

Black elders dismiss the warning signs of dementia until the condition becomes too severe to ignore or a crisis strikes. They are also less likely to receive a diagnosis of their condition, resulting in delayed treatment and less time to plan for the future.

Our [latest BITE](#) - a summary of published CLAHRC research provides an overview of our work with black elders, their families and carers to;

1. identify barriers and facilitators to seeking help for dementia.
2. based on what we found, work with dementia patients and their carers, volunteers from the public, clinicians and experts in the treatment and research of dementia to develop an intervention - a leaflet entitled **Getting help for forgetfulness** (below)
3. trial the intervention with GP registered patients, who were asked to rate it and evaluate its effect on their intention to seek help from their doctor.



## Getting help for forgetfulness

Forgetfulness is common, particularly as we get older. Often this is nothing to worry about.

However, forgetfulness that interferes with your daily life is not a normal part of getting older.

*"I used to leave the keys in the door. Sometimes I forget that I am cooking and I just go."*

Regardless of your age, frequent memory lapses could be a sign of physical illness, stress or dementia.

If you or someone you know is more forgetful lately, it is important to see your GP.

### Why go to your GP?

**The earlier you see your doctor the sooner you can get help if you need it, or be reassured if nothing is wrong.**

Members of the Black community spoke of their reasons for not going to the doctor with memory concerns:

*"When it comes to the GP... [and] you think it could just be a mild problem... you would just feel that you're wasting the GP's time."*

**You will not be wasting their time as talking to your GP is the first point of contact for a referral to a memory specialist.**

*"All he's going to do is probably give me tablets or whatever it is."*

**Normally, your GP won't immediately prescribe medication for your memory but they can do some blood and memory tests.**

*"If I ask for help, I'm taken away from my own home."*

**If your doctor suspects you may have significant memory problems they can refer you to a memory clinic whose role is to keep people at home and provide help to maintain independence.**

*"This is a white, old white peoples' disease, it's not seen as black people have dementia."*

**Unfortunately, black people in the UK are more likely to develop dementia at an earlier age. So the earlier you seek help the better.**

### What is dementia?

**Dementia is usually caused by disease in the brain. It is a physical illness like diabetes or arthritis that affects people of all ethnicities.**

It is more common as you get older but most older people do not have it as it is not a natural part of aging.

Usually, dementia gradually gets worse, causing problems with:

- Memory
- Carrying out everyday tasks, like handling money and finding directions
- Communication – difficulties finding the right word
- Paying attention and concentrating
- Changes in personality and mood

There are many types of dementia such as Alzheimer's disease and vascular dementia. Currently, most can not be cured, but like diabetes or arthritis, there are treatments available that can help maintain independence and choices.



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National Institute for  
Health Research

# CLAHRCBITE

Brokering Innovation Through Evidence

## How can we improve dementia care in UK black elders?



**Black elders dismiss the warning signs of dementia until the condition becomes too severe to ignore or a crisis strikes. They are also less likely to receive a diagnosis of their condition, resulting in delayed treatment and less time to plan for the future.**

This is of great concern for black families whose older relatives are more likely to develop dementia than their white counterparts, and for health professionals who strive to improve the care of their black patients.

By working together with patients and the public we aim to promote early help-seeking for dementia in black African and Caribbean families.

### What was the aim of the project?

Because we know that a group culture guides its members' understanding of and behaviour towards health and ageing, we first set out to understand the cultural factors influencing how black adults respond to the warning signs of dementia.

We then devised an instrument rooted in what members of the black community told us that promotes early help-seeking for dementia. To finish, we compared black elders' evaluations of the instrument against another that was not specifically designed for a black audience.

### What did we do?

The full project comprised 3 phases:

In phase 1, we held multiple qualitative interviews and focus groups with 50 African and Caribbean adults with diverse socio-demographic characteristic and from different background in an attempt to identify barriers and facilitators to seeking help for dementia.

In phase 2, we used interviewee's responses to tailor an intervention targeted at a black audience, which we later refined by incorporating feedbacks and comments from dementia patients and their carers, volunteers from the public, clinicians and experts in the treatment and research of dementia.