POSTER ABSTRACT

Investigating central american older adult service systems for people with dementia: a social network analysis

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Introduction (comprising background and problem statement): It is estimated that as of 2015, 47 million people live with dementia worldwide and that over the next twenty years 80 million people will live with dementia. Data from developing countries are scarce [1]. More specifically Central America is a terra incognita [2, 3]). There is a need for research into dementia in developing countries which includes data on formal and informal care arrangements [1,4]. Quality of care for many diseases that affect older adults is higher than the quality of care for dementia due to poor integration of organizations [5]. Health and social care together, (…) provide support for the cumulative needs of people with dementia highlighting that the organisation of dementia specific systems of services and exchange between associations is needed [6]. Social network analysis allows an evaluation of health service delivery systems in developing countries [7].

Description of policy context and objective: Laws specific to protecting older adults’ rights were developed beginning in the 1990s in Central America. These laws are valuable as they allow the state to organize action in favour of older adults, and establish limits and possibilities for public authorities to exercise older adults’ rights [8]. The trend in support for older adults as a vulnerable group provides a constructive context for providing services for older adults and with dementia.

The objectives of this study are to explore the dementia service system networks of five of the seven Central American countries for structure, operation and integration. Concurrently, dementia policies and care arrangements will be mapped out for each country for a final comprehensive comparison.

Targeted population: Older adults and people with dementia.

The dementia service system network of each country is explored through two perspectives: older adult service organizations and families with dementia. Sixty-five semi-structured interviews of representatives from governmental, public, private and non-profit organizations as well as of families with dementia were completed.

Highlights (innovation, Impact and outcomes): This study will provide primary data on Central American older adult service networks and contexts, enhancing the academic and practical knowledge of health/social care network cultures and practices.

Preliminary findings show providers of older adult services who partake in each country’s older adult health/social care network are often unbeknownst to other stakeholders. Through the interviews, stakeholders learned about each other and were enthusiastic to be connected.
Comments on transferability: Network boundaries were set for stakeholders providing a range of services for older adults within the capital cities of each country. Snowball and reputational sampling began with the Alzheimer’s Association of each country.

Conclusions (comprising key findings, discussion and lessons learned): Preliminary findings reveal that service networks for older adults are highly fragmented even with policies in place. Network participants have few connections within the network. The need for formalized networks and inclusion, exchange and coordination within the networks is evident. This study may influence policies and new organizational practices with outcomes of increasing network integration, services, consumers, and quality of care.

Keywords: integrated care; dementia; older adults; service systems; networks