

# Public dementia care in terms of equal services – family, local and multiethnic perspectives

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## **Name of Fellow**

Bodil Hansen Blix

## **Institution**

### **Funder**

RCN

## **Contact information of fellow**

### **Country**

Norway

## **Title of project/programme**

Public dementia care in terms of equal services - family, local and multiethnic perspectives

## **Source of funding information**

RCN

## **Total sum awarded (Euro)**

€ 364,204

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01/02/15

## **Total duration of award in years**

3.5

## **The project/programme is most relevant to:**

Neurodegenerative disease in general

## **Keywords**

dementia related diseases | care-givers | health care services | sami population

## **Research Abstract**

Most persons with DRD live at home, in accordance with current health policy. Relatives can be deeply affected by the disease in their next of kin, and it is known that early support to relatives can contribute to prevent health problems and burnout and make it possible to sustain their role as informal caregivers. A number of public health care services targeting relatives and persons with DRD are already established. Access to health care services has a tendency to vary inversely with the needs in the population served. It is a public policy goal to reduce inequalities in access to and use of services. A sound understanding of how services interact with the needs of informal caregivers is required in order to tailor the needs in families where a person is affected by DRD and secure that relevant services are taken into use. This is described as especially true in areas with a Sami population. This study will provide knowledge about local and individual differences in use and non-use of services as well as explore practice conditions to reveal and explain similarities and differences between communities, ethnic and social groups. A use of both qualitative and quantitative methods is appropriate as it gives the opportunity to investigate convergent, diverse and contradictory findings: Quantitative data from selected communities will be collected in order to describe, analyze and compare the level and use of public health care services as well as the situation in the families where a person has DRD. The project will provide qualitative data to examine the statements in Public documents about what affects the interaction between Public service providers and Sami families and whether Sami kinship traditions influence the use of Public services. The results will inform user and politicians, strengthen the knowledge base in Health care services and contribute to confidence building at a micro level, which is a prerequisite for equity and justice at the macro level.

**Types:**

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