

A meaningful response

The Debenham Project, Suffolk

Introduction

Dementia is a grave and rapidly growing problem amongst the elderly. In May 2015 an estimated 850,000 people in Britain were living with dementia – that number is expected to exceed one million by 2051. Every community is affected, and services are already overwhelmed by the burden and impact of the disease.

Dementia demands a new approach, one which involves effective collaboration between agencies and local communities. How can we bring about a meaningful collective response to dementia that sustains patients and their loved ones?

Origins of the project

The Debenham Project is a grass-roots initiative which supports dementia sufferers and their families in the village of Debenham, Suffolk. The scheme was launched in 2009 by Lynden Jackson in recognition that dementia is not just a national problem, but a local one.

The project's catchment area is approximately 50 square miles, serving a population of about 2,100. Core annual costs are £8,500, covering administration, insurance, accommodation and venue hire. Initially the Local Strategic Partnership provided £7,500. Currently funding stems from Suffolk County Council, Suffolk Foundation, Sports Relief and personal donations.

Partnership working

Close ties with the community have been established, with the local church a key institution. There are also good links with health service professionals and the voluntary sector. The local GP surgery is very supportive, while a councillor with personal experience of dementia has laid the foundations for a constructive partnership with the county councils and its adult social care services.

Approach and delivery

The Debenham Project runs activities for over 200 person sessions each month (an individual attending an activity constitutes one session). The scheme has 97 registered volunteers, many with particular skills such as graphic design or bakery. Participation doesn't require a formal diagnosis of dementia.

The initiative's overt aim is to help all patients and families in the local area that are coping with the impact of dementia, offering emotional and practical support. This approach often indirectly addresses related issues such as the isolation and loneliness that older people often experience.

The project has not developed a single point of focus, for example a day centre, but is woven through the community, working in several locations and across many different activities. The goal is to provide an integrated response that transcends traditional service limitations.

As a result of the project's strategy, there is a sense of community ownership and responsibility for jointly tackling the pervasive challenge of dementia. A local shop keeper is now likely to contact the family of a dementia sufferer who might have become confused in their shop, rather than just leaving them to manage on their own.

Success and outcomes

Awareness of dementia has been increased in the local area, and other communities have been encouraged to take a similar strategy. The Debenham Project's work has been recognised at county level, for its innovative approach to dementia care in, by, and for the community. Nationally, Debenham was accepted as one of the first 'dementia friendly communities' of the Prime Minister's Challenge on Dementia.

The project describes its achievements in terms of reducing demand on public services, and the scheme's ultimate goal is to avoid dementia sufferers being taken into hospital or remote nursing care. A simplistic comparison is also possible between the costs of the project per head of population, which are about £4, and the health and social care budget for the elderly in Debenham, of approximately £3000 (£6.7m per annum).

Future plans and obstacles

The project reaches around 65% of local families who are dealing with dementia – yet it has been estimated that there are about 100 people with dementia in the GP catchment area, and as many as a quarter are unaware of their condition.

“This is a significant minority whom we will be unable to reach,” says Jackson. “They may not have developed diagnosable symptoms yet. Their family may be concerned. They may not wish to engage – or maybe they are coping.”

Debenham is a relatively affluent area, so there are questions over the additional challenges in extending a similar approach to areas of deprivation.

Conclusion

The Debenham Project illustrates the role of collective action and providing a real community context for dementia. This kind of initiative, along with programmes such as the Age Friendly City initiative in Manchester, friendship circles, good public transport systems, warm and safe places for community meetings are essential elements of a robust approach to aging well. They draw on the resilience of families, goodwill of communities and strong social bonds, and cannot be addressed by medical intervention or clinical approaches.

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