HOW NATIVE PEOPLE LIVING WITH DEMENTIA MIGHT EXPERIENCE EMERGENCIES

Understanding the mental, physical, social and emotional experiences of people living with dementia during emergency situations can help Tribal planners and policy makers ensure their services are inclusive, equitable and have the best outcomes.

MAY BE UNABLE TO PROCESS INFORMATION

May have limited ability to understand directions and may forget them.

HAVE MEMORY

recently learned information. They often need clues about daily activities,

> **MAY EXPERIENCE** PAIN DIFFERENTLY

May have a hypersensitive

pain response that they are

not able to communicate.

BECOME UPSET OR AGITATED

Heightened emotions or confusion due to unfamiliar settings can lead to agitation.

Chronic conditions, such as diabetes or heart disease, are common among people with dementia. Many people with dementia, and those who care for them, may be managing multiple health issues that must be considered.

ARE LIKELY TO HAVE ADDITIONAL HEALTH ISSUES

MAY HAVE DIFFICULTY COMMUNICATING SYMPTOMS

May not recognize or be able to communicate that they have been injured or are unwell.

EMERGENCY

SITUATIONS

PEOPLE WHO LIVE

WITH DEMENTIA:

MAY HAVE DIFFICULTY INTERPRETING WHAT THEY HEAR OR WITH VISION

Loud, noisy rooms or situations may be disorienting. They may have a smaller field of vision.

MAY HAVE **DIFFICULTY WITH MULTIPLE TASKS**

This can pose difficulty in following a plan.

MENTAL







CAN BE STRESSED, FRUSTRATED, AND OVERWHELMED

This can be due to a reduced individuals' ability to recognize their environment and understand the context of the situation.

MAY WANDER OR BE PRONE TO GETTING LOST

Memory difficulty and likelihood of becoming confused puts people at risk. The stress of emergency situations increases a person's potential to wander or hide

MAY BE MORE LIKELY TO BECOME DEPRESSED

Due to changed abilities, autonomy and isolation, some people living with dementia may become depressed.

CAN DEVELOP DELERIUM EASILY OR HAVE HALLUCINATIONS

Reorienting someone may be less effective than working with them in their reality.

MAY RELY HEAVILY ON FAMILY MEMBERS OR CAREGIVERS

Without their caregivers, people with dementia are at higher risk for poor health, injury, abuse and isolation. Complicating matters, they may not be able to remember their caregiver's name or how to reach them.

Reference: National Indian Health Board. (2021). Supporting American Indians and Alaska/native Who Live with Dementia: Policy Tips and Resources for Your Tribal Emergency and Disaster Response. Pp. 6

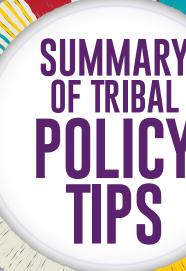
DIFFICULTIES

People may forget even hydration.

TRIBAL POLICY TIPS FOR EMERGENCY MANAGEMENT

POLICY TIP #1:

When requesting an emergency declaration and assessing the type of federal assistance that may be needed, consider the amount and type of assistance that will be required to support those in your Tribal community who live with dementia, ranging from communications, shelter and evacuation assistance to continuity of medical services.



2 POLICY TIP #2:

When identifying populations that may need specific services in disaster or emergency situations in planning documents, avoid terms such as "disabled" that may contribute to stigma. Seek out words or phrases in the Native language that may best fit the policy need.

POLICY TIP #3:

Adopt a function-based approach, or one that is based on individuals' capabilities rather than labels when defining special populations in Tribal emergency operations plans and policies.

POLICY TIP #4:

Consider **CONNECTION** (to people, culture and nature) as a functional need during emergencies or disasters to preserve the protective effects of culture and belonging.

POLICY TIP #5:

Review and update Tribal emergency plans and procedures to include and accommodate American Indian and Alaska Native people who may have functional needs during an emergency.

POLICY TIP #6:

Considerations for the development and use of identification systems should include clear stipulations for:

- With whom the information will be shared.
- How information will be used.
- Security measures in place for protecting information.
- The type of help that might be available.
- Limitations on help (i.e., [if] help is not guaranteed).

TRIBAL POLICY TIPS FOR ACKNOWLEDGING PEOPLE'S UNIQUE VULNERABILITIES

7 POLICY TIP #7

Incorporate culturally relevant dementia education and trauma-informed skill building in trainings for emergency responders.

8 POLICY TIP #8

Create Tribal emergency communication polices to direct the use of a variety of communication methods and strategies to be inclusive of American Indians and Alaska Natives who live with dementia.

POLICY TIP #9:

With the input of Tribal members living with dementia and their caregivers, examine and evaluate the design of facilities to increase access, simplify processes, connect to culture and reduce environmental stressors.

POLICY TIP #10:

Enable Tribal emergency policies that maintain a sense of familiarity, routine and security for those who live with dementia.

TRIBAL POLICY TIPS FOR ACKNOWLEDGING THE ROLE OF CAREGIVERS

1 POLICY TIP #11:

Recognize and treat caregivers as partners by Tribal health, social service, public safety and emergency personnel.

2 POLICY TIP #12:

Create or extend Tribal policies to provide physical, emotional and financial relief for caregivers during emergencies.

13 POLICY TIP #13:

Create or amend health facility policies to provide the best possible scenarios to maintain the physical, social and emotional connection between the patient and caregiver.

Reference: National Indian Health Board. (2021). Supporting American Indians and Alaska/native Who Live with Dementia: Policy Tips and Resources for Your Tribal Emergency and Disaster Resource. Pp. 6-9.