

Access to Dementia Care in Rural and Remote Communities: For Some, No Light at the End of the Tunnel

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1. Introduction

- There is dramatic growth in the number of older adults with Alzheimer's disease and related dementias (ADRD) in the Rocky Mountain West.
- Access to specialized ADRD services and supports in rural areas is limited.
- Previous research has shown that rural adults with ADRD experience unmet needs in one or more areas of functioning.
- Barriers to ADRD services may be even more pronounced in remote areas.
- Specific barriers to care in rural and remote states, like Wyoming, have not been fully investigated.

2. Objectives

- To understand areas of need of improved access to dementia care throughout the state of Wyoming.
- To use areas of identified needs to inform the development of a statewide dementia plan.

3. Methods

Recruitment

- Towns across Wyoming were selected ($n = 10$).
- Participants were recruited through key stakeholders across Wyoming.
- Advertisements were posted in community sites in the specific towns and surrounding communities.

Instruments

- Demographics were assessed using a Participant Profile Form designed for this study.

Analysis

- SPSS version 24 was used to examine demographics.
- Thematic analysis was utilized to identify common themes. Three coders were utilized.

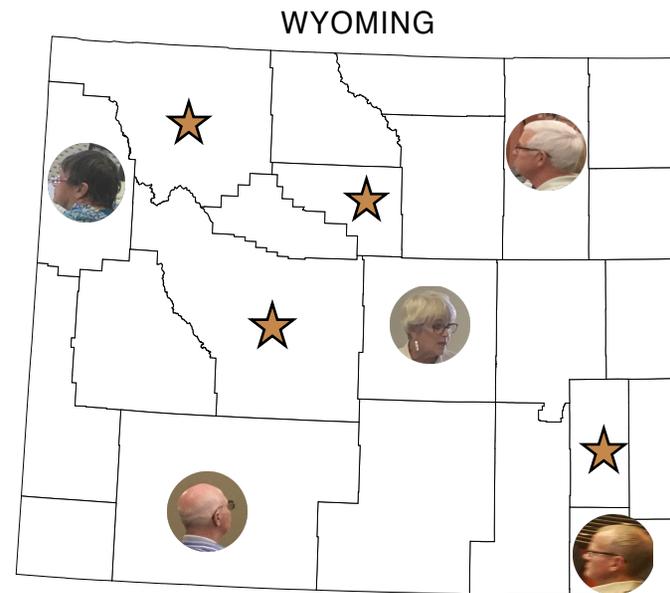


Figure 1. Locations of town hall meetings from which data was collected. Photos represent locations where quotes originated. Stars represent locations of other town hall meetings.

Access to Specialized Care Facilities

"I had to move mom three times in five years to a higher care facility. She was first in assisted living and then she had to go to a secure assisted living, and then she had to go to a nursing home environment where she could receive hospice care. That is really hard on a person with dementia. We don't have anything in this part of the state at all, any transitional facilities."

Home Health Services

"There really are not a lot of in-home services here for people with dementia. Not a lot even with home healthcare. Even if they're doing a security check in the morning, I go out at night. It's just hard to keep those, without family, safe with Alzheimer's in their own homes."

Geriatric Assessment

"That's what we need, is definitely more doctors. And doctors that are geriatrician focused. And we need better mental health services. With doctors and psychiatrists who are trained in geriatrics."

Respite Adult Day Services

"Something we noticed right away was there's no respite care for the caregivers unless you pay out of pocket."

Financial Barriers

"It all comes down to money, you know? When you get right down to it, there's a lot of information out there and a lot of very knowledgeable people, but it costs money."

4. Results

Participant Characteristics

- Wyoming residents ($n = 174$)
- Non-Hispanic ($n = 157$, 94.1%)
- Female ($n = 126$, 72.7%)
- Health professionals or administrators ($n = 48$, 27.6%)
- Caregivers or community members ($n = 84$, 48.3%)
- Other ($n = 42$, 24.1%)

Thematic Analysis

- Saturation was achieved and coding reliability exceeded 90%.
- Seven primary themes emerged. See Figure 1 for recordings of quotations recorded at the town hall meetings representing themes.
- Primary Themes Include:
 - Specialized Care Facilities
 - Geriatric Mental Health
 - Home Health Services
 - Geriatric Assessment
 - Respite and Adult Day Services
 - Care Coordination
 - Financial Barriers to Care

5. Conclusions

- Seven primary areas for intervention were identified from participant perspectives.
- The need for specialized, affordable, and convenient care is growing increasingly prevalent across the Rocky Mountain West.
- Recommendations for remedying this need include recruiting and improving existing facilities to increase the number of long-term care facilities, reducing regulatory barriers, increasing the size of the specialized workforce, and making long-term care more affordable in rural regions across Wyoming.



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