Living alone at home

JO MORIARTY @ASPIRANTDIVA
Outline

Can’t substitute for Wendy!
Comparatively little research on this topic
Aim to highlight points for discussion
Research suggests

Predominantly women

Mostly widowed

Can be divided into:

- Those with a family carer (often caring at a distance)
- Those without a family carer
People with dementia living alone: what are their needs and what kind of support are they receiving?

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Abstract

Background: In the U.K. about 141,460 people with dementia (PWD) live alone. They are at risk of social isolation and inadequate social and medical supervision. The aims of this study were to identify the needs of PWD living alone and to compare the needs of PWD living alone versus those living with others. It was predicted that PWD living alone would have significantly more unmet needs than those living with others.

Methods: 152 PWD were interviewed about their cognitive status and quality of life (QoL); and 128 informal carers were interviewed about the PWD’s QoL, social networks, behavioral and psychological symptoms (BPSD), functional status, and services used. For 24 PWD no carer was available. Carers were also interviewed about their own symptoms of depression, anxiety, burden, and satisfaction. Researchers rated PWD’s needs. One-third of the PWD (50) were living alone.

Results: PWD living alone had significantly more unmet needs (M = 3.9, s.d. 3.1) than those living with others (M = 2.0, s.d. 2.0) (U = 1578, p < 0.01) particularly in the areas of looking after home (χ² = 17.23, p < 0.001), food (χ² = 13.91, p < 0.002), self-care (χ² = 10.23, p < 0.002) and accidental self-harm (χ² = 16.51, p < 0.001). The most frequent unmet needs were daytime activities (27, 54.0%), company (26, 52.0%), psychological distress (22, 44.0%), eyesight/hearing (16, 32.0%), and accidental self-harm (16, 32.0%).

Conclusion: PWD living alone are a vulnerable group who are at increased risk for unmet social, environmental, psychological and medical needs. This study illustrates the need to identify these individuals and to make provisions among social service agencies to monitor their well-being regularly and provide a higher level of support when needs are identified.
Unmet needs

Early research (eg Levin et al, 1989) suggested people with dementia living alone were more likely to move into a care home.

No recent research but unlikely to be the case for those reliant on public funding.
Contrasts

FAMILY CARERS & SERVICES

Concerns about safeguarding, eg
- Physical risks and safety
- Vulnerability to financial abuse

PEOPLE WITH DEMENTIA

Concerns about quality of life, eg
- Loneliness
- Lack of meaningful activities
The future

Higher numbers of people living alone

- 2.47 million people aged 45 to 64 live alone in the UK
- Proportion of those living alone in population is rising
- Men make up the majority of this group
- How does this fit into current dementia policy?
Discussion (1)

Do we need to think more about housing and support solutions?

- Risk of ‘dementia’ silo
- What is the role of assistive technology?
  - More developed in Scandinavia
  - What happens if person does not have a family carer in terms of ‘first responder’
Discussion (2)

Housing solutions

◦ Emphasis on physical environment in ‘lifetime homes’
◦ Role of co-housing?

Balancing needs and choices

◦ What is the right way to help people plan for future
◦ Fear of going into a care home
Thanks for listening

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