

Dementia-Friendly Neighbourhood Designs: Local Study Utilising Whole-of-Community Approach

The key issue

Existing local building codes and guidelines contain elements of Universal Design which increase accessibility of outdoor environments to people with mobility issues. However, design principles that include cognitive accessibility are currently limited due to lack of guidance in this aspect locally.

What is the AIC-CLC Dementia-Friendly Neighbourhoods Study?

To address this gap, AIC is partnering with the Centre for Liveable Cities (CLC) to conduct the AIC-CLC Dementia-Friendly Neighbourhoods Study, with research implementation led by the Singapore University of Technology & Design (SUTD). This study, which began in 2019, is being conducted on a pilot site in a Yio Chu Kang housing estate. This area was selected for its existing catchment of senior residents living there, the support of advisors and local grassroots leaders, as well as the presence of service providers.



	CLC	AIC	SUTD
Roles	Scope research, oversee project management and convene stakeholders to translate and apply findings	Advise and connect community partners, healthcare practitioners and experts on dementia/dementia-friendly designs	Design and conduct research project
	Co-produce dementia-friendly design guidelines	1(())(

We speak to Elly Chiu and Lim Ren Ai from CLC as well as Tan Hong from AIC to get their insights on the study.

How would you define a dementia-friendly neighbourhood?

A dementia-friendly neighbourhood is one that enables persons living with dementia to navigate safely and engage meaningfully with their community. It allows them to age in their chosen place by reducing the need for early institutionalisation.

Dementia-friendly designs will aid in better wayfinding, accessibility, safety and social bonding — for persons living with dementia and the general population. What is inclusive for persons living with dementia, is inclusive for all.

What is one challenge that your team has faced in running this study, and how has the team managed to overcome this?

A dementia-friendly neighbourhood involves "hardware" (buildings and infrastructure), "software" (programming and services) and "heartware" (community networks).

To achieve this, we have involved stakeholders from multiple sectors right from the onset, to hear from them and co-develop ideas and solutions with them. A key difference in this study is how we have successfully engaged persons living with dementia on a first-person basis for their views and participation in the research.

We had adopted novel research methods that allowed persons living with dementia to communicate their daily routines through non-verbal ways, including engaging in a series of pictorial exercises and accompanied walks. AIC and CLC are continuously working closely with healthcare partners, social service agencies, grassroots, Town Council, government agencies and the Yio Chu Kang community to ensure the neighbourhood is inclusive for all.

Of course, it can be challenging to incorporate feedback from multiple stakeholders meaningfully. To address this challenge, what we found helpful was to hold regular consultation sessions with stakeholders to provide timely updates, gather feedback and incorporate their perspectives into the study's learnings.

How has this study benefited our community partners?

The AIC-CLC study will test and develop dementia-friendly design principles that are contextualised to Singapore's high-density, high-rise public housing estates and neighbourhoods. This will help builders and town planners design outdoor environments that enable persons living with dementia and other seniors to lead active and engaged lifestyles in their communities for as long as possible.

This in turn supports community care partners in Yio Chu Kang and beyond to build Dementia- and Age-Friendly environments, so that they can conduct activities and engage their clients meaningfully in alternative environments beyond their own care facilities.

Indeed, to achieve a Dementia-Friendly society, a whole-of-community approach is needed — one which involves persons living with dementia, caregivers, service providers, agencies, community groups and neighbours.