available send an email to <a href="mailto:aboriginalageing@neura.edu.au">aboriginalageing@neura.edu.au</a> (or follow us on Twitter @CaringForSpirit) and we can keep you updated on the progress.</p>
<p>Is the Good Spirit/Good Life tool widely available for services providers in the aged care sector?</p>	<p>Not until the launch -end of July. It will then be available to be freely downloaded on our website with the package of resources and instructions for use.</p>
<p>Are we able to get a hardcopy of the Good spirit/good life tool please so we can use in our facility? Thanks</p>	<p>Yes end of July, check the website <a href="http://www.aboriginalageingwellresearch.com">www.aboriginalageingwellresearch.com</a></p>
<p>The good spirit, good life tool is excellent - it would be great for the Aged Care Quality and Safety Commission to use to gauge consumer experience in aged care services. Are there any thoughts on this?</p>	<p>Yes they are interested in this assessment package, and we will have further discussions.</p>