



KEY POINT SUMMARY

OBJECTIVES

The objective of this study was to determine the effectiveness of built environment interventions in managing behavioral and psychological symptoms of dementia among residents in long-term care settings.

Effective Use of the Built Environment to Manage Behavioural and Psychological Symptoms of Dementia: A Systematic Review

Soril, L. J. J., Leggett, L. E., Lorenzetti, D. L., Silvius, J., Robertson, D., Mansell, L., Holroyd-Leduc, J., Noseworthy, T. W., & Clement, F. M. 2015 | *Public Library of Science Volume 9, Issue 12, Pages 1-12*

Key Concepts/Context

There is a lack of valid and reliable research in the area of impact of built environment interventions in managing behavioral and psychological symptoms of dementia.

Methods

Authors conducted a systematic literature review of all articles published from 1995-2013. The authors were interested in finding valid and reliable published research in this area.

Findings

Five low- to moderate-quality studies were included. Three categories of interventions were identified as change/redesign of existing physical space, addition of physical objects to the environment, and type of living environment. The five studies discussed in this article included the following design interventions and resulting impact:

1. Redesign of an existing corridor had no significant difference in overall resident behavior while in the corridor.
2. Unlocked doors to a courtyard decreased agitation when doors were unlocked compared to when doors were locked.
3. Two different multisensory environments and one control environment had no significant differences in affect states before and after intervention, among the three environments. The only significant difference was that



DESIGN IMPLICATIONS

Design interventions of the studies are discussed in the findings. Practitioners should be encouraged to work with their clients to develop research studies based on design interventions.



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more sadness was recorded in the control environment (a living room) versus the other two environments.

4. In a move to a purpose-built specialized care facility for people with dementia the quality of life in the intervention group was similar or better compared to the control group.
5. In a move to a special care unit for people with dementia there was a reduction of verbally agitated behavior in the intervention group compared to the control group.

Limitations

The small number of research studies identified makes generalizability to a larger population difficult. The authors note that there is a lack of valid and reliable studies in this area of design.