

System Dynamics of Diminishing Family Size on Living Arrangements of Singaporeans with Age-related Dementia

James P. Thompson, Crystal M. Riley, and David B. Matchar Health Systems Design Laboratory

Integrating different conceptual frameworks to increase understanding

 Contributing disciplines—sociology, demography, medicine, epidemiology, health policy, statistics

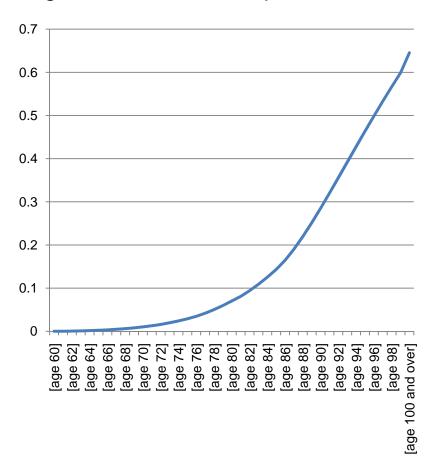
 Structure to simulate severity of condition in dynamic population and estimate effect on living arrangements



Age-related Dementia

- Dementia progressive loss of brain function
 - Mild stage ~ 2 years
 - Moderate stage ~ 4 years
 - Severe stage ~ 7 years
- Incidence increases with age over 60 years
- Prevalence by age grows exponentially with increasing incidence and longer life expectancy

Age-related dementia prevalence



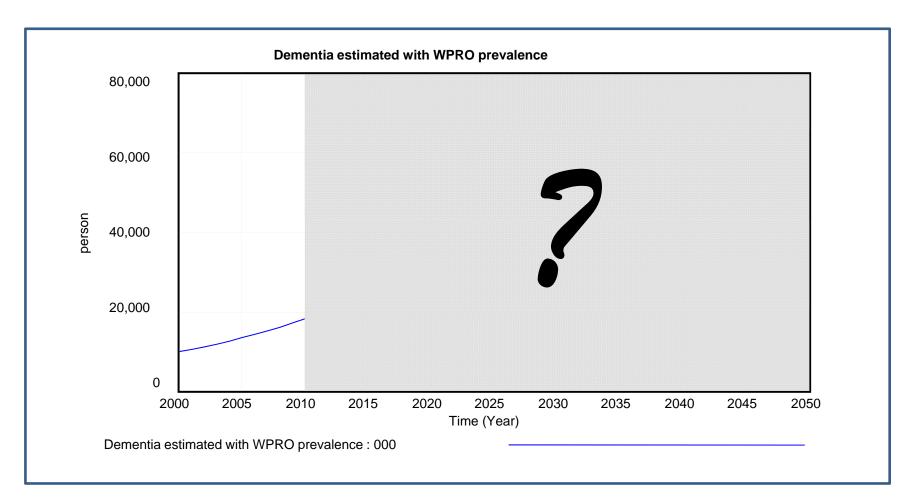


Project Goals

- Investigate current care and treatment and develop policies ->
 - Increase patient socialisation and reduce patient isolation
 - Increase care alternatives that reduce burden on formal and informal caregivers
 - Measure benefits and control costs

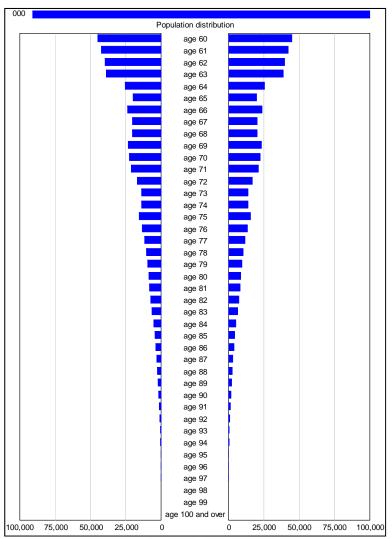


Age-related Dementia in Singapore





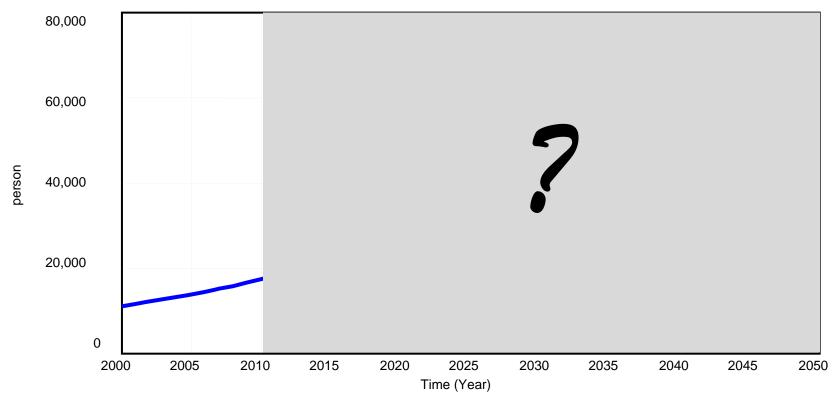
Ageing in Singapore





Age-related Dementia in Singapore

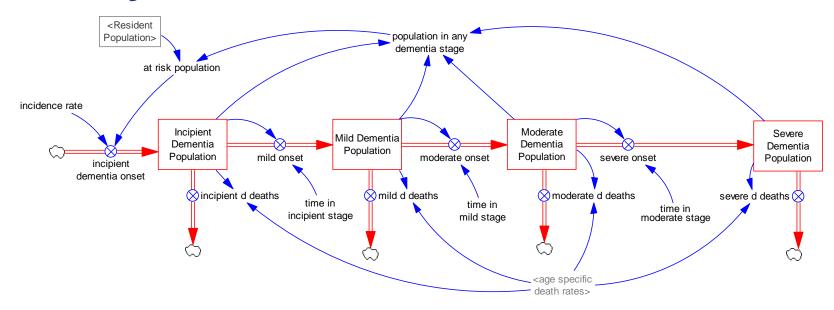
Dementia estimated with WPRO prevalence

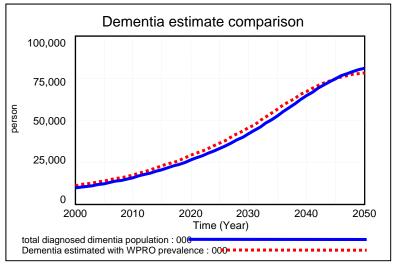


Dementia estimated with WPRO prevalence: 000



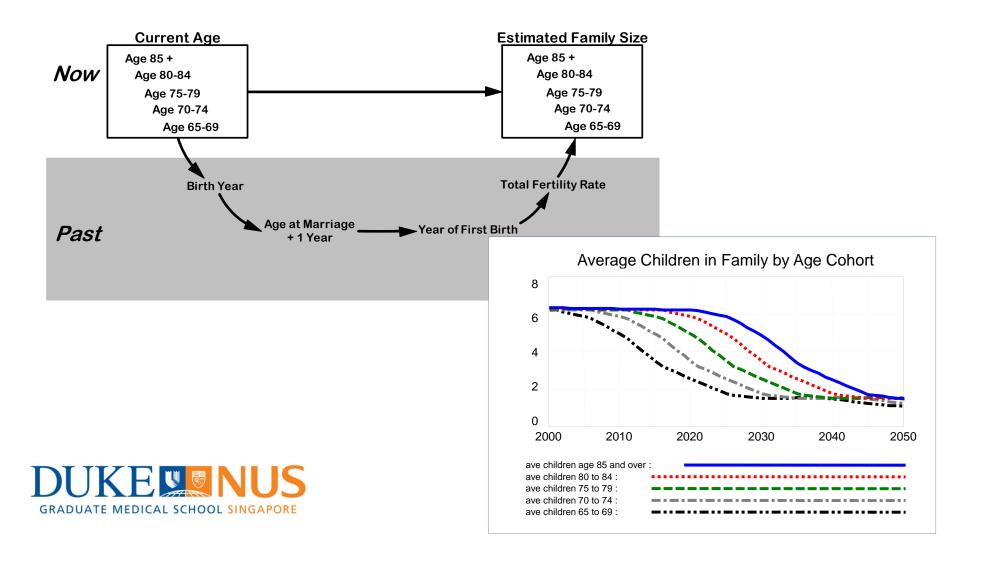
Aggregate dementia population by severity of condition



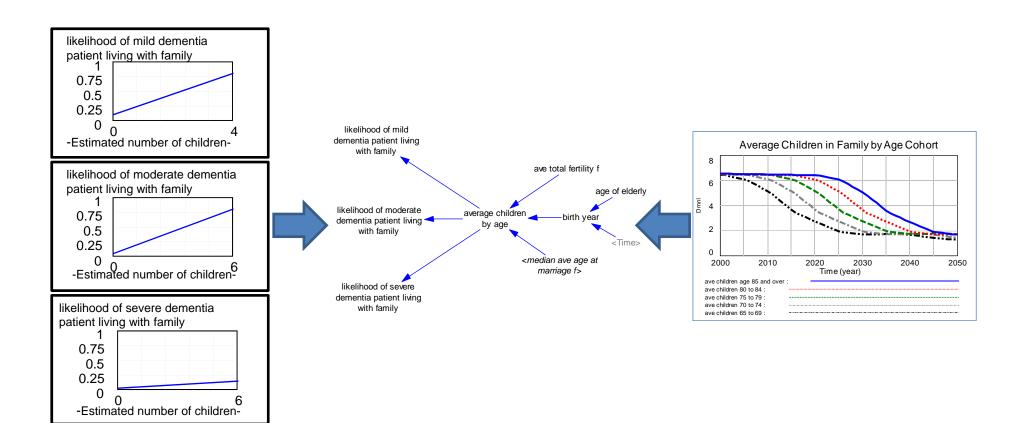




Current family size estimated with historical total fertility rate

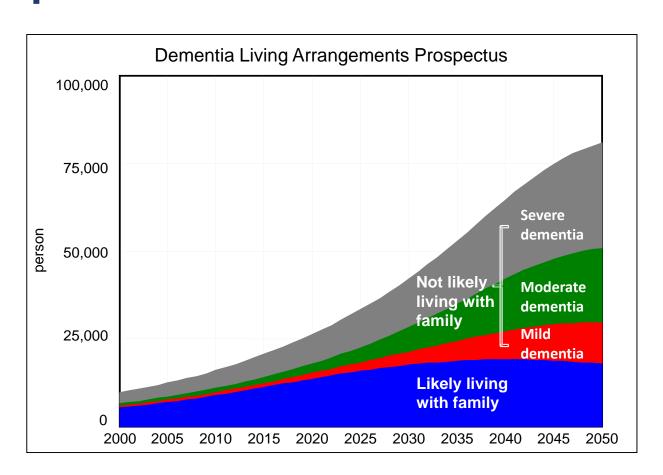


Likelihood of dementia patient living with nuclear family member





Where will we live when are old and dependent?











Next steps

Why do dementia patients live where they live now?

Test effect of care alternatives







