



# UST Geriatrics Interest Group: Encouraging Interprofessional Conversations Surrounding Dementia-Related Disability



Cameron Jones<sup>1,2</sup>, Chloe Hurme<sup>1,3</sup>

Team Leads: Elizabeth Narwold<sup>1,2</sup>, Kainat Altaf<sup>1,4</sup>

<sup>1</sup>Urban Health/AHEC Scholar, <sup>2</sup>UConn School of Medicine, <sup>3</sup>UConn School of Pharmacy, <sup>4</sup>UConn School of Dental Medicine

## Background:

The Urban Service Track/AHEC Scholars Program curriculum aims to equip healthcare providers in training with the skills to provide primary and preventative care to Connecticut's urban and underserved populations.<sup>1</sup> *The Geriatrics Interest Group (IG)* is one of several *student-led, student-centered* groups under the umbrella of the Connecticut Area Health Education Center (AHEC) Urban Service Track student interest group framework.

Geriatric healthcare in the United States is an emerging challenge to the traditional healthcare system. *Life expectancy has steadily increased* from 39 years in the latter 19th century to almost 80 in 2020.<sup>2</sup> This increase in life expectancy has led to both relative and absolute increases in the size of the older adult population, with projections continuing to forecast this growth through the year 2100.<sup>3</sup> Given that larger numbers of older adults can be expected to be living longer with chronic illnesses, it is essential for healthcare providers and policymakers to account for this *increasing demand for services*.

The Geriatrics IG *identified dementia related disability as a source of significant emotional, financial and health related stress* for many older adults and their care partners. Currently, there are *6 million people living with dementia (PLWD) in the United States of whom, 80,000 live in Connecticut*, with this number projected to grow over time.<sup>4,5</sup> Many, if not all PLWD will require some level of support services during their journey. Unpaid family support is a crucial link in ensuring that PLWD can comfortably adapt to the conditions of their journey. *In Connecticut alone, over 201 million hours of unpaid care by care partners was valued at 4.23 billion dollars.*<sup>4</sup> Unfortunately, not all PLWD have families with the means to provide optimal levels of support at all stages of their lives. until recently, options have been limited for those without the means to pay thousands of dollars per month for the level of support they need.<sup>6</sup>

The group sought to explore effective and compassionate means of designing and providing supports, services and care to PLWD throughout the course of their journey. This goal included drawing from emerging research and policy, models of long-term services and supports (LTSS), as well as the lived experience of PLWD to *shift the paradigm of aging with a disability towards the "aging in place" model*. This model employs adaptive strategies that allow PLWD to live in their homes independently, ensuring that older adults and PLWD can remain part of the fabric of the communities in which they reside.

## Methods:

- UST scholars submitted subject matter interests to CT AHEC at the beginning of the program.
- AHEC faculty reviewed submissions and assigned students to interest groups in a manner which *prioritized professional diversity*.
- Faculty mentors were assigned to groups based on demonstrated expertise within their field.
- The interdisciplinary groups met monthly from November 2023 to March 2024.
- Geriatrics IG members indicated a desire to focus on the topic of *dementia related disability*. This included identifying adaptive strategies, challenges, and barriers to care and supportive services for adults with dementia, current best practices for dementia care and LTSS, and emerging research and policy with the potential to impact people with dementia in Connecticut.
- Meetings were structured around presentations from content experts, including people with lived experience, involved in geriatrics *LTSS, clinical practice, research, and advocacy*.
- Following presentations, the group discussed systematic shortcomings and future directions identified by PLWD and content experts to determine *target areas for meaningful action*.
- Group leads and faculty mentors encouraged independent engagement with subject material outside of group meetings.
- IG members collaboratively identified *service-learning opportunities* which aligned with topics addressed in meeting discussions.

## Objectives:

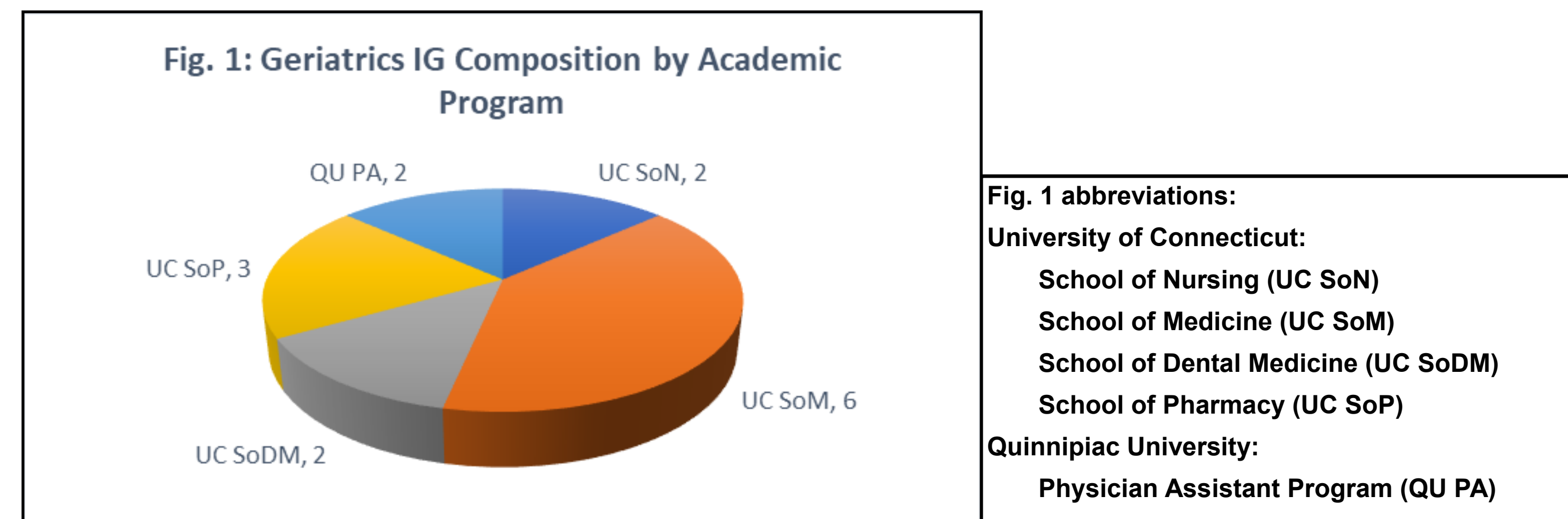
- *Define cognitive disability in the context of geriatric health and well-being.*
- *Identify health outcome disparity related to geriatric cognitive disability.*
- *Engage in collaborative dialogues on bridging geriatric health disparities.*
- *Translate discussion insights into experiential learning engagement.*



Audio poster summary and links to some related articles and podcasts.

## Results:

- The Geriatrics IG was composed of 15 UST scholars representing 5 different academic programs. It was led by UST scholars, Elizabeth Narwold (UC SoM), and Kainat Altaf (UC SoDM) with UST alumni mentors (Fig. 1).



- Meetings took place monthly November through March via Zoom and focused on distinct aspects influencing the lives of PLWD. (Table 1)

Meeting Month	Topic/Speaker	Core Concepts
November	Introduction to Interest Group	Aging into disability vs. aging with a disability. "Aging in place" model of healthy aging.
December	Dementia Friends Training: Tia Kozar	Changing community attitudes towards dementia to improve the lives of PLWD.
January	Healthy Aging and Aging into Disabilities: Dr. Ellis Dillon	Investigating barriers to PLWD receiving LTSS in their home.
February	Q&A with Dr. Anne Kenny and Teresa Webb, RN	Considerations regarding maintaining quality of life for PLWD.
March	Service Learning/ Advocacy	Effecting positive change in the community via interprofessional team engagement.

- GroupMe chat contributions included articles relating to healthcare policy, finance, emerging clinical research, and school specific curriculums on healthy aging. Additionally, opportunities for individual learning shared by members included: a dementia specific communication skills seminar, "To Whom I May Concern"- a theatrical production centered around telling the stories of PLWD.
- Members participated in the UConn John Dempsey Hospital (JDH) NICHE program as a component of their service learning education. Program volunteers socialized with hospitalized older adults at risk of developing delirium. This provided a sense of social support to individuals who would otherwise be alone to bear the stress of their illness.
- Members identified an opportunity to engage with local older adults residing at Amberwoods of Farmington Nursing and Rehabilitation. This learning event represents the culmination of the group's discussion, as members will be able to solicit firsthand perspectives from older adults and their care team.

## Discussion:

The Geriatrics Interest Group cultivated a nuanced understanding of topics surrounding the care and support of PLWD. Students were provided an opportunity to *appreciate the breadth of expertise in these topics through collaborative, interprofessional education*. The introductory meeting gave participants an initial perspective into an idealized model of aging with a disability and a brief overview of the obstacles causing the lives of many PLWD to deviate from this model.

Group *members challenged their own attitudes towards dementia* and acquired useful educational background for encouraging community members to do the same when engaging in dementia friends training. The motivation underlying efforts developing community understanding of dementia was further emphasized by the group in the subsequent meeting *focusing on barriers to healthy aging at home*. Group members learned about the current state of research on this topic being conducted by Dr. Ellis Dillon. The common theme reflected by Dr. Dillon's conceptual framework, was that the barriers to aging at home primarily centered around *attitudes of individuals, communities, and healthcare providers; providing a strong motivation for expanding the reach of programs like Dementia Friends*.

The group then elected to *explore the attitudes of PLWD to understand what healthy aging with a diagnosis of dementia looks like* for an individual. The group meeting with Dr. Anne Kenny and Teresa Webb explored Teresa's perspective as a person living with dementia. Discussions centered around *the connection between a person's attitude and behaviors in determining their quality of life* after a dementia diagnosis, while also identifying extrinsic factors which influence this attitude such as support systems and stigmatization of their diagnosis.

The value of meeting discussions was evident across multiple domains through the course of the IG. Those who participated in the *NICHE program at John Dempsey Hospital* demonstrated their commitment to quality improvement in older adult healthcare. One participant noted, "I was able to apply my knowledge of dementia-informed care as a purposeful visitor", further emphasizing the translational value and positive impact of UST IGs on community health.

Finally, the group came together to *organize a service-learning engagement with older adults living in a nursing home*. This opportunity will provide participants the opportunity to apply their newly formed perspectives on aging in a constructive way. The skills developed by IG members during this experience will be instrumental to their perspectives and practice as future members of the allied health professions.

## Conclusion and Future Directions:

Many of the insights gained from this work are easily generalized to other disabilities or topics in geriatric health. Through an interprofessional, collaborative approach, group members identified a salient topic of interest, developed knowledge on the topic by consulting a diverse array of perspectives, acted on that knowledge and organized a presentation of the process. This process comprehensively cultivated professional competencies which are fundamental to successful interprofessional practice.<sup>7</sup> Thus, regardless of area of expertise or area of future clinical practice, all participants of this group are better equipped to work collaboratively for better patient outcomes.

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