



KEY POINT SUMMARY

OBJECTIVES

The purpose of this paper is to discuss specific examples of design decisions made to meet the needs of people with dementia.

Specialized Design for Dementia

Habell, M. 2013 | *Perspectives in Public Health Volume 133, Issue 3, Pages 151-158*

Key Concepts/Context

Designing for people with dementia is a major need in elderly care buildings. However, it is difficult to design for this population, as the parameters of dementia itself are often vague. The author also notes that the registration requirements in the UK for a care home make no distinction between the type of dementia or the severity of the dementia. As such, most environments are not designed to meet the specific needs of this population.

Methods

This paper's main content comes from the author's experience as an architect.

Findings

The author proposes an environmental toolkit that can be modified to meet the specific needs of the residents given their dementia severity or type. Key features for dementia care buildings include flexible spaces for free roaming; multiple cueing systems; comprehensible plans and bedroom groups; openness and privacy; variety of spaces; provision for animals; visuoperceptual safeguards and aids; icons and cues; a strong visual relationship to the exterior; and challenge and exercise. The author also discusses in more detail the important role that light plays and the memory trail as part of the therapeutic free-form space.

Design Implications

Designers would find many examples of design elements that may help provide a supportive environment for people with dementia. The author notes that compared with traditional elderly care, space requirements are larger, and there are security and care issues as well as light, sleep, sensory, and exercise aspects. The internal environment can be used for therapeutic benefit, using movement, memory trails, behaviour cues, signage, sunlight therapy, light spectrum control, and landscape. Special planning can mitigate antisocial behaviour, agitation, anxiety, and confusion. It can provide scope for family involvement.



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Limitations

This paper is based on the author's experiences. Some examples are supported by research, while others are not.