National Dementia Action Plan: overview

This document provides an overview of the National Dementia Action Plan 2024-34 (the Action Plan), a 10-year roadmap to improve the life and care of people with dementia in Australia.

# About the Action Plan

The Action Plan comprises 8 actions that provide the opportunity to make genuine and enduring positive changes to improve the quality of life for Australians living with dementia. Everyone has a role to play in supporting the Action Plan. Governments at all levels, along with service providers, businesses, the community and non-government sector can support people living with dementia, their families and carers.

Dementia is a growing health problem, and it has a significant impact on individuals, families and carers. More than 400,000 Australians live with dementia, with this number set to more than double by 2058.

## Development

The Action Plan is informed by extensive consultation with people with dementia, and their families and carers, as well as peak bodies, health professionals, researchers and aged care and disability support providers.

## Implementation

The Action Plan is a shared plan between the Australian, state and territory governments. It will be implemented through a series of implementation plans. The first implementation plan will target areas that stakeholders have identified as immediate needs. It will be released in 2025.

## Monitoring and evaluation

The National Centre for Monitoring Dementia, at the Australian Institute of Health and Welfare, will collect data and monitor progress against the Action Plan. The Centre will publish and maintain a web-based Action Plan Dashboard, which will be updated each year to report on the measures of progress.

# The actions

The Action Plan consists of 8 high level actions aimed at increasing dementia awareness, reducing the population’s risk of dementia, and driving better coordinated services for people living with dementia, and their families and carers.

Action 1: Promote equity and human rights

Action 2: Tackle stigma, improve awareness and promote inclusivity

Action 3: Empower individuals and communities to minimise risk where they can, and delay onset and progression

Action 4: Improve dementia diagnosis and post‑diagnostic care and support

Action 5: Improve treatment, coordination and support for people living with dementia

Action 6: Support carers of people living with dementia

Action 7: Build capability of the workforce to care for and support people living with dementia

Action 8: Improve dementia data, maximise the impact of dementia research and promote innovation

## Action 1: Promote equity and human rights

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| **Outcome statement for people living with dementia**  My rights are upheld. I have a sense of autonomy, meaning and identity, and live a life free from inequality and abuse. I can access the information, supports and services that meet my needs and preferences. I can access culturally safe and holistic care. | |
| **How are we going to make a difference?**   1. Involve people living with dementia in reform including the identification, development and evaluation of actions within the Action Plan. 2. Promote and improve access to resources for supported decision making to better enable people living with dementia to exercise choice and make decisions that affect their lives. 3. Incorporate a human rights basis and supported decision making principles in drafting a new Aged Care Act. 4. Maintain and improve strategies to ensure people living with dementia are free from all forms of degrading or inhumane treatment, violence, exploitation, neglect or abuse. 5. Improve access to culturally appropriate dementia information, care and support for First Nations people and communities that acknowledges their unique needs in relation to information, diagnosis and care. 6. Align initiatives and funding models for First Nations people with the Priority Reforms of the National Agreement on Closing the Gap and National Aboriginal and Torres Strait Islander Health Plan 2021-2031. This will facilitate the growth of the community controlled sector to support First Nations people living with dementia and implement community led, place-based approaches to dementia care and support. 7. Improve access to culturally appropriate dementia information, care and support for CALD and other diverse communities that meet their needs for dementia awareness, risk reduction, diagnosis and care. 8. Improve alignment of initiatives and funding models for people with dementia with Australia’s Disability Strategy 2021–2031 where appropriate. This will ensure people with disability living with dementia can fulfil their potential, as equal members of the community. | |
| **Need for change** | Equity and human rights are at the heart of making life better for people living with dementia. This means making sure they can get to health and aged care services and that their independence and choices are protected. |
| **Where do we want to be in  10 years?** | All levels of Australian society protect and promote equity and the human rights of people living with dementia and their carers so they can feel safe and empowered to live independently with respect, equity and dignity, free from abuse. Everyone living with dementia has equitable access to quality dementia care and supports that meet their needs and preferences. |
| **How will we know if we have made a difference?** | 1. People living with dementia feel they have more control over their lives. 2. Increased access to and understanding of supported decision making for all people living with dementia, including for First Nations, CALD and other diverse communities. 3. Increase in availability and use of appropriately targeted and culturally appropriate resources on dementia, including government resources, for First Nations, CALD and other diverse communities. 4. People in regional, rural and remote settings have improved access to dementia diagnosis and support. |

## Action 2: Tackle stigma, improve awareness and promote inclusivity

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| **Outcome statement for people living with dementia**  I feel safe and engaged in society, and I have a sense of meaning and identity. I live a life free from stigma, discrimination and abuse. | |
| **How are we going to make a difference?**   1. Expand awareness about dementia, including lived experience storytelling, to improve dementia understanding across the Australian population. 2. Partner with people living with dementia and their carers to develop, co-design, test and tailor dementia related communications. 3. Partner with people living with dementia including First Nations people, CALD communities, women and girls, young people, people with disability and LGBTIQA+ communities to co-design, test and tailor dementia awareness information and resources. 4. Improve the uptake of dementia enabling design and practices in aged care and disability support services, hospitals, public spaces, businesses and local services. This will maximise opportunities for participation by people living with dementia. | |
| **Need for change** | We want to make sure everyone understands, accepts and is aware of dementia. This means people living with dementia can be a part of the community and enjoy life with meaning and dignity. |
| **Where do we want to be in  10 years?** | Australia is a dementia inclusive society that understands people living with dementia and their carers. It actively enables them to fully participate in society and supports them to live independently in their communities for longer. |
| **How will we know if we have made a difference?** | 1. Reduced stigma and improved attitudes among Australians towards people living with dementia. 2. Improved knowledge among Australians about what dementia is and how it affects people living with dementia. 3. Increased willingness of people to:   a) seek help if they think they have symptoms of dementia  b) share their dementia diagnosis.   1. Increased number of dementia friendly communities. 2. Decreased number of people living with dementia experiencing stigma, discrimination and abuse. |

## Action 3: Empower individuals and communities to minimise risk where they can, and delay onset and progression

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| **Outcome statement for people living with dementia**  I am supported to take steps where I can maintain a healthy lifestyle, minimise risks and delay the progression of dementia. | |
| **How are we going to make a difference?**   1. Improve Australians’ awareness of risk factors and preventive actions that can be taken to reduce the risk of developing, delay the onset or slow the progression of dementia. This includes health promotion and prevention programs which support overall health. 2. Promote the brain health benefits of people regularly and safely participating in sports, exercise and movement. 3. Increase awareness of strategies to improve brain health and establish whole of population brain health approaches for earlier dementia detection and intervention. 4. Develop targeted strategies and messages for people from diverse communities or at higher risk of developing dementia in partnership with relevant communities. 5. Implement evidence-based interventions to reduce the risk of dementia, including for higher risk populations and people with mild cognitive impairment (MCI). | |
| **Need for change** | Getting older is just one factor that can lead to dementia. Things like our health, environment, and genetics can also play a part. |
| **Where do we want to be in  10 years?** | People understand the factors that increase their risk of dementia and are supported to take actions to reduce risks where they can across all stages of life. |
| **How will we know if we have made a difference?** | 1. Improved knowledge among the general population and communities at higher risk of developing dementia about risk factors for dementia. 2. Increased understanding in the primary care workforce of ways to reduce the risk and delay the onset of dementia. 3. Increased number of Australians taking steps to reduce their risk of developing dementia. |

## Action 4: Improve dementia diagnosis and post‑diagnostic care and support

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| **Outcome statement for people living with dementia**  I can recognise the signs of dementia and understand where to go if I have concerns. I can access health professionals who are willing and able to assess my symptoms and provide a timely diagnosis. I am linked with information and supports to assist me, my carer and my family immediately following a dementia diagnosis. | |
| **How are we going to make a difference?**   1. Review and update clinical practice guidelines and principles of care for people living with dementia every 3 to 5 years. 2. Review how the Medicare Benefits Schedule (MBS) and Pharmaceutical Benefits Scheme (PBS) support effective dementia diagnosis and ongoing management every 3 to 5 years. 3. Clarify pathways for dementia screening, assessment and diagnosis across the country, including identification of best practice. 4. Increase the capacity and reach of memory clinics and review the funding model. 5. Embed memory clinics in targeted Aboriginal Controlled Community Health Organisations (ACCHOs) and Aboriginal Controlled Community Organisations (ACCOs) to support improved access, diagnosis and care for First Nations people. 6. Develop and promote culturally appropriate cognitive assessment tools in partnership with diverse communities and experts, and support training for clinicians to use these tools. 7. Improve support, care coordination and planning for people living with dementia and their carers following a dementia diagnosis, including models for First Nations, CALD and other diverse communities. 8. Improve diagnostic and post-diagnostic services and supports for groups facing additional barriers to care, such as people living with younger onset dementia and children living with dementia and their families. 9. Improve and embed supports for people living with dementia in disability support services. | |
| **Need for change** | Finding out about dementia early is essential. Support from health, aged care, and disability services should help people living with dementia to enjoy their lives as much as possible. |
| **Where do we want to be in 10 years?** | Dementia signs are recognised, and people are diagnosed as early as possible, helping them to slow the progression, maximise their abilities and plan for the future. People are provided with information and connected to coordinated supports immediately following their dementia diagnosis. |
| **How will we know if we have made a difference?** | 1. Improved national consistency in services offered across memory clinics for assessment and post-diagnostic care and support. 2. Increased number of people being assessed for dementia in memory clinics. 3. Increased number of First Nations people seen and supported through memory clinics, including through clinics embedded in ACCHOs and ACCOs. 4. Increased number of people with signs and symptoms of dementia who are seen by a specialist within three months of receiving a referral. 5. Reduction in the average time taken for people to receive a diagnosis of dementia from the onset of first symptoms. 6. Increased number of people living with dementia with a chronic disease management plan in place with their GP. 7. Increased number of people living with dementia and their carers reporting a positive experience of diagnostic and post-diagnostic care. 8. More people living with younger onset dementia and children with dementia are accessing and satisfied with diagnostic and post-diagnostic services and supports, including through disability services. |

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## Action 5: Improve treatment, coordination and support for people living with dementia

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| **Outcome statement for people living with dementia**  I have hope and access to necessary supports to live as well as possible with dementia, even as my abilities and needs change. I have support to make, communicate and participate in decisions regarding the services I receive. | |
| **How are we going to make a difference?**   1. Identify, develop and promote early intervention, reablement approaches, restorative care supports and resources for people with MCI and dementia. 2. Provide flexibility in the way dementia supports are delivered, including through outreach models and innovative use of technology. 3. Enable best dementia care practice in aged care and disability support services, focused on enhancing the quality of life, wellbeing and safety of people living with dementia and that meets their social and cultural preferences. 4. Support aged, disability and health care providers in residential care and community settings as well as informal carers to better understand and respond appropriately to the needs of people living with dementia. This includes changes in behaviours and environments, without inappropriate use of restrictive practices. 5. Improve services for people with more complex or severe behavioural and psychological symptoms of dementia, including increasing the availability of appropriate residential care and innovative models of care. 6. Improve interfaces and information sharing between primary care, disability support, aged care and hospital settings at a system-level to improve integration and continuity of care. 7. Identify the needs of people living with dementia at entry to hospital. Have supports, structures and care in place to reduce the potential risk of harm, provide a person-centred approach to care and ensure safe and effective transitions into and from hospital services. 8. Identify, clarify and promote improved pathways and options for palliative care for people living with dementia. 9. Promote culturally appropriate palliative care options, advice and resources about advanced care planning and palliative care for First Nations, CALD and other diverse communities. | |
| **Need for change** | Working together and sharing information between health care, aged care, and disability support is key to helping people living with dementia. |
| **Where do we want to be in  10 years?** | People living with dementia and their families are connected to coordinated, dementia inclusive services that meet their individual and changing needs. People living with dementia have autonomy and are supported to make decisions about their care and other supports, if and when they need them. |
| **How will we know if we have made a difference?** | 1. Improved coordination of care for people living with dementia. 2. People living with dementia and their carers find it easier to navigate the health, aged care and disability support systems to access the services and supports they need. 3. Increase in people from First Nations, CALD and other diverse communities having access to suitable dementia services and supports. 4. Improved primary health care system experiences and outcomes for people living with dementia. 5. Increased number of people living with dementia with regular medication reviews. 6. Improved hospital and transition experiences and outcomes for people living with dementia, such as reduced number of avoidable hospitalisations and decreased inappropriate long term hospital stays. 7. Improved aged care experiences and outcomes for people living with dementia. 8. Decreased number of people living with dementia who experience use of inappropriate restrictive practices in aged care. 9. Improved advanced care planning and palliative care for people living with dementia. 10. Increase in culturally appropriate advance care planning and palliative care for people living with dementia from First Nations, CALD and other diverse communities. |

## Action 6: Support carers of people living with dementia

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| **Outcome statement for people living with dementia**  My carers are well supported and able to maintain their own health and wellbeing. My carers and I are able to maintain a meaningful and mutually beneficial relationship. | |
| **How are we going to make a difference?**   1. Ensure active engagement of carers as partners in care, including culturally safe and inclusive approaches. 2. Support carers and families to improve their knowledge of dementia and its progression through access to education and training, including targeted information for carers from First Nations, CALD and other diverse communities. 3. Improve respite options that better meet the needs of people living with dementia and their carers. 4. Improve the accessibility and user experience of My Aged Care, the Carer Gateway and the National Dementia Helpline. 5. Improve consideration of carer needs in aged care assessment processes and promote ways to reduce carer burnout and stress. 6. Improve access to emergency or transitional residential respite care from the community or hospital, including for carers from First Nations, CALD and other diverse communities. | |
| **Need for change** | Carers are big part of Australia’s health system, including our aged, disability, end of life and community care systems. They need the right information and help to handle the physical, mental, and social demands of their caring role. |
| **Where do we want to be in 10 years?** | Carers have the information, training and support they need to undertake their supporting role and maintain their own health and wellbeing. |
| **How will we know if we have made a difference?** | 1. Increased carer awareness, access and satisfaction with dementia support services and resources. 2. Increased access for First Nations carers to support services embedded in ACCHOs and ACCOs. 3. Increased availability and use of respite care by people living with dementia. 4. Increased access to and use of culturally appropriate respite care by people living with dementia and carers from First Nations, CALD and other diverse communities. 5. Increased support available for carers and family members of people living with younger onset dementia. 6. Improvements in self-reported wellbeing among dementia carers. |

## Action 7: Build capability of the workforce to care for and support people living with dementia

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| **Outcome statement for people living with dementia**  The people supporting me understand dementia and take time to learn about me and listen to my concerns. I am provided with care, support and information that meets my needs and is sensitive to my individual circumstances. | |
| **How are we going to make a difference?**   1. Strengthen dementia training, including embedding a dementia focus within core competencies, improve training pathways and provide mentoring and supervision opportunities for health, aged care, disability support and other workforces, including carers and volunteers. This will support best practice dementia care and support, capacity building and retention. 2. Support training pathways for carers and workers from First Nations, CALD and other diverse communities to enter the dementia care workforce. 3. Support training for the primary care workforce, including GPs, nurses and nurse practitioners, allied health professionals and Aboriginal and Torres Strait Islander Health Practitioners, to better meet the needs of people living with dementia and their carers. 4. Increase access to competency-based training and resources to improve dementia understanding for those working in key community services such as police, paramedics, firefighters, emergency services and correction services. 5. Encourage dementia awareness and training by local community services, including public transport, banks, post offices and other businesses to better support people living with dementia in their customer base. 6. Encourage organisational cultures of quality, safe, person-centred and culturally safe dementia care in health, disability and aged care services. | |
| **Need for change** | Having the right skills is essential to give the best care to people living with dementia and to respect their human rights. |
| **Where do we want to be in  10 years?** | The primary care, acute, community, disability, health and aged care workforces receive the training and support they need to provide high quality care to people living with dementia, their families and carers. Care focuses on optimising quality of life, is person-centred, culturally safe and delivered through a human rights based approach. |
| **How will we know if we have made a difference?** | 1. Increased training opportunities and resources about dementia available for the health, aged care, disability, and community services workforce. 2. Increased number of primary care, acute, aged care, disability, and community service workers undertaking dementia specific training. This includes Aboriginal and Torres Strait Islander Health Workers and Health Practitioners. 3. Increased capability of health, community services, disability and aged care sectors in working with people living with dementia. 4. Dementia care by mainstream providers to First Nations people is culturally safe. |

## Action 8: Improve dementia data, maximise the impact of dementia research and promote innovation

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| **Outcome statement for people living with dementia**  Research is focused on improving my life and the lives of other people living with dementia. I have the opportunity to participate in research. Innovative practices are in place to make it easier for me to live well with dementia. Dementia data is regularly reported so I can see if improvements are being made. | |
| **How are we going to make a difference?**   1. Encourage investment in research, innovation and research translation on prevention, risk reduction, diagnosis, treatments (including a cure), holistic care and management for all types of dementia. 2. Improve alignment of Australian dementia research priorities and funding sources and include people living with dementia and their carers in setting future research priorities. 3. Improve understanding of outcomes for people living with dementia from First Nations, CALD and other diverse communities. 4. Promote whole-of-system approaches to improve dementia data, (e.g. through clinical quality registries.) 5. Improve health, social and aged care data collection, accessibility and integration to support research, inform policy and service planning, monitor improvements and reporting on outcomes for all types of dementia. | |
| **Need for change** | Knowing more about dementia, using what we learn in everyday care and trying new ways of doing things is important to prevent new cases and to improve treatment and care. |
| **Where do we want to be in  10 years?** | Improved national dementia data informs policies and programs and enables improvements to be monitored over time. Innovative and translatable research informs practice for early detection and diagnosis, treatment and care. |
| **How will we know if we have made a difference?** | 1. Increased involvement of people with lived experience of dementia in all stages of publicly funded research projects, including people from First Nations, CALD and other diverse communities. 2. Increased number of high quality, peer reviewed, open access Australian dementia studies. 3. Increased number and value of dementia research grants approved. 4. Improved national data sources (e.g. surveys, national minimum datasets) that include data on dementia, and dementia among high priority groups, including First Nations, CALD, regional, rural and remote and other diverse communities. 5. Improved national data for measuring the number of people living with dementia. |