

Using nature to make your visitor economy business dementia-inclusive

Stephen Page, Joanne Connell and Linda Clare





















Foreword

I am delighted to introduce this research-informed study produced by the ENLIVEN project team in collaboration with partners from across the United Kingdom.

Widening audiences and pursuing inclusivity is essential for the visitor economy. Many of the UK's top visitor attractions are heritage sites, and, as such, it is our moral and legal responsibility to provide ways for people to meaningfully engage with our spaces. It is a human right to access and enjoy cultural heritage, and it is easy to understand why. Heritage bridges the gaps between people, helping us feel a sense of identity and belonging. This is particularly important for people living with dementia and cognitive impairments who are at high risk for experiencing loneliness and social isolation. By making it easier to access and understand heritage and engage with outdoor spaces, we are enabling more people to learn, connect and have fun!

For over two decades, I have lived with dementia in my family. This experience has driven my passion to develop, deliver and share dementia-friendly heritage practice so that people living with dementia can continue to access, engage with and enjoy heritage regardless of their diagnosis. At Historic Royal Palaces, I have seen firsthand the positive wellbeing benefits of this through our Sensory Palaces programme. ENLIVEN challenged us to think more broadly about our outdoor spaces, which resulted in the project featured in this report that took place in the moat at the Tower of London. We learned a lot collaborating with participants and ENLIVEN researchers.

As heritage practitioners and policymakers, we know that learning from our peers is key to building our work. This is why, on behalf of Historic Royal Palaces, the Dementia Friendly Heritage Network, and the Cabinet Office Disability Unit, I welcome this ENLIVEN publication as timely and essential for driving forward inclusion in the visitor economy.

This report offers new ideas and ways of delivering positive visitor experiences for people living with dementia and cognitive impairments. I hope you will join me in using this valuable resource to champion best practice and influence change so that more people can explore heritage and outdoor spaces in ways that meet their needs and exceed their expectations.

Kim Klug

Community Partnerships Manager, Historic Royal Palaces

Disability and Access Ambassador for Heritage, The Cabinet Office Disability Unit

Executive summary

This report provides visitor economy businesses and organisations with current thinking on how to make naturebased sites, visitor services, events and experiences more dementia-inclusive. Based on research-informed evidence from the ENLIVEN project, the report presents the case for developing a more dementia-inclusive approach with examples of how to design naturebased visitor experiences for people living with dementia and top tips on hosting nature-based site events. The report provides insights into dementiainclusive approaches by sharing existing innovative practice and promoting ideas for development.

Key points:

- Nature provides well-being benefits for people living with dementia and can help improve mood, reduce stress, foster greater social connectedness, and build closer family relationships.
- Many visitor economy businesses include a natural or outdoor site element and latent potential exists to develop opportunities for people living with dementia to access and enjoy the benefits of nature.
- A dementia diagnosis, especially at the early stage of the disease, does not lead to a sudden cessation of outdoorbased leisure activity but it may lead to a gradual adaptation of activities and choice of leisure pursuits in natural environments.
- The provision of more dementiainclusive experiences and events can help people living with dementia to live independently at home, while continuing to live fulfilling leisure lives to enhance their well-being.

- Many visitor economy businesses are still to acknowledge the impact of demographic change, and the spending and consumer demands of older people, including those with dementia.
- Projects co-created by visitor economy businesses demonstrate that a dementia champion in the organisation is critical for advocacy, in changing organisational practices and in coordinating the needs of people living with dementia.
- The potential for innovation by visitor economy businesses around dementiainclusivity is substantial, often as a launch pad to greater development of accessibility and reaching out to more marginalised groups.
- People living with dementia and their supporters are not a homogenous group and must be central to effective experience design, recognising that one size does not fit all. Dementia affects people in different ways, with varying impacts on behaviour and personal needs.
- Auditing the needs of visitor sites and involving people with dementia as critical friends is invaluable as a tool to review and revise the design aspects of visitor experiences, which frequently benefit all visitors.
- People living with dementia must be recognised in the same way as other consumers with a need to connect and nurture through marketing and advertising to communicate site information and nature-based experiences that stimulate interest and promote confidence.

- Various barriers and facilitating factors emerge from the range of projects undertaken and many small changes can often add significant value to the visitor experience.
- Businesses have different pathways to developing dementia-inclusivity and the voices of people with dementia offer a powerful call to action in
- shaping businesses plans for dementia-inclusivity.
- Not only does a more dementiainclusive approach directly benefit visitors with dementia but it also facilitates greater accessibility and service orientation, which benefits all visitors.





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Introduction:

The dementia challenge

Dementia is a major public health priority globally¹. Figure 1 outlines some of the challenges it creates: above all it changes the lives of the person affected and their family and friends and places a substantial economic burden on families and on society through the costs of care. Dementia is primarily a condition of later life, although a smaller proportion of people develop dementia in mid-life and are diagnosed before age 65². As people live longer thanks to improvements in public health, the number of people with dementia has risen, and we can expect dementia prevalence to continue to increase. Alzheimer's Society estimate that 1:2 people will be touched by dementia throughout their lives, either developing the condition or caring for someone with the condition or both.

Although dementia is a major cause of dependency and social exclusion among older people globally³, its importance still tends to be overlooked by society and by communities. Public awareness about the nature and scope of dementia and its impact relative to many of the other big health issues in western societies, such as cancer, heart disease, diabetes. and obesity, is gradually developing. The scale of dementia is illustrated in Insight 1. Perceptions and understanding of dementia are changing, as Alzheimer's Society⁴ highlight (Insight 2), but there is still a long way to go to achieve full understanding and recognition. Everyone in society has a role to play in this, and businesses and organisations are no exception. There are many ways in which businesses can help to promote inclusion and enhance the well-being of people living with dementia.

Figure 1

What is dementia?

Dementia is an umbrella term for a set of conditions that cause progressive damage to the brain. There are over 180 types of dementia. Among the most common symptoms of dementia are:

- memory loss including recalling recent events
- problems with organising or planning things
- language and communication issues which might include struggling to find the right word for something
- perceptual impairment such as difficulty in judging distances or misunderstanding what is being seen
- confusion about where a person is or the time of day
- changes to mood or emotions which might involve increased anxiety, fear, irritability or personality

Source: Developed from Alzheimer's Society www.alzheimers.org.uk

Public perception of dementia in the UK

GENERAL AWARENESS

- 52% of the population think that dementia is the greatest health problem for older people today and 52% know someone with a dementia diagnosis.
- 49% of the population consider it the disease they most fear.
- 60% of over 65 year olds fear this disease the most.

• 50% of the population associate dementia as a term with memory loss and forgetfulness.

- A quarter of respondents associate dementia with the term old/elderly.
- Over 65 year olds use more emotive words such as sadness, dread or fear when describing the term dementia.

PUBLIC
PERCEPTION
OF DEMENTIA
AS A CONDITION

02

RISK OF DEMENTIA

- 33% of the population think it is possible to reduce the risk of dementia developing.
- 37% of the population could identify one or more of the seven key risk factors associated with developing dementia but 62% could not identify any.

 Heavy drinking, smoking, high blood pressure, depression, diabetes, genetic factors and the protective effects of regular exercise.

SEVEN RISK FACTORS FOR DEMENTIA 04

NATURE AND THE OUTDOORS AND DEMENTIA

With exercise and physical activity deemed key factors to live well with dementia, the value of spending time in the outdoors and with nature is seen as a major low cost intervention to address some of the problems associated with dementia (e.g. social isolation, loneliness, depression) and maintain a degree of normality in one's life.

Source: Developed from the Alzheimer's Society, dementiastatistics.org; ENLIVEN data

The scale of dementia in the UK

- Up to 1:7 people globally are affected by dementia
- The cost of formal and informal care is US\$818 billion (1.1% of global GDP)
- The leading cause of death in UK

944,000 people in the UK have dementia



of all deaths in the UK are due to dementia (66,000 yearly)



£25 billion estimated cost of care for people with dementia in UK



By 2030, over 1.1 million in the UK are expected to have dementia and 1.6 million by 2050

65% of people living with dementia are women

Source: United Nations World Health Organisation and dementiastatistics.org/about-dementia

Inclusion and living well with dementia

Dementia brings gradual changes in the mental abilities that underpin what people do and this is why they may need extra support. With this kind of support, they can still engage in meaningful activities and participate in society. Most of the needs of people living with dementia are not so much medical as social.

To live well with dementia is a relatively recent way of thinking about the wellbeing of people with dementia which is designed to focus on the person with dementia, to empower them and to take a positive approach to supporting them to live as active, healthy and meaningful a life as possible. Research that helps to develop best practice in supporting people living with dementia in enjoying their leisure time (i.e. the free time available after the necessary daily functions have been undertaken) is essential to enable people to maintain more active lives both inside and outside the home and to remain included in society. Central to this is the potential of organisations and businesses to find creative solutions help enhance the wellbeing of people living with dementia.

In focusing on inclusion, it can be helpful to think about dementia in terms of disability. We all understand the importance of including people living with disabilities, and of making adjustments that support inclusion. We can apply this same way of thinking to dementia.

Dementia brings changes in mental abilities; this could mean changes in memory, but it could also mean changes in other skills such as language and communication, visual perception, or the ability to plan and organise things or make decisions. These changes affect agency⁵ and activity, but in contrast to some types of disability, they tend to be 'hidden'. Adapting environments and contexts to accommodate these hidden challenges is a key element of inclusion for people with dementia and their families. As people with dementia tend to be older, they may have other physical or mobility challenges alongside dementia, which also need to be considered when working towards inclusion. Innovations aimed at increasing inclusion will also benefit the many people who are living with the symptoms of dementia but do not have a formal diagnosis, as well as older people more generally and other groups experiencing 'hidden' disabilities.

Making nature accessible to support well-being

One aspect of normal life that is vital for our well-being is the opportunity to get outdoors and access the natural environment.

Our focus in this report is on how nature can help with the lived experience of dementia, adopting a positive person-centred approach⁶ that considers what can be achieved with positive action, innovations and support to remove barriers and obstacles to accessing nature and the outdoors and enhance well-being.

As many natural sites are managed in some way by outdoor providers, businesses, and organisations, this will often involve initiatives by organisations to create and provide access to opportunities. Adopting a positive approach to enhancing the quality of life of people living with dementia through nature requires a holistic understanding of what dementia means to people affected by it and the wider impacts it creates. It is important that awareness and knowhow exists within the sector so people with dementia can access nature and enjoy the well-being benefits.

There is a common misapprehension that most people with dementia live in care homes, whereas in fact in the UK four out of five live in the community in their own homes or with others. One of the most frequently overlooked areas for innovation is among those with dementia living at home, particularly how they access the

outdoors and the natural environment on a daily or weekly basis. In pursuit of a more inclusive society, attention is starting to turn towards those people with dementia residing in the community, to see how we can help them enjoy independent or supported lives and generate positive experiences through nature.

Nature and people living with dementia at home

Nature is acknowledged as having beneficial effects for people living with dementia (Image 1) but they experience barriers to access and need support to access, appreciate and enjoy nature.

Nature and its use in dementia care and leisure is not a new idea, but what is new is embedding dementia-inclusivity in the visitor economy as a way to engage with people living with dementia so they can continue enjoying their leisure lives.

People living with dementia may have regularly enjoyed nature-based experiences before a diagnosis, so activity post-diagnosis helps to embrace a degree of normality at least in the early stages of dementia. Nature and the outdoors, especially its managed provision through visitor economy businesses, provide continuity and opportunity for positive, safe and structured leisure experience but site managers do not routinely have sufficient awareness or expertise to know how to establish a dementia-inclusive approach.



Why did we develop the ENLIVEN Project?

The ENLIVEN Project is part of the UK Research and Innovation⁷ funded research programme on Healthy Ageing⁸ in recognition that the UK population is ageing. With increased longevity it is increasingly important to understand how to add not just years to life but also life to years by promoting good health and activity. As a research team with a real passion for trying to help people living with dementia to experience good quality of life and well-being, we created an interdisciplinary project that spanned dementia, business and the visitor economy to better understand how we could help unlock the potential of the nature component of visitor attractions and sites for people living with dementia. The project was funded as part of the Healthy Ageing Challenge which aimed to help people remain active, productive, independent and socially connected across generations for as long as possible. The purpose was to enable businesses. including social enterprises, to develop and deliver beneficial products, services, and business models to help the population. By investing in UK-wide innovation and research we aim to support both our ageing society and the economy through the delivery of market innovations within the growing healthy ageing domain, while also addressing inequalities in healthy life expectancy. The challenge funded social, behavioural and design research, drawing on a wide range of academic disciplines, to provide market insight and evidence that will enable businesses to maximise their commercial opportunities and address key challenges in the field of healthy ageing, and one strand of this research was living well with cognitive impairment.

ENLIVEN (enlivenproject.co.uk) was a 3-year project based at the University of Exeter, with an expert team from Brunel,

Hertfordshire, Manchester Metropolitan and Bradford Universities, Innovations in Dementia CIC and The Sensory Trust. ENLIVEN has worked with small and medium sized businesses to make the well-being benefits of outdoor activity more accessible to older people with cognitive impairment, for example memory problems due to dementia or a stroke.

Involving people with dementia as co-researchers to help co-create the project

A core element of our project was to involve people with lived experience of dementia to help steer the research process and to ensure the research was scrutinised, roadtested and subject to critical evaluation. This innovative, participative research approach thus meant that the people for whom the research was designed to benefit were actively involved at each stage in a consultative and collaborative manner. This brought local knowledge and direct experience, and encouraged people with dementia to reflect and advise on appropriate actions. Two people with lived experience were co-investigators involved in the development of the funding bid and therefore members of the core project team. These two people were also members of the advisory group of people with lived experience that was developed to support the project. We established a Knowledge Exchange Forum (KEF) to facilitate the free flow of ideas among businesses/ organisations, people with dementia and carers, and researchers. To further extend our pool of local people with dementia, local dementia groups and other local dementia associations were connected to organisations to help with the co-creation process.





The project focus

The focus was to enable people to stay active, independent, and socially connected through increased outdoor activity associated with the UK visitor economy9. Previous research with people with mild to moderate dementia living in the community (in England, Scotland and Wales) found that people who lived within a 10-minute walk to green or blue spaces perceived they had a higher quality of life and well-being than those who did not. The important finding was not that the spaces were there but that people knew about them and talked about them, while people who said they had been outside for a walk in the previous two weeks had better perceived quality of life than those who had not¹⁰. This is consistent with long standing research on the wellbeing benefits of green space (e.g. Public

Health England¹¹) and the importance of blue space (especially in urban areas where the majority of the UK population live¹²). The contribution of natural environments to mental well-being among the general population, including people living with dementia, is now widely recognised and so our focus on nature included both green and blue spaces.

Co-creating our research projects: The ENLIVEN Small Grants Scheme

The co-creation model was used to facilitate a diverse range of stakeholders (e.g. businesses, people with dementia, advisors and other bodies with experience of providing services and experiences for people with dementia) to help generate innovative solutions for creating dementia-friendly experiences. For visitor businesses,



this entailed listening to a wide range of voices and integrating their learning into service design processes in the development of their ENLIVEN-funded project. In each project, activity planning was underpinned by evidence-based research and stakeholder input in a safe space without any financial risk involved. Each project was designed with input from the project team to connect the service (i.e. the supply of the experience) with the consumers (demand) and other interested parties (e.g. dementia organisations and DEEP Groups¹³) with a dual focus on innovation and change. For some businesses, this was the first step in exploring the basic elements of becoming dementia-inclusive, while more experienced providers attempted to make a major step forward from their current delivery to try something new as sector leaders.



The ENLIVEN Small Grants Scheme awarded funding to 11 businesses and organisations who provided or sought to develop enhanced access to nature-based outdoor activity for people with dementia. These were designed as demonstration projects which are a mechanism to develop and implement an innovation. The demonstrative effects of this intervention were then evaluated to disseminate elements of best practice for other managers and practitioners to learn from. A key strand of our work was to engage with a range of target groups, including under-represented groups in urban areas with no access to nature-based sites and for whom access to nature was limited by mobility restrictions, financial barriers or other barriers, as identified in previous studies¹⁴. The research team and advisory group of people with lived experience worked closely with our partners to co-produce new initiatives across a wide range of settings from highly urbanised areas (e.g. London and the south-east) through less urbanised regions (e.g. southern England) to more rural regions (e.g. south-west England, south-west Wales, and Yorkshire) to identify a wide range of environments where naturebased projects could be effectively developed. The underpinning philosophy behind each project was to adapt or develop new visitor experiences, and address barriers to accessibility through a process of co-creation (Image 4). But what do we mean by becoming dementiainclusive?

What are the principles of making places dementia-inclusive? Why does it matter?

To date, much of the focus on people with dementia has been around creating dementia-friendly communities where

people with dementia feel empowered, safe and able to exist in a supportive environment as Text box 1 shows.

Text Box 1: A Dementia-Friendly Community (DFC) is one which:

- Helps people with dementia to:
 - find their way around easily
 - feel safe when out and about
 - access facilities and services that they are used to (such as banks, shops, cafés, cinemas and post offices as well as health and social care services)
 - continue with everyday tasks in the local area
 - travel around the locality
 - maintain social networks and participation in community activities
- Promotes education and public awareness of dementia
- Integrates the needs of people with dementia into planning and development
- Empowers people with dementia to contribute to development of appropriate services
- Recognises that people with dementia are a valuable part of the community
- Supports families and carers¹⁵
- Supports organisations, services and businesses to work towards becoming dementia-friendly
- Brings together stakeholders to establish action plans
- Evaluates actions and progress towards DFC status

Source: Connell et al (2017)

The focus on making businesses and services dementia-inclusive has been championed by Alzheimer's Society in the UK and a significant body of work, including guides and advice for organisations, has been produced setting out what is required to become dementia-inclusive (alzheimers.org.uk/categories/campaigns/dementia-friendly-communities). The most notable of these

for the visitor economy is the Historic Royal Palaces Guide (Image 5)¹⁶. A key theme underpinning much of the discussion on dementia-inclusiveness has been how organisations and services adapt provision to be more accessible. More recently, the World Health Organisation has begun to move this debate to focus on dementia-inclusivity (rather than the former concept of dementia-friendliness) which they define as

A society in which people with dementia and their carers fully participate in society and have a place in it. It is a society where they enjoy respect, freedom, dignity, equality, accessibility, and quality of life. It is one where they are empowered to live independently, free from stigma, discrimination, exploitation and violence or abuse.

(WHO 2022b: X)

Within this definition, there is a direct recognition that normalisation is the end point of any dementia-inclusive society; thus the services and elements within it need to adhere to the common features of fairness and equality so people living with dementia can exercise their human right to live with dementia in the way they choose. Other terms include dementia-supportive. which reflects the current emphasis in society on the noun support as offering help and assistance, comforting, reassuring, encouragement and a sympathetic approach to a person's needs in any setting. Whilst supportive is potentially an overused term in society, by considering its antonym (e.g. prevent, oppose, discourage or hinder), this does illustrate many of the reasons for its use which is why dementiainclusivity as a term has a great deal of salience. Philosophically, a positive approach advocated through living well and inclusivity is based on removing barriers and obstacles to offer encouragement and facilitative actions to create a more accessible experience.

The narrative of dementia inclusivity has emerged from the United Nations (2006) Convention on the Rights of People with Disabilities, recognising that full participation in society is only achieved by identifying and then removing barriers using a social disability lens. *So how will this be achieved?* WHO¹⁷ outlined a pathway for making society more dementia-inclusive:

- it will be piecemeal
- driven initiative by initiative

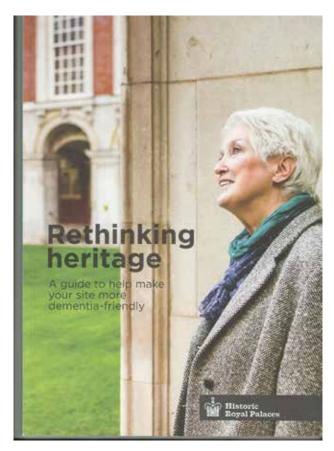


Image 5: The Historic Royal Palaces Rethinking Heritage Guide has become a leading resource for heritage practitioners wishing to promote dementia-inclusivity. ©Historic Royal Palaces

 change will be evolutionary rather than revolutionary.

But why is this important? It makes an assumption that we need to make inclusivity a normalised process so that everyone receives fair and equal treatment without stigma. It also means that a degree of intervention is needed to remove the obvious barriers that exist or where perceived barriers exist (i.e. the attitudes and views of the general population) and specific initiatives may often require investment in adaptations and infrastructure. These changes not only benefit people with dementia but have a much wider value to other marginalised groups where improvements to access may have unintended positive benefits. There is also a powerful economic case for cultivating people with dementia and their family members and friends who support them as visitors.

The silver economy, the dementia pound and the UK visitor economy

In many developed societies, it is recognised that a 'silver economy' exists. This refers to people aged 50 and over or, alternatively, to the over 65 age category in which people with dementia are often located as a sub-group. Although attempts to quantify the silver economy market segment in many countries vary, depending how it is measured, in Europe it was estimated to be worth €5.7 trillion by 2025¹⁸ (European Commission 2019). In the UK, the over 50 age group comprised 76% of the UK's financial wealth: by 2030, over 27% of the UK population will be over the age of 65, a group that spends around £145 billion per annum¹⁹. Within that group are specific sub-groups such as people with dementia and their carers who had disposable income of £16.5K per household per annum in the UK, worth some £11 billion per annum in 2014 and expected to have increased to £23 billion by 2020 if businesses found ways to adapt and meet their needs²⁰, rising to up to £34 billion by 2040²¹. Yet, as Age UK²² report, older consumers often feel marginalised and invisible, and not the market that businesses want to nurture, and people with dementia are no exception to this (Image 6).

Therefore, there is a good business case, given the value of the dementia pound, for the visitor economy to address the

needs of an ageing society and specifically people with dementia as a consumer segment. Previous studies of the hospitality sector show that people aged 65 and over constituted 20% of the sector's customer base and yet only 5% of businesses recognised this²³. At a time, post-pandemic, when many visitor economy businesses are rebuilding their customer base²⁴, reaching out to new audiences and their families and supporters not only makes commercial sense but meets a growing focus in business on Environment, Social and Governance issues (commonly referred to as ESG) and aiming to minimise their negative impacts and enhance their contribution to local communities and more marginalised people. In some cases, the actions arising from corporate ESG strategies may involve common terms such as 'outreach', 'inclusion' and 'access to hard-to-reach groups', often accompanied by strategic objectives and metrics to measure achievements with specific actions. This has important implications when we focus on the way people with dementia experience the services and products which businesses and organisations offer as ESG has obvious benefits for people with dementia and the types of experiences developed for them.



What do we mean by the visitor experience for people living with dementia?

The visitor experience is a concept popularised in early studies of visitor management²⁵ that is often framed in terms of the satisfaction a visitor derives from physical and emotional interactions with the multiple phenomena at a site, destination or place. It has evolved into an approach geared towards the evaluation of visitor services and the way they are delivered in terms of different forms of provision and interpretation (e.g. signage, guided tours, display boards, exhibits and audiovisual displays) they use to communicate ideas and to help people understand what they are viewing or experiencing. As a communication process, interpretation helps to create the visit as a memorable event in the mind of the visitor and until comparatively recently visitor studies research has not recognised the needs of visitors with memory issues. However, research on the psychology of dementia suggests that, because the disease affects more than just the memory when visiting a site or experience, a broader range of symptoms need to be recognised. The changes brought about by dementia affect the mental abilities that support activity and participation. These changes affect the skills of memory, language, visual perception, planning and problem-solving that underpin everything we do. For some people, these changes also affect movement and mobility but the exact challenges depend on the type of dementia they have been diagnosed with and its severity. In the case of visitor research and visits for people living with dementia, there has been a growing recognition of the importance of creating appealing visitor experiences, as for any

market segment. The challenge remains on how to evaluate their satisfaction and wider experience, which may need to be during the event or visit while they are still in 'the moment' rather than relying on conventional market research techniques of emailed survey tools post-visit when the context and feelings, mood, level of enjoyment and engagement cannot be recalled.

Evaluating the visitor experience

Recent studies suggest for people living with dementia we need to dispense with the idea of the visitor experience as based entirely on a memorable event retained for posterity or reminiscence where prompts to that event can be created. Instead. the concept of the moment has been recognised in dementia and visitor studies research²⁶ so that the immediate pleasure and benefits of the visit are appreciated whilst still recognising the importance of subjective factors that shape the feelings and attitudes of the person with dementia towards his or her visit. Research evidence seems to suggest that people with dementia derive meaning and self-realization from these moments especially when the visit is situated with a nature backdrop. Ideally. any evaluation of the visit is best undertaken at the time of the visit (i.e. in the moment) or very shortly afterwards due to the likelihood of difficulty with recalling the event after a delay. Many of the existing principles underpinning visitor satisfaction research as shown in Table 127 demonstrate that the subjective factors often group around FIVE key attributes - reliability, responsiveness assurance, empathy and tangible aspects.

Other studies have also indicated that a gap may exist between the visitor's expectations and what is delivered, and this needs to be narrowed by adequate marketing, provision of accurate information and suitable access arrangements for people with dementia.

Table 1: Dimensions of service quality based on the SERVQUAL principles

Reliability	Ability to perform services dependably
Responsiveness	Willingness to assist customers and provide prompt service
Assurance	Courtesy, trustworthiness and knowledge of staff
Empathy	Display of caring attitude to customers
Tangibles	Presentation of physical facilities

Source: Page and Connell (2019) based on Parasuraman et al (1985)²⁸

The visitor journey, people with dementia and environmental design

One useful way to understand the visitor experience of a person with dementia is to look at it in terms of the visitor journey. a concept that has been widely used in visitor research by organisations²⁹. The visitor journey examines the experience of visitors across the stages of travelling from home to a destination, spending time at the destination and returning home. It comprises a series of stages and points of contact with the visitor economy known as touch points where the experience is shaped and formed by interaction with the setting in which they are located (e.g. a visitor attraction). The visitor journey concept is of overriding importance for people with dementia because it helps us to break down the visit into touch points to understand how each interaction positively or negatively impacts accessibility, ability to participate and engagement as part of the wider experience. This is illustrated in Figure 2 which is drawn from one of the ENLIVEN projects - the Tower of London, where people with dementia were involved in co-creating the visitor experience in the revitalised moat area. Although it is a simplified version derived from focus group discussions during the visit with three groups totalling over 60 people, it begins to identify potential areas for improvement and features that 'wowed' the groups (e.g. seeing the moat in flower and receiving excellent support from Historic Royal Palaces staff). It acknowledges the obvious issues of accessibility, especially for wheelchair users (see Image 7) and the organisational challenges of a site that can have up to 15,000 visits during its busiest days.

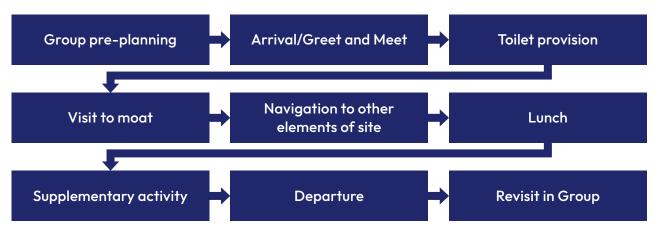
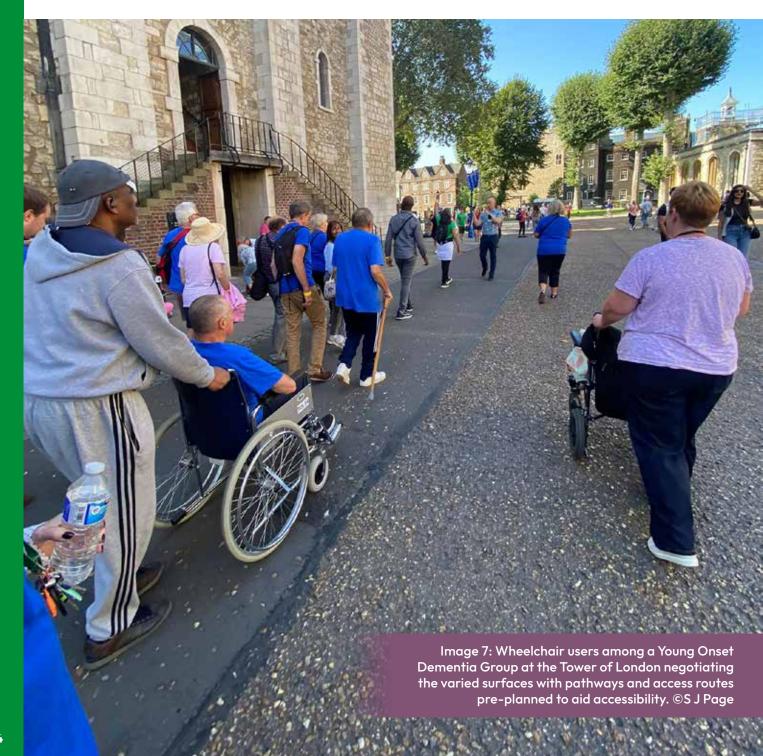


Figure 2: Visitor journey for people living with dementia and key touch points for first visit

Useful tools that can be deployed are site audits as part of the on-site visitor journey, the creation of printed and downloadable accessibility guides, and environmental design resources for specific needs. For example, design principles developed for nature and the outdoors that have relevance for visitor sites can be grouped around six principles to make them dementia-friendly, as Mitchell et al (2003)³⁰ illustrated:

- Familiarity
- Legibility
- Distinctiveness
- Accessibility
- Comfort
- Safety.

In addition, as Mitchell and Burton (2006)³¹ highlighted, open spaces need to be welcoming and accessible, and require simple layouts, uncomplicated design, several key landmarks and limited signage that is plain with large black text.



Using nature to engage people with dementia as customers: A latent opportunity

A substantial body of knowledge has been developed in recent years, often from a well-being perspective³², which has demonstrated the wider benefits of nature to human health in facilitating social-human interaction, encouraging physical exercise and movement, including regular exercise, and spending time out of the home (Image 8).33 The benefits of visiting nature for people with dementia have been recognised since the development of gardens in hospitals³⁴ as therapeutic and healing landscapes³⁵, and in care home premises³⁶ as the sensory stimulation benefits of nature were more widely disseminated³⁷, including the recognition that 'immediate

outcomes of contacts with nearby nature include enjoyment, relaxation and lowered stress levels'³⁸. Sensory gardens have very distinct effects that enhance the human senses (sound, smell, sight, taste and touch)³⁹ (see Image 1 earlier). Other studies also suggest that nature can help create biophilic environments which encourage human-nature interaction and where mental and physical health can be enhanced, for example improving human mood, fitness, memory and attention span⁴⁰, as summarised in recent reviews⁴¹. The benefits of people with dementia engaging with nature can be broadly categorised as shown in Figure 3.

Figure 3: Well-being benefits of outdoor activity and nature for people living with dementia

Well-being enhancements through			
Encouraging social inclusion	Maintaining independence and meaningful occupation of time	Stimulating the memory and senses	
ldentity and self-esteem enhancement	A shared experience with carers that may be fun	Developing feelings of a greater sense of worth	

Source: Stephen J. Page, Joanne Connell, Stephan Price, Steven Owen, Katie Ledingham and Linda Clare, Operationalizing Transformative Tourism: Creating Dementia-Friendly Outdoor and Nature-Based Visitor Experiences, Journal of Travel Research, doi. org/10.1177/00472875231217735, first published online 29 December 2023, originally published by Sage under a Sage Choice Creative Commons open access licence, page 5.



Despite this growing body of knowledge, there is comparatively little research about the realities of people with dementia who live in the community engaging with the outdoors in their leisure time. Little is known about where they go in nature and what types of experience they seek. Most of the studies about people with dementia and outdoor nature-based activity focus on day care provision, either in green care farms and similar settings or as an optional extra in regular day care settings⁴². In contrast, there is a need to develop

community provision of outdoor nature-based activity and make this available to a wider range of older people with cognitive impairment. To understand some of the diverse preferences and behaviours of people with dementia and outdoor nature activities, a useful overview was provided by a Natural England study in 2016⁴³ which is summarised in Insight 3 in terms of where people with dementia go and why, what they do in the outdoors in their leisure time, and what shapes behaviour and facilitates engagement with activities.

Insight 3



Nature and dementia



01 THE BENEFICIAL EFFECTS

- Nature generates therapeutic benefits for well-being
- The majority of people living with dementia live at home and so access to the outdoors and nature is vital to their well-being
- The outdoors and nature feature promimently in dementia leisure-time

Places people with dementia like to visit

- Visiting parks, allotments and garden
- Country parks, woodlands and waterways
- The coast and beach (bluepsace)
- Wild areas (greenspace)

Activities they undertake

- Gardening
- Walking (alone with dog) or as a group
- · Wildlife watching
- Swimming, bushcraft, cycling and running

Source: Mapes et al (2016)

Need for inclusion



02 ISSUES OF ACCESSIBILITY

Natural England's (2022) survey of green and natural spaces found 61% of people regularly used such provision, especially in urban areas, but this drops to 22% for people with health conditions/long-term illnesses such as dementia

03 BARRIERS TO ACCESS: THREE TYPES

Personal (e.g. mobility, fear of getting lost, feeling cold, loss of confidence, mood/behaviour and sensory/cognitive)

Infrastructure (e.g. transport availability, signage, site suitability, refreshments, seating and toilets)

Support of others and available activities

Nature and the outdoors

Limited access to nature and the outdoors for people with dementia





Diversity of responses and attitudes to nature and the outdoors

04 RESPONSES TO NATURE

Feeling of freedom, calmness, happiness

Social enggement

Personal adaptations to enjoy nature

U5 IMPROVING ENGAGEMENT

- Business interventions with infrastructure, enhanced information, signage and toilet provision, staff support and awareness
- $\bullet \ \ \text{Helping people with dementia overcome psychosocial barriers like motivation and confidence}$



Source: Mapes, N., Milton, S., Nicholls, V., Williamson, T. (2016). Is it nice outside?-consulting people living with dementia and their carers about engaging with the natural environment.http://publicationsnaturalengland.org.uk/publication/5910641209507840

The Natural England study is useful as an attempt to establish some of the principles associated with seeking nature and it served as a basis for our own research where we explored the underpinning themes that shaped engagement with nature, based on discussions with 15 people with dementia and 15 family carers/family members.

Obvious benefits reported were:

- Improved mood
- A sense of freedom
- A calming effect
- Stimulation and happiness
- Social connectedness, and
- Being around people/company.

Among the most commonly cited pursuits were going for walks in nature, looking at country or coastal views, gardening, and visiting gardens or parks. What emerged from our research with people with dementia were four specific themes that are pertinent to engaging with nature as a

means of enhancing well-being as shown in Figure 4. What Figure 4 illustrates is that trying to derive aggregate or overview data about people with dementia glosses over the very unique and personalised needs and experiences they have when engaging with nature. This is further reflected in the ways in which people with dementia implement strategies to adapt their behaviour and activities to support access to nature-based outdoor pursuits. This maintains a degree of continuity in their leisure lives despite the impact of dementia.

Nature can help improve physical and cognitive accessibility for people with dementia. This will often mean that businesses need to address practical barriers to inclusion along with a wider range of psychosocial barriers such as a lack of self-confidence or self-motivation by the person with dementia, and availability of a family member or other supporter to offer support with engagement.

diversity of individual needs related to physical and cognitive difficulties

diverse adaptations made to maintain access to nature-based outdoor pursuits

how businesses and organisations can improve physical and cognitive accessibility

practical barriers to inclusion which businesses and organisations can address and psychosocial barriers

Figure 4: Engaging with nature: The voices of people with dementia

So what can businesses do to transform their nature offer to become dementia-inclusive?

Establishing the way forward: Auditing existing provision

Our research focused on the process by which individual businesses could become dementia-inclusive and how to create the pathways to achieve this. This was often dependent on an organisational champion, an accessible site and a nature-based experience or event that appeals to a wide audience⁴⁴. To explore these issues we examined 40 visitor attractions with a nature element from a sample of 131 identified in England during 2022. Semistructured interviews were undertaken to assess the dementia-nature nexus and detailed site audits were undertaken to look at the accessibility issues for 11 of these businesses using a combination of checklists and observational techniques that examined the sensory and physical and design elements of the site.

Our audit process focused on the principles that underpin dementia-inclusive design:

- Familiarity, legibility, distinctiveness, accessibility, comfort, and safety throughout the visitor journey from initial use of the website through to visiting and departure.
- An accessible website including information for wheelchair users and accessibility statements in some cases, and visual guides so visitors could see whether the site was suitable for them.
- Welcome and entry information, signage, toilet provision, and facilities to promote visitor social engagement such as cafés, shops and interpretive services.

Key challenges related to inconsistent signage, the spatial layout of the site, wayfinding, and seating for taking a break, which we examined in relation to broader guidelines on age-friendly seating (e.g. arm rests, comfort level and height).

How businesses had embarked on their journey towards dementiainclusivity: Theory to practice

Interviews with businesses identified their motivations, organisational philosophy and rationale for pursuing a dementia-inclusive journey. As Figure 5 shows, four distinct themes emerge from these conversations with businesses: nature and the outdoors: transformative actions: transformative practice; and barriers and challenges to implementation. The underlying rationale for pursuing a nature theme as a basis for their provision was highlighted by one respondent who characterised many of the responses: 'well-being is at the top of our agenda', where the importance of nature and making it accessible was associated with many of the wider well-being benefits we highlighted on page 25. What also emerged was the key role of a champion in driving innovation and taking the overall idea forward, motivating other colleagues, alongside a wide range of organisational motives for embarking on this journey. This advocacy role is a common theme that has emerged in other studies of dementia⁴⁵. The level of commitment varied from seeking immediate transformation to a much less direct and slower burn. When this was carried through into practice to transform provision, one of the underlying features

that came across in many of the interviews was summed up by one respondent: 'It's all about putting people at the heart of everything you do'. In other words, a people-centric philosophy was at the heart of the journey. This illustrates the difference between those organisations which produce policies and procedures in the public and private sector and those who embed them in practice and can illustrate them working.

Nevertheless the implementation of these transformative practices also faced a number of barriers within organisations as Table 3 shows. These barriers were intensified by several external challenges, notably accessing grants and funding to implement programmes of change and drop-out rates of people living with dementia when not accompanied by carers at events.

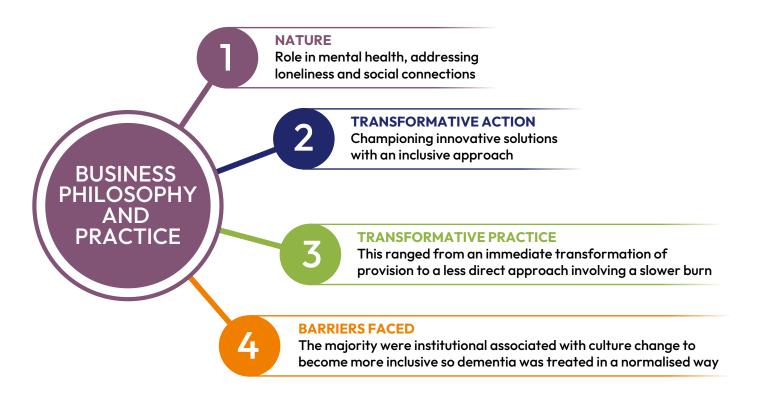


Figure 5: The journey towards dementia inclusivity

Table 3: Barriers to the dementia-inclusive journey in businesses and potential solutions

Category	Issue	Potential solution
Institutional (i.e. internal to the organisation)	Agenda slide in the organisation;	Champion and senior executive team dialogue
	Alignment of interest with partners in project	Negotiation skills/facilitator
	Human resource limitations/staff stretch	
	Expertise available Communicating with people living with dementia and reaching and engaging them	Connecting with one of 80 local Dementia Engagement and Empowerment Projects (DEEP) nationally
	Concerns over impact on other visitor markets (is dementia a detractor?)	Accessing best practice guides
	Internal collaboration with Teams to develop common messages	Training and development workshops
	Rekindling post-Covid drop in patronage	Connecting with VisitEngland Tourism Recovery work
	Failed networking/bureaucracy with local authority	Connecting to a best practice network and other Dementia Champions
	Internal resistance from staff	Advocacy with senior management support to make it corporate policy
	Absence of staff (e.g. volunteers) to implement plan	Connecting with DEEP and local volunteer networks
	Men not engaging wives with dementia in programmes	Accessing existing research on resistance and how to overcome this barrier
	Dementia is just one of the many access/inclusion agendas being progressed	Advocacy to show action often results in wider improvements for other groups

Source: Stephen J. Page, Joanne Connell, Stephan Price, Steven Owen, Katie Ledingham and Linda Clare, Operationalizing Transformative Tourism: Creating Dementia-Friendly Outdoor and Nature-Based Visitor Experiences, Journal of Travel Research, https://doi.org/10.1177/00472875231217735, first published online 29 December 2023, originally published by Sage under a Sage Choice Creative Commons open access licence, page 18

From the interviews we undertook, it is evident that four distinct pathways exist in the way organisations started their dementia-inclusive journey. These pathways are dependent upon the orientation and philosophy of the business (Figure 6) which in turn depend upon the motivation and organisational structure of the business. Figure 6 also illustrates the diversity of business types and pathways which may have different challenges to navigate in pursuing the dementia-inclusive journey.



Figure 6: Selected pathways to becoming dementia-inclusive businesses

Source: Stephen J. Page, Joanne Connell, Stephan Price, Steven Owen, Katie Ledingham and Linda Clare, Operationalizing Transformative Tourism: Creating Dementia-Friendly Outdoor and Nature-Based Visitor Experiences, Journal of Travel Research, doi.org/10.1177/00472875231217735, first published online 29 December 2023, originally published by Sage under a Sage Choice Creative Commons open access licence, page 15.

Co-creating dementia-inclusive visitor experiences: Research to practice

Building on the knowledge base already generated on nature and dementia, in 2022 ENLIVEN advertised a call to businesses and organisations who were interested in becoming a demonstration project to pilot a specific funded initiative. This was to develop an evidence base and achieve practical project outcomes to help in reducing barriers to participation and inequalities in access for people with dementia in relation to nature.

Through the ENLIVEN Small Grant Scheme, 11 main projects were funded along with three additional projects comprising a lighter touch approach towards becoming more dementia-inclusive. Each project is an example of working in partnership to co-produce research evidence about the kinds of changes that encourage participation of older people with dementia to participate in nature-based projects, along with understanding the challenges and learning experiences gained by businesses and organisations through the process.

Small Grant Scheme Partners

The partner businesses we funded through the Small Grants Scheme are shown in Figure 7, and each is listed in terms of its project focus and pursuit of a more dementia-inclusive visitor experience.

The projects in detail Beamish Museum, County Durham

Beamish is a world-famous, award-winning open-air heritage museum (beamish.org. uk) that attracts over 780,000 visitors each year. The museum curates the history of working life in north-east England from the 1820s to the 1950s, with a particular focus on farming and mining. Visitors interact with farms, a pit village, a station and towns, meeting costumed characters on the way who help to interpret stories of everyday life in the region's towns and villages. The Beamish team created a project funded by ENLIVEN that celebrated the connection between nature and art. Entitled Framing it Differently: Mindful Dementia Friendly Photography Walks, the project comprised a 10-week arts-based programme

supported by documentary photographer lan Beesley. Ian worked with a group of participants with dementia who learned about photography through workshops inspired by the museum's unique outdoor environment (Image 9). Participants met weekly with the purpose of experiencing, enjoying and gaining new insights into the natural, rural and industrial heritage of the area. From an organisational perspective, the objectives of the project were to engender greater awareness within the community of Beamish as a dementiainclusive organisation and to enhance understanding within the community of the importance of providing meaningful activities for people living with dementia. Participants developed a close social bond and reported that the sessions were of real value to their sense of wellbeing. The participants' photographs now form a permanent exhibition at the museum, while one of the participants has become a regular volunteer at the site.



Image 9: Barry taking a photograph at Beamish during the ENLIVEN project. ©S Owen



Bishop's Palace, Wells, Somerset

The Bishop's Palace and Gardens (bishopspalace.org.uk) is set in the heart of the city of Wells in Somerset adjacent to Wells Cathedral, and attracts over 500,000 visits per year. The Palace sits within 14 acres of gardens, which include flat lawns, rampart walks, a moat and well pools after which the city is named, and are recognised by the Royal Horticultural Society as a partner site. The site is also home to community gardens that serve local residents. The project with ENLIVEN centred on the design and delivery of a 4-week nature connection course to facilitate new ways for people living with dementia and their carers to connect with nature through the gardens at Bishop's Palace, with the dual purposes of:

- Empowering people living with dementia and their carers with the knowledge and techniques to connect and maintain the connection beyond the course with nature.
- Providing an opportunity for people living with dementia and their carers to connect with others through nature-based activities.

The course was based on the National Academy approach which aims to promote health through nature by focusing on the five pathways of 'Contact, Beauty, Emotion, Compassion, and Meaning', and delivered through a partnership with Somerset Wildlife Trust. Through these events, participants not only felt a sense of relaxation but gained a greater understanding of the role and place of Bishop's Palace in the local community. The organisers hope the participants will want to return regularly to the site.

Dartmoor National Park

Dartmoor National Park (dartmoor.aov. uk) covers 954 km sq. of wild moorland in Devon and is home to the highest land in the south of England, interspersed with rivers, forest and rocky outcrops. Tourism and recreation are significant contributors to the rural economy but as Dartmoor National Park Authority (DNPA) recognises, not all visitors have the confidence to explore the area's special qualities, and in addition, may be deterred by perceived challenges of outdoor pursuits. Thus, addressing physical and perceived accessibility for people with dementia through an innovative offer was a prime objective. The ENLIVEN-funded project supported a collaborative effort between the Tavistock Memory Café, Cycling Without Age and the South West Lakes Trust to deliver a one-day cycling event at Burrator Arboretum (Image 10). Using a trishaw, 20 people with dementia and their supporters enjoyed a ride through the forest, accompanied by a Ranger who talked about nature and wildlife in the moment.



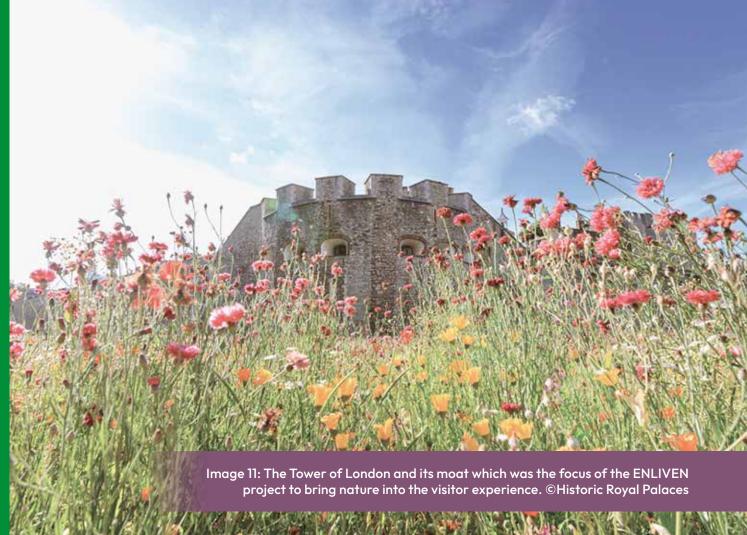
Image 10: Cycling event at Burrator, Dartmoor National Park for people living with dementia. ©J Connell

Dartmoor Active Leisure

Formed out of discussion with Dartmoor National Park Authority, this project focused on advising and improving the capabilities of a small adventure activity business in the development of a new cycling opportunity for people with dementia. The recent reopening of the rail line to Okehampton, immediately adjacent to the cycle hire business, provides an added access opportunity for people from Exeter and

beyond to enjoy the northern gateway of Dartmoor National Park. The ENLIVEN project supported Dartmoor Active Leisure in bringing three groups to the Granite Way cycle route, part of the National Cycle Network, and supported individuals to help them gain confidence and independence for future visits.

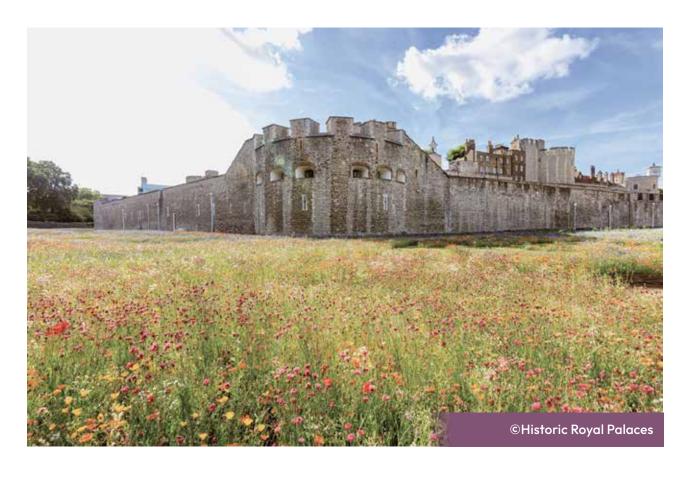




Historic Royal Palaces – Tower of London

Historic Royal Palaces (HRP) is an independent charity that manages and cares for a range of Crown heritage sites and collections, welcoming over 5 million visitors a year to iconic places in British history. The Tower of London (hrp.org.uk/ tower-of-london/#gs.25w1fq) is the UK's most visited paid visitor attraction, receiving over 2 million visits in 2022, which translates to up to 15,000 visits a day in the peak season. HRP is a leader in inclusive access to heritage sites, having developed a Sensory Palaces initiative for people with sensory needs at Hampton Court, established the Dementia-Friendly Heritage Network in 2016 and launched a resource guide for heritage site managers⁴⁶. ENLIVEN was delighted to be working with the team at HRP, who were leading on the Mayor of London's Dementia-Friendly Arts Venue Guide along with leading on dementia for the UK Government Department of Culture, Media and Sport (DCMS).

Supported by ENLIVEN, the HRP Community Partnerships Team trialled the development of provision at a challenging and high-profile site that provides a unique and innovative connection with nature: the moat at The Tower of London. The moat reached an international media audience when it was used as a site of remembrance with the 2014 ceramic poppies display, Blood Swept Lands and Seas of Red, marking the outbreak of World War One, and again in 2018 in Beyond the Deepening Shadow. The 2018 use of the moat included a nightly candle lighting ceremony celebrating the end of World War One. These events attracted 5 million visitors to the Tower. In 2023 the moat opened to the public for the first time, planted with 20 million wild flower seeds. The first of its kind globally, the moat project sought to support and empower people with cognitive impairment to explore and engage with nature. Working collaboratively with people living with dementia and carers, the project sought to create a sense of calm and wellbeing, with a focus on exploring pollinators, wildlife habitats, biodiversity, and art-making.



Kew Gardens, London



Image 12: The Royal Botanic Gardens Kew is a world-famous visitor experience structured around nature and its indoor rainforest in its Palm House which is also an active research environment for its conservation work. ©S J Page

A site of international acclaim, The Royal Botanic Gardens, Kew (Kew Gardens: kew.org) offers a visitor experience that celebrates horticulture and botanical science, heritage and plants, welcoming nearly two million visitors in 2022 -England's second most visited 'paid for' attraction. Kew is a UNESCO World Heritage Site extending over 330 acres with renowned and iconic features, including the Temperate House, the world's largest Victorian glasshouse, and a range of classic and pioneering gardens and landscapes. The ENLIVEN project at Kew fitted into the site's wider agenda of addressing equality, diversity and inclusivity by reaching out to more ethnically diverse communities in London (kew.org/aboutus/equality-diversity-inclusion). Working

with the Community Access and Learning Team, the project used reminiscence practice as a tool to engage people with dementia from diverse backgrounds with plants and nature, with a focus on the international collections that could connect participants with experiences from their past. Underpinning this project was a series of initial consultations and art workshops with an African-Caribbean community group of people with dementia, and with volunteers, some of whom were from the Windrush generation. The project ran 7 weekly sessions with a programme of reminiscence activities and appropriate training for staff and volunteers, with the aim of reminiscence practice becoming an ongoing element of the learning program beyond the duration of the project.

National Coal Mining Museum for England, Wakefield, West Yorkshire

The National Coal Mining Museum (NCMM) for England (ncm.org.uk) holds an important collection of machinery and other artefacts connected with mining heritage and welcomes over 30,000 visitors per year. In addition to its indoor and underground exhibitions, the site has extensive outdoor and nature spaces, including a nature trail, woodland, and a pony centre. The project aimed to make the Museum's outdoor spaces more accessible and welcoming to people with dementia and to strengthen community engagement with former mining communities that include people living with dementia. The Museum team connected with the Voices Together group from Alzheimer's Society Branch in Wakefield. NCMM initially had support from York Minds and Voices, and they eventually engaged with the Coal Industry Welfare Organisation who supported the establishment of a consultation group to co-create a dementia-inclusive action plan. This has led to the development of an accessible woodland area, using saplings donated by the Woodland Trust. This initiative is one of the ENLIVEN arts projects being supported by photographer Ian Beesley, culminating in the development of a banner and chapbook presenting the views of people with dementia about the importance of nature, and an exhibition at the museum.

Chapbooks provide a way for people to tell their stories through photography, poetry and drawings. Banners offer a call to action, as highlighted in a former dementia-related project developing banners for hope and change (theunfurlings.org.uk).

New Forest National Park, Hampshire

As one of the more recently designated National Parks in England, the New Forest National Park is close to urban centres, relatively accessible and contains a large amount of gentle terrain and small settlements, bordering the coast at Lymington. New Forest National Park Authority (NFNPA) (newforestnpa.gov.uk) sees the New Forest as an 'entry-level' park, as its relatively open and flat terrain and easy accessibility from London and other urban centres by road and rail makes it both attractive and less intimidating for people who have not visited a National Park before. Some 13.5 million day trips are recorded each year to the New Forest, generating over £120 million for the visitor economy. As over 60% of visits are made by people living in or close to the National Park, thinking about visitors with dementia is important as the local region is among those with the highest prevalence of people with dementia in England⁴⁷. The ENLIVEN-funded project involved trialling three different activities to help identify opportunities and challenges for further development:

- Taster cycle rides offered by an existing inclusive cycle operator that had not delivered sessions for people with dementia before.
- Open-top bus trips on the New Forest Tour to trial different bus routes.
- Inclusive volunteering sessions with the National Park team offering a range of co-designed tasks.

The NFNPA teamed up with Dementia-Friendly Hampshire to reach people in the area, and learning how to adapt provision and equipment for visitors living with dementia and their supporters will continue.

Seaton Tramway, Devon



Image 13: Seaton Tram 12 traversing the route with the wetlands backdrop, ©Seaton Tramway

Seaton Tramway (tram.co.uk), based on the East Devon coast, runs electric trams on the disused Seaton branch line, which closed in 1966. Situated alongside the Axe Estuary and the Jurassic Coast World Heritage Site, the Tramway is an important tourist site and welcomes around 100.000 visitors a year. The Tramway has already developed inclusive and accessible services, including a Memory Tram for people with dementia and a Quiet Tram for people with sensory needs, as well as other community offers. However, the ENLIVEN-funded project extended the offer further by linking with Seaton Wetlands, the adjacent nature reserve (Image 14), which visitors could access through a newly opened halt funded by a previous Lottery Grant that allowed visitors to access the site via a boardwalk. Given the Tramway had already ventured into delivering to a market of people with dementia, the aim for the ENLIVENfunded project was to reach out to people in the local community who might describe themselves as one or more of the following:

- prefer to attend alongside people who are not cognitively impaired;
- recently had a diagnosis;

do not identify as living with dementia and wish to maintain their independence.

ENLIVEN funded a series of events, each with a different nature-based theme for participants to enjoy the natural environment, take physical exercise and meet other people in a safe and supportive environment. Events included art, birdwatching, photography and wellbeing activities, and were led by activity specialists, including people with dementia.



Image 14: ENLIVEN Group birdwatching at Seaton wetland. © Joanne Connell

Strawberry Hill House and Garden, Twickenham

Strawberry Hill House and Garden, created by Horace Walpole in the 18th Century, has been open to visitors for over 250 years. This extraordinary building is internationally famous as Britain's finest example of Georgian Gothic revival architecture whilst the garden offers an escape for those looking for tranquillity in a natural setting. The ENLIVEN project with this site was to make people living with dementia and carers feel confident that they could visit Strawberry Hill Gardens, knowing that it was a safe and secure environment. To achieve this, the project started from first principles to devise an action plan to make the gardens more dementia-inclusive. This involved co-designing and pilot testing initiatives to make the 'Feel Good Garden' more dementia-inclusive, drawing on expertise within the ENLIVEN team in sensory design alongside consultations with people with dementia. An event was held to launch the improvements and promote

the site to those living with dementia and their supporters. The team at Strawberry Hill House also co-created with ENLIVEN a sensory trail (Figure 8) through the gardens for people living with dementia and made a film to serve as an access guide (strawberryhillhouse.org.uk/accessibility) to make their site more welcoming and broaden its appeal to those with access needs.



Image 15: Strawberry Hill House, ©Strawberry Hill House

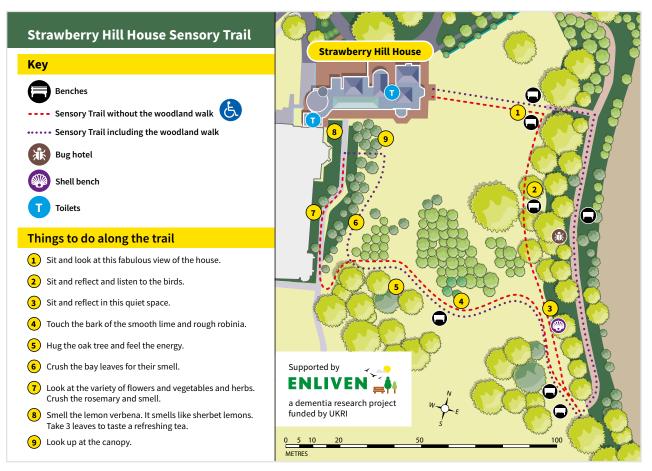


Figure 8: Strawberry Hill House Sensory Trail

The British Bird of Prey Centre, Carmarthenshire

The British Bird of Prey Centre (britishbirdofpreycentre.co.uk) is based within The National Botanic Garden of Wales, in Carmarthenshire. This is the only bird of prey experience in the UK that focuses solely on native species and thus provides a unique experience set in a well-known visitor landmark. The aim of the Centre is to give everyone the opportunity to interact with and learn about the birds of prey that can be found in the UK and, by doing so, inspire people to protect them. The project with ENLIVEN provided

a series of bi-weekly bird of prey flying experiences at the Centre. Each session was tailored to the needs of the visitor group and accommodated up to 15 people plus carers. The sessions also included entry to the National Botanic Garden of Wales so after the bird of prey session, visitors were able to walk around the Garden. The team also made outreach visits to care homes and local dementia groups. These involved holding 'coffee mornings' that incorporated a talk about birds of prey, an opportunity to handle them and a chance to watch them fly.



Light-touch projects

Additional projects have arisen from interactions with businesses participating in the ENLIVEN Knowledge Exchange Forum which required a lighter touch approach. These projects widened the circle of

ENLIVEN's influence by supporting more organisations to learn and think about how they can make improvements for people with cognitive impairment.

Stuart Line Cruises, Devon

Stuart Line Cruises (stuartlinecruises. co.uk), based in Exmouth, is a multi-awardwinning, third generation family-owned and managed business that has been operating for over 50 years. This is a well-established tourism business offering cruise excursions in the local area and special events throughout the year. Stuart Line is a member of Devon's Top Attractions. The company offers cruises on the internationally important Exe Estuary and along the Jurassic Coast World Heritage Site, including special interest trips for birdwatching, geology and experiences of the unique marine and estuarine environment in this part of southwest England. ENLIVEN worked with Stuart Line with the aim of using our knowledge of dementia to help them assess the feasibility and timing of accessible boat trips for people living with dementia, facilitate the same level of high-quality experience for all regardless of cognitive ability and ensure passengers learn or experience something new. The ENLIVEN project with Stuart Line Cruises set out to develop the company's understanding of the whole visitor journey for people living with dementia, from the online booking system to the experience on the boat. Following an initial consultation, co-creation of new ideas to help improve accessibility and develop an attractive service for people living with dementia formed the basis of the project.

Exeter Cathedral, Devon

Exeter Cathedral (exeter-cathedral.org.uk) is the city's biggest tourist attraction, with over 100,000 visits per year. ENLIVEN

worked with the Cathedral to think about accessibility and the visitor experience for people with dementia, with a particular focus on the grounds. ENLIVEN conducted a site audit of the Cathedral and discussed further ways to support staff at the Cathedral, with the involvement of the ENLIVEN Advisory Group.

Lost Gardens of Heligan, Cornwall

The Lost Gardens of Heligan (heligan. com) welcomes over 350,000 visitors a year. Among them are groups of people with dementia and their carers who attend as part of a business relationship with Dementia Adventure. But what about the experience of older visitors with cognitive impairment who visit as part of the attraction's day visitor market? Supported by ENLIVEN partner the Sensory Trust, ENLIVEN visited Heligan with a member of the Advisory Group who has dementia and mobility needs to learn about accessibility and experience of the venue and provide feedback. The visit highlighted challenges in the interaction of dementia and mobility as well as the impact of dementia on wayfinding, signage, and interpretation. Practical proposals in relation to charging of personal mobility scooters could be implemented quickly, while input into the difficulties relating to maps come at a time when Heligan are looking at redesigning their site map.

From these projects, a range of learning can be derived about how businesses can construct and develop dementia-inclusive experiences which can be translated⁴⁸ from research into practice in the future.

Lessons learned on designing an inclusive visitor experience and its delivery

Many of the projects we worked with proposed an events approach to engaging people living with dementia, aiming to create a visitor experience that had a strong nature-orientation or nature dimensions but that had been overlooked in the organisation or in the product offer by the organisation. From a conceptual standpoint, there is a vacuum of knowledge on how events are used to engage people living with dementia and their carers to stimulate out of home nature-based activity. Developing these events from a practical perspective in the visitor economy is a relatively new endeavour, and novel outside of the heritage and museum sector where object handling, memory boxes⁴⁹ and activities within enclosed indoor spaces have been the norm. Nature and outdoor events create different challenges compared to indoor provision and uncontrollable variables can ultimately affect delivery.

In terms of event management, a series of process issues emerged from the projects where organisations moved into this area with either a limited knowledge of the challenges of hosting dementia-inclusive events, or with some prior experience.

Several of the project teams had acquired significant experience over many years of working with people with dementia but none of the organisations reported that it was a simple and straightforward process of design and implementation. As Figure 9 shows, delivering a short series of events through to a much longer programme of events posed numerous event management challenges. As free events, the immediate problem faced related to longer-term engagement where external factors such as illness or forgetting to attend where this was dependent upon an individual or couple attending under their own resources affected numbers and engagement. These issues were less problematic where more structured projects connected with a day care centre that programmed this into the routine of their weekly schedule. Here, a complex amalgam of factors often produced a major management challenge for the site or organisation hosting the event in scheduling to meet a broad range of needs. Some providers found it challenging to define and engage with a target market where there was no established dementia group locally they could reach out to.



Figure 9: The process of delivery of events for people living with dementia: Organisational perspectives



Developing the event: Event management principles

As with any consumer segment, marketing, advertising and conversion of potential to actual participants was often underestimated from a management perspective. Some factors that organisations found important were:

- Identifying your target market and which participants to engage by having a regular dialogue in the event design and co-creation phase, making it possible to then develop a wide pool of people able to attend. This is like any sales and marketing task and is similar to nurturing a sale. Advertising in conventional media, targeting lists of participants and being pro-active emerges as a key takeaway that many organisations overlooked. Without the market there could be no event and. in some cases, events were cancelled due to insufficient demand. This is not necessarily a lack of inexperience in working with people living with dementia, but indicates a need to think through targeted marketing, advertising and nurturing of a harder to reach audience.
- Scheduling events or activities that are co-created at suitable times that appeal to the market bearing in mind people with dementia may wish to avoid early or later in the day visits, while also acknowledging climatic constraints such as temperature extremes and inclement weather, and reasons why a lack of engagement might occur, planning for the unexpected and being adaptable. The most successful projects were able not only to work towards a group experience but, if they observed a drop in interest or lack of engagement, were able to intervene and develop something different to re-kindle interest (e.g. a tailored intervention). Having volunteers (Image 16) able to support the project was helpful in this respect.
- Knowing your market and their needs so that the design and access needs of people living with dementia and their carers are recognised in terms of site restrictions and other barriers that can be identified by auditing the site to ensure an experience is not inaccessible. One or two examples of this issue arose but in the main mobility needs were assessed in

advance and even with difficult terrain, such as the cobbled paths at the Tower of London, anticipated difficulties could be overcome by planning ahead to use more sturdy wheelchairs.

- Keeping the communication channel open with other stakeholders involved in the event or activities, and monitoring the impact and progress of the intervention with a debrief after each session to measure change in participant behaviour, mood and enjoyment so as to make minor tweaks in subsequent weeks.
- Keeping the experience person-centred, making it fun and enjoyable, interactive, hands-on and delivered at a pace to meet a wide range of needs meaning that conventional visitor management logistics on dwell times may need rethinking. For example, longer dwell times may be needed at key elements of an experience as the person may not

absorb it rapidly and may wish to sit down and savour the moment rather than photograph it and move on, which visitor businesses may be more familiar with in the social media age.

Lessons learned from delivering the projects

As Figure 10 shows, building on the organisational issues, three key pillars exist in each of the projects – reaching out to the audience, issues for the host business, and the importance of involving other stakeholders to enrich the design of the experience (e.g. to animate the delivery or to offer a specialist design feature such as storytelling or art-based activity). These three pillars need to be kept connected at each stage of event design and development because they are the key elements that combine to create the dementia-inclusive environment.

Reaching and engaging PLWD

- Mood enhancement and engagement
- Engagement and connectedness
- Audience development
- Communication/advertising and outreach
- Experience co-design
- Weather and participation
- Free events and remembering to attend

Host Business

- Volunteers and partnership working
- Communication process management
- Adaptability and organisation flexibility
- Site enhancements and inclusive infrastructure
- Internal organisational advocacy
- Website and communication

Dementia Inclusive Agenda

Other stakeholders

- Expansion of interest and remit of project
- Complexity with multiple partners to manage and too many perspectives
- Turf wars on whose project it is
- Freelance input and long-term continuity
- Stability of the project implementation process and multiple points of failure

PLWD= People living with dementia

Figure 10: Some of the lessons learned from demonstration projects: The three pillars of successful event management

Perspectives of people living with dementia

For the target audience, key elements that emerged from participant observation, focus groups, surveys and casual conversations during the events demonstrated a number of important findings:

- Regular interaction with the audience and monitoring their needs and responses to the events through a diverse range of evaluation tools helped to make design changes as the projects progressed.
- Where focus groups and surveys were used, within the constraints on some individuals' abilities to respond verbally, it was evident that these provided an unparalleled opportunity for the organisations to gain feedback in a structured and unstructured manner. People living with dementia and their carers had many important contributions to make on all aspects of the experience design and delivery in a very practical and meaningful way. This process also helped create enhanced engagement with the project for subsequent visits to the site which was also used as an immediate source of feedback whilst the experience was fresh in their minds.
- Participant observation is often overlooked as a research tool and yet where this was used, noticeable changes were observed in mood, behaviour and engagement.
- People living with dementia are not a passive and simply receptive audience. They have diverse needs and whilst this can be challenging in delivery terms, interactive elements of the experience create enjoyment and high levels of engagement. In some cases, pushing boundaries and challenging expectations about what people could manage, such as going cycling or taking people living

- with dementia and their carers into poorly lit and darkened environments such as the Crown Jewels exhibit at the Tower of London, in a carefully planned and managed manner yielded highly positive outcomes.
- People living with dementia and their carers have to make their own decisions on what they feel they can manage and engage in, so it is vital that organisations do not prejudge and label the groups with their own prejudices.

Organisational perspectives

For the host businesses, especially those who were not used to working with this market, a range of lessons emerged that affected the way the projects evolved and were delivered and then evaluated:

- Partnership working was a fashionable term reflecting a public sector and not-for-profit sector ideology that permeated a great deal of the thinking behind many of the projects. It had many positive and negative features as the following quotation from one project summarised: 'The brilliant thing about doing community engagement is that you're working with other organisations and other people. And the hardest thing about community engagement is that you're working with other organisations and people'. This created rich experiences but made them very time consuming to coordinate. In some cases, management challenges meant that projects stalled or ran out of steam and a critical intervention was needed to kick start the process again.
- Managing volunteers (where they were available) was a highly variable experience. They brought many positive elements to engaging people living with dementia with the practical elements of the activities and experiences and creating interest. However, in some instances, the absence of a clear

- volunteer strategy and a pre-planned role for floating volunteers in the delivery setting needed enhanced management to tie them more fully to the project aims.
- The most successful projects in terms of deep experiences were based on the personal skills and expertise of the experience design and delivery team. In particular, the adaptability of the team was paramount. Nowhere was this more evident than at the Tower of London with its 15,000 visitors a day and high-volume visitor environment. The team were able to adapt to climatic challenges, mobility issues and the unexpected (e.g. a group being delivered to the wrong area by a coach) with relative ease and were flexible enough to incorporate interest in seeing non-programmed elements (e.g. the Crown Jewels) or address unknown dietary requirements or additional mobility needs.
- Scale of project and group size was critical. This ranged from very small groups to over 30 people. Adaptability and the level of enjoyment and social connectedness did not appear to vary by group size, particularly where larger groups were managed into smaller ones for refreshments or doing activities, where the need arose.
- Be prepared to accept criticism and adapt the experience accordingly by keeping flexibility in the schedule and making changes to the delivery on subsequent visits to demonstrate how the feedback impacted provision. What worked well on one occasion may not on a subsequent delivery with a different group, for example.
- One key lesson which most projects highlighted was the value of the advocacy role within their organisation for what they were delivering, the critical connections with wider accessibility spin-offs and the importance of breaking down cultural barriers. One large site

- managed to negotiate access for the first vehicle belonging to the general public to ever be allowed on that site so a group with significant mobility needs could gain access, where previous barriers had precluded access. Thus, the participants were able to access the event venue with ease. Gaining senior management commitment to the projects was seen as crucial for helping leverage support for the work.
- The need for important website development work was cited by some organisations alongside the wider community engagement benefits of advocating for dementia-inclusive approaches and the good news stories this created for their organisations on social media.

Stakeholder Involvement

In most cases, the projects were reliant upon a supply chain that involved different organisations who connected with people living with dementia (e.g. Age Concern, DEEP Groups, Young Onset Dementia Groups and Memory Cafés)50 that could help at all stages of the project design and implementation as critical friends. In some cases, a web of organisations was interconnected with the projects which expanded the potential catchment for the project. Coordinating these and integrating different agendas was often a difficult process, sometimes with organisations talking at crossed purposes or other agendas being promoted alongside the project remit. A clear project brief with clear goals and principles engaged a wider pool of organisations who contributed or benefited from the interaction but they also delayed delivery where their schedules could not be accommodated. In one instance a turf war was evident but the project team redirected the project to offset this distraction. A major concern emerges over the use of freelance input to project design as that expertise was not retained

for future development work and so the organisations would be dependent upon ongoing budgets to ensure sustainability.

One key outcome was the need for a strong leadership of each project to kick start the development process and to steer it through to timely completion as a number of critical points of failure emerged:

- An absence in the wider stakeholder group of the core project management skills needed to understand start and end points for the work and a common purpose.
- Too many conflicting demands with the project sometimes being sidelined by stakeholders.
- Personnel change and changing interest and agendas as the project progressed

- (particularly at a time of post-Covid recovery, high inflation, reduced visitor numbers and a squeeze on budgets and staff time).
- Underestimating the commitment to the project and deliverables within a specific timeframe.
- Not keeping lines of communication updated, especially where commitments to pre-agreed outcomes were uncertain.

In a more positive light, many stakeholders over-delivered, wowed the people living with dementia and their carers and went on to sustain a degree of engagement that was not there previously. People skills remain critical in the delivery process to enthuse, engage and carry the group along.



How to develop a dementia-inclusive project: Lessons learned and top tips

From our research, a simplified way of looking at how to develop a dementia-inclusive experience emerges, as Figure 11 suggests. Here, a series of sequential steps exist, from the inception stage where an organisation decides to make this a priority as part of its inclusivity agenda through to the final delivery of a dementia-inclusive visitor experience. This summarises the lessons learned from the

projects on how businesses began their dementia-inclusive journey, while a number were at a more advanced stage and were trialling new ideas and experiences to deepen their provision. Whatever position the organisation is in on this schematic diagram, it is important that the experience design is co-created, trialled and evaluated before embarking on implementation.

• Establish the Audit the site Refine the Review the · Implementation, and venue for evaluation of the vision and experience with marketing and barriers and input from people trial and create advertising experience proposition based positive features with dementia by a scaled version to intended trialling the initial audience on research and to develop or programme consultation proposition of events/ with peers and experience experience of other projects · Consult with people with dementia and

Figure 11: Steps to creating a dementia-inclusive visitor proposition

From these generic steps a series of top tips can be formulated (Figure 12) that can be understood holistically. Following these, the creation of the visitor proposition can then be implemented in a manner that allows all the resources of the organisation to be harnessed and some of the top tips for planning a nature-based event with people living with dementia include:

carers to refine

the offer



Figure 12: Top practical tips for creating the dementia-inclusive nature experience

Planning Top Tips

- Vision and commitment to inclusivity at a senior level in the organisation, accompanied by a key advocate at an operational level who can champion the issue, is critical.
- 2. Powerful media imagery, like the Young Onset Dementia (YODA) Strikes Back Film (youtube.com/watch?v=njOoBaGEiz4), will provide an emotional and powerful backdrop to reinforce your advocacy and case for developing a dementia-inclusive experience.
- 3. Ensuring availability of the necessary staff resource, time and funding to drive the innovation forward, including the knowledge to design new programmes to attract people living with dementia to visit, is essential.
- 4. Leveraging organisational support can be achieved by linking this work to the ESG Agenda⁵¹ as organisations commit to the principles of ESG and community engagement. Many of the projects reported here were led by staff from this area.
- 5. Audit the visitor journey for people with dementia visiting the site to understand the pre-visit, the trip to the site and the on-site experience. (Appendix 1 can be adapted or slimmed down to fewer items if it is overwhelming but it should act as a talking point for the audit process).
- 6. Do not be over-ambitious see the changes as a piecemeal process that will take time and persistence, especially where resistance towards change or innovations exists in short do not lose heart, but talk to other people doing similar projects in other organisations you have networked with
- 7. Build other stakeholders into your plans where relevant, bearing in mind the challenge of managing competing demands. They will often bring new ideas and fresh perspectives on challenges you may face, recognising that challenges will emerge.

Empowering staff and volunteers Top Tips

- 1. The visitor experience is about people, and people make the difference between a good and a poor experience. Providing Dementia Friends training is an initial starting point as a taster. What is emerging is a need for ongoing professional development to build upon this training to raise awareness and to improve understanding of dementia and how to interact with people with dementia and carers so that colleagues feel empowered to create meaningful interactions. Many of the projects reported here frequently point to the pivotal role of one or more people in a team in making the visit wow the visitors. Nature can help enhance that, but it is human interaction that adds the value to the experience.
- 2. Champion the issue with staff you work with, being passionate and supportive of colleagues who may be more unsure or concerned about this development as they take unfamiliar steps in uncharted territory sharing best practice can help reduce their anxiety.
- Ensure any volunteers feel part of the team as opposed to adjuncts and provide appropriate identification (badges or clothing).
- 4. Try to ensure that feedback on sessions or experiences is shared within the team as a learning process. Volunteers may have different experiences that should be heard and shared.
- 5. Ensure the welcome for people living with dementia and their carers makes them feel special, especially where the organisation handles large volumes of visitors.

Marketing and Advertising Top Tips

- Reaching the target audience as a business requires refinement of existing thinking where visitors (either as paid or free admissions) already exist and as the organisational marketing is focused on non-dementia audiences.
- 2. Reaching out to other stakeholders (e.g. DEEP Groups) and organisations specialising in dementia care may be necessary to attract people who feel excluded from the current offer or lack of provision. This can be done via pre-visit information (e.g. the website) which may need a refresh.
- 3. Develop an Access Guide with simple and printable instructions on the visit and consider providing short films visualising the visitor experience (e.g. Strawberry Hill House, strawberryhillhouse.org.uk/accessibility; Hendon Aircraft Museum rafmuseum.org.uk/london/plan-your-day/accessibility). This will add reassurance for people with dementia and also help to attract other new markets (e.g. people with autism).
- 4. Ensure that once a market has been engaged, follow up and ongoing development work occurs that keeps people connected via email, telephone and other forms of media (e.g. social media) so they remain interested, especially where a programme of events is developed or it is likely that wastage/dropout rates will be high.
- 5. Make the initial interactions with the audience interesting and animated so that the experience being offered is not static and simply what is offered as a walk-in visitor, ensuring that it is better tailored to their needs.

On-Site Communication Top Tips

- Use large font interpretation materials to create an accessible and legible introduction to the site.
- Involve people living with dementia and their carers to help trial the new experience and refine the proposition so it is accessible and welcoming, with barriers identified and where possible addressed.
- 3. Be creative in how nature is harnessed and used in event programmes or specific new experiences designed for engaging people living with dementia. Archives and memorabilia may sometimes help stimulate memories and interest, building on the well-established techniques used in the heritage and museums sector. There are lots of excellent best practice examples that have not been adapted to a nature-focused proposition.
- 4. Be adventurous in how you ask people to engage with nature, refine the proposition with regular evaluation and feedback and use that to enrich the website and appeal to other people to visit.
- 5. Ensure that customer facing staff are aware of the needs of people dementia so that a greater degree of compassion enters into their interactions with visitors as opposed to more regimented and long-standing practices on visitor management to process queues.



Top Tips for Hosting a nature-based dementia-inclusive event

There is a growing interest in beginning to broaden out existing practices used for people living in care to now target those living at home seeking to try and maintain independent lives. Our top tips for hosting events reflect this evolving range of practices that have several core features:

- Facilitate creative expression among those with a dementia diagnosis.
- Find ways to compensate for the effects of changes in mental abilities on what people are able to do.
- Empower people living with dementia to express their view of the world to try and achieve as normal a lived experience as possible so that they do not feel marginalised or socially-isolated.

 Enable people living with dementia to have fun (Image 17), to live in the moment and to participate as much as they can in society.

Among the top tips that we have compiled from our research are the need to think about different stages of the event (preevent, staging the event and post-event) each of which has special conditions to be met in developing a fulfilling and rewarding visitor experience. The list is not exhaustive (Table 4) but it summarises some of the key things to think about based on recent experiences from organisations and the co-created events they engaged with.

Table 4: Top Tips for organising a nature-based event for people living with dementia

PRE EVENT:	Operational Issues	
Actions		
_	Flexibility and adaptability in plans is essential in case for example the visit is affected by inclement weather	
	Location and access issues	
	Ensuring that internal stakeholders are aware of the event and briefed on the audience and their needs	
	Ideally a pre-event trial of the site or event to gather feedback for any modifications required so it is viewed through the eyes of the participants rather than just the organiser (see the DEEP Guide on Inviting people with Dementia to Conferences for background)	
	Ensure the timings and duration are suitable with shorter rather than long sessions preferable	
	Ensure there are ample breaks	
	Think about the spaces being used so that obvious distractions (e.g. noise) are minimised and have alternative strategies if the attention of the group starts to wander	
	Provision of information in an accessible format on access and transport issues	
	If the event involves mobility – what is involved and timings and challenge level	
	Provision of map or weblink	
	Contact details of organiser for pre-visit queries or questions	
STAGING THE EVENT: Actions		
	This can be the factor determining success or failure so ensure the staff welcome is hospitable and authentic and basic issues (e.g. availability of toilets and other facilities) are highlighted and built into the event programming	
	Issues of toilet provision and their accessibility will feature highly if they are inadequate	
	Ensure the connection with the group is built so a rapport is established, building upon the pre-event communication to engage the audience	
	Listen to any concerns and make any adjustments required (e.g. wheelchair requests)	
	Depending on the type of event design devised, think carefully about what will help achieve a stimulating cognitive experience (e.g. its sensory elements) and the theory behind what you are designing and why, as well as how you plan to measure its success (or failure)	
	Do not be afraid of trialling new ideas and techniques to build the relationship between the person living with dementia and the caregiver and look at advice on each technique ⁱⁱ	
	Make the event fun, enjoyable and engaging (Image 18)	

Hospitality needs	Ensure that all participants have adequate access to refreshments when outdoors and indoors and that these are suitable for the climatic conditions to avoid dehydration
Signage	Appropriate signage needs to be provided that is legible and accessible to help participants navigate around the venue or site/planned events/ experience
Climatic factors	Given the challenge of climate for people living with dementia (e.g. avoiding extremes of hot and cold), event design needs to be cognisant of these issues. For example, several ENLIVEN events had gazebos erected on hot days to offer shade and shelter.
Seating	Adequate seating is essential that is suitable for the audience and appropriately sited to ensure breaks are possible allowing a chance to rest and to savour the moment
Volunteers/ Staffing	Adequate volunteers and/or staffing may be needed to be in terms of the ratio of visitors to staff to ensure that there is adequate support throughout the event and someone available in case first aid is required
	A delicate balance in volunteer input is needed to ensure the right mix of support and independence for the person with dementia (e.g. the volunteer is not there to complete an activity but to sensitively assist where a person needs assistance)
POST-EVENT: Actions	
Evaluation	Agreeing an evaluation strategy or tool to use to capture feedback as you go along (e.g. a focus group style of conversation) or post-event discussion is important to demonstrate the case for the event and its benefits and impact on the organisation in terms of its mission
	Many tools exist to help with this activity (see Alzheimer's Society methods of conducting research with people living with dementia) alzheimers. org.uk/dementia-professionals/dementia-experience-toolkit/researchmethods
Follow-up	Once a group of people have been engaged, keeping a connection with them and building upon that relationship is critical. This is standard marketing procedure as it costs more to recruit a client or customer than it does to nurture them once you have built a relationship with them
Word of Mouth	Word of mouth is very important in communicating with people with dementia as their support networks, advocacy groups and connection with other people will help 'snowball' (i.e. spread the message through word of mouth) and reach a wider audience

ⁱ See the DEEP Guide: Inviting People with Dementia to Conferences, dementiavoices.org.uk

Recent studies of reminiscence therapy (for a general introduction see Nodorff, M. and Dozier, M. (2023) Asking people with memory loss about past holidays can help them recall happy times, The Conversation, theconversation.com/asking-people-with-memory-loss-about-past-holidays-can-help-them-recall-happy-times-125520. and for a more scientific approach, see Woods, B., O'Philbin, L., Farrell, E. M., Spector, A. E., & Orrell, M. (2018). Reminiscence therapy for dementia. The Cochrane Database Systematic Reviews, 3(3), Cd001120.) suggest that by developing techniques to ask people living with dementia to recall their holidays and experiences, perhaps through events, the connection and bonds with their carers may be strengthened. The use of this themed prompt assisted with other forms of cultural collateral such as photographs may help when using reminiscence as the basis of a nature-based or outdoor event such as photography.

In addition to the top tips, it is evident that many of the events that have been hosted during this project have developed from a wider schema of approaches to designing experiences for people living with dementia as Table 5 shows. This demonstrates the creativity now being harnessed from different areas of society to create stimulating experiences. These range from experiences aimed at people with a recent diagnosis whose condition is less constraining through to those who have mobility issues and those for whom language is difficult. Visual media, for example, provides a meeting point for sharing experiences that are suitable for many because they offers a degree of immediacy and sensory stimulation not necessarily dependent upon cognitive abilities (assuming that visual perception is not affected by dementia). The range of possibilities which Table 5 opens up is endless and when nature is combined with them, this offers many opportunities for organisations to innovate and capture the human imagination.

Table 5: Creative ideas for hosting nature-based events for people living with dementia

people living with dementia		
Creative area of activity	Event ideas	
Drama	Active involvement, fun and laughter	
Dance	Active involvement and exercise	
Music	A relaxing experience when used in an outdoor setting that can be combined with exercise or reflection or other exercise routines	
Art-based programmes	Using nature to connect nature and people with creative activities using art	
Reminiscence	Creating memory boxes from a nature experience, sharing stories of key events in one's life like holidays and travel	
Photography and visual media	Using nature as the backdrop to the event and to help stimulate future recall and memories	
Sensory events	Use of pre-planted garden areas to stimulate interest and different responses	
Story telling	To create a stimulating social environment where people with dementia can contribute in different ways about their lived experiences	

Further reading: Lee, H. and Adams, T. (eds) (2011) Creative Approaches in Dementia Care, Basingstoke; Palgrave Macmillan.





A Call to Action

There are a wide range of stakeholders who if mobilised can help to harness the power of nature to address the stigma and barriers people living with dementia often feel after a diagnosis, as the recent Young Onset Dementia Activist Group (YODA) Film highlights (youtube.com/ watch?v=njOoBaGEiz4). The work of YODA (see blgmind.org.uk/bromley-dementia/ yoda) is a good example of what a call to action can achieve in the voluntary sector to create a self-help and advocacy group in an innovative, responsive and agile manner. As the group have embraced the use of nature as one of their preferred activities with their group in different settings, it illustrates what a positive champion and leadership can achieve focused on the lived experience of dementia. It often needs such advocacy or a specific project to show what can be achieved, often with limited resources, to transform how an organisation approaches the issue of dementia. We cannot under-estimate the role of advocacy and championing the cause in a Call to Action.

A Call to Action can occur at different scales from the community to the national level. Our research has targeted businesses and organisations in the visitor economy where they are already involved in providing fun, enjoyment and experiences for visitors in their leisure time. That offers a sound basis upon which to look at adaptations, reformulation of the visitor proposition and how nature can be leveraged to achieve positive benefits for organisations and people living with dementia.

So how can we achieve a more concerted Call for Action in the visitor economy?

Using the different sources of data we have collated from interviews with people living with dementia as participants in the project, the views of our advisory group, focus groups and feedback from partner businesses and our observations during events and activities,

we have compiled a list of top tips for a Call to Action in Table 6. What is evident from the list in Table 6 and various open conversations with stakeholders, is that many of the things people with dementia have highlighted are often basic hygiene factors for businesses (i.e. the basic things customers of a service expect) or additional factors that they do not necessarily demand but that can add substantial value by offering reassurance and brand satisfaction, and generating repeat business and good customer feedback through word of mouth (and increasingly e-word of mouth via social media). In the visitor economy, this is often associated with the ability to have a seamless and uneventful visitor journey in terms of service interruptions, where the focus is on the positive attributes of the experience as the ultimate goal.

These comprise 12 main points that include:

- Being treated as an individual.
- Practising inclusivity and keeping experiences as normal as possible.
- Providing adequate access information.
- Recognising nature experiences are integral to living well with dementia.
- Recognising transport barriers to accessing nature sites.
- Visit timing.
- Animating staged events to bring nature to life.
- Viewing experience design through a dementia lens.
- The importance of basic hygiene factors to the visitor experience.
- The role of nature in fostering social connectedness.
- Professionalism of staff and volunteers in adding value to experiences.
- Fun and enjoyment are paramount to meaningful experiences in the moment.

- Being treated as an individual as one size does not fit all and businesses need to apply the same principles as they do to other customer segments through more sophisticated marketing
- Practising inclusivity by not segregating people living with dementia from the wider visitor population, and avoiding offering somewhat sterile and lifeless visitor experiences or allocating a separate early opening time for people living with dementia. Some adaptations may be necessary for individuals but normalised experiences were widely requested. On the other hand, avoiding days when large groups might be at the site (e.g. several school groups) is the type of information people with dementia might value knowing before they visit
- **Providing adequate access information** for the visitor journey on the organisation's website, as Strawberry Hill have done with an access guide, a downloadable and printable simplified guide that can be developed through auditing the site (See Appendix 1)
- A. Nature-based experiences remain integral to the leisure lives of people living with dementia and with some small adaptations, enhanced access can be achieved (e.g. ensuring pathways are suitable as gravelled areas can prove problematic for walking and wheelchairs as well as the existence of puddles which can be perceived as holes in the ground)
- Accessing urban and rural nature-based sites for some urban populations with dementia may appear easy given the availability of public transport but in reality this is a barrier, especially at iconic sites, so some forms of tailored transport solutions may be required, often on a group basis
- **6. The timing of the visit** is critical in terms of peak times for energy levels for a visit along with temperature. There is evidence to suggest that extremes of heat and cold⁵² impact people with dementia disproportionately, with the heat scenario being recognised in recent research. This needs to be recognised to understand when people living with dementia will be prepared to engage in visiting the outdoors for events or visitor experiences staged for them. Working out the optimum visit length was also widely discussed at around 1.5–3 hours on site as a maximum
- 7. Staged events for people living with dementia appear to animate the visit, bring nature to life and help with engagement making it appealing. This also encourages re-visitation, as shown in the feedback from groups in most of the projects, as the organisations created safe spaces for the participants
- 8. The need to look at the **experience design** through the lens of someone living with dementia was widely endorsed and enthusiastically supported, especially the pacing of outdoor experiences and different ability levels. There is no replacement for the detailed advice that people with dementia can share with businesses on what works well or what simple additions would make a big difference at a specific site
- **Pasic hygiene factors assume a major role in the visit**, especially the access to toilets, which need clear signage on site as well as entry and exit signs, a good supply of places to sit, rest points during outdoor activity and quiet spaces allowing people to engage at their own pace
- Nature-based experiences achieved social connectedness in two ways. First, where pre-existing groups visited they supported each other and were able to manage the visit as a group through their mutual support. Second, where events recruited participants unknown previously, it expanded existing social networks and there was evidence of the activity strengthening bonds between the person with dementia and their carer as a shared experience
- The professionalism of staff and volunteers was a significant value-added element frequently cited because it helped with the nuancing of experiences for different ability levels and offered reassurance, perceived safety and confidence in the venue's ability to design and deliver sector leading experiences for people living with dementia
- 12. Fun, enjoyment, and an opportunity to achieve meaningful experiences in the moment were visible at the point of consumption but also continued to be a point of discussion after the visit finished

Many excellent resources exist on how to navigate your way through the maze of challenges in becoming a dementia-inclusive visitor site and how to overcome them, such as the Rethinking Heritage Guide based on many years of sites pursuing a dementia-friendly approach and trialling different projects from a wide array of practitioners. The real value of this resource is its collaborative philosophy that is based on best practice and sharing knowledge as well as its ongoing peer support function

as a Network. Alongside the wider work to create a more dementia-inclusive visitor experience, this report has also highlighted the importance of developing events at sites on nature-based themes for people living with dementia and we have also compiled some of the key points of reflection from both our businesses and people living with dementia to help other organisations who pursue this route to dementia-inclusivity.



Appendix 1:

Audit Tool for outdoor visitor sites

Appendix 1:

Audit Tool for outdoor visitor sites

SITE AUDIT OBSERVATION SHEET

PRE-VISIT	Y/N	
Is the site promoted as dementia-friendly (or age-friendly in any way), such as events or volunteer programmes?		
 Where is site mainly promoted? Note or hyperlink to webpage(s). 		
Obtain a copy of promotional material available on-site or locally (e.g. events programme or volunteer programmes).		
 May be worth visiting local Tourist Information Centre/Information Point (in person). 		
How might visitors get to know about the site if not using the internet?		
• Is it promoted by local or national organisations for older people or people living with dementia (PLWD) e.g. Dementia Friendly Community, local Age Concern, tourism organisations, Alzheimer's Society (AS), others?		
 Does the site promote group visits (e.g. care homes, community groups)? 		
Does the site have a Dementia Friends accreditation or is it a member of a local Dementia Action Alliance or other dementia or associated scheme (e.g. Purple Angels)?		
Is the website clear and easy to use?		
 Does website conform to AS guidance? Is there information on the website about dementia-friendly activities? 		
Is pre-visit information on the site available in other formats?		
Is there a telephone number?		
 Is it easy to find? Are there other contact methods? 		
Information on entry and ticketing		
• Is there a 'carer goes free' ticket or other concessionary discounts?		
• Is there flexible ticketing (e.g. for short visits) or a membership scheme so people can come again another time?		
• Is cost of entry clearly stated? Please note the cost of entry.		

Is there information about transport and/or parking?	
 Parking spaces, accessible parking, blue badge spaces, payment required – cost and how to pay. Is pre-booking required? 	
 Is there public transport to the site – bus stops and route, rail or other. Is there a link to timetables? 	
Information on taxi companies?	
• Is there a shuttle bus or other on-site transport?	
Is there information about accessibility?	
 For example, availability of walking aids, wheelchairs, trampers, use of braille, hearing loops. Is pre-booking required? Please print or hyperlink to this information. 	
 Does the site have a Visit England accessibility statement (or other scheme)? 	
Is there information about features of the site to help visitors feel welcome or confident about their visit?	
 For example, guidance on length of walks, types of routes, terrain, suggested footwear/clothing, pathway surfaces, quiet spaces, how much time they can spend on site doing various activities? 	
• Guidance on length of time for a visit?	
Other points to add on pre-visit information	

ON-SITE	
ON-SITE	Record your on-site assessment of the site, including a talk with the site manager/staff
TRANSPORT AND ARRIVAL	
Is it easy to park at the site? • size of car park/no. of spaces • size of spaces • blue badge spaces • proximity to site/entrance • is there a drop-off point near the entrance?	
What is the surface of the car park like, and any pathways to the entrance? • e.g. gravel/grit, tarmac, grass or other • any danger or trip hazards Is the site accessible by public transport?	
 How far from the site entrance is the nearest bus stop? 	

VISITOR WELCOME	
Is the entrance clearly signed?	
• Is it clear where and how to get into the site?	
• What type of entrance – e.g. gate, door	
Is there a map or information at the entrance?	
Paper maps available?	
 Large, laminated map/interpretation board? How easy to understand? 	
Is there someone to meet and greet on arrival?	
 Is there a personal visitor welcome or do you visitors simply walk in? 	
Does the site identify as 'dementia-friendly' – e.g. sticker on entrance door?	
How easy is it to buy a ticket?	
• Card only/cash/membership card?	
• Queuing system – what is it like?	
Pre-booking and fast track available?	
• Seats for queue available if necessary?	
 Note the number of staff at ticketing area and customer service level and quality. 	
Signage and general ambience in ticket area	
Is information about accessibility available?	
 Are there mobility scooters, walking aids or wheelchairs available? 	
 Are these services visible at the entrance, or is there information available? 	
• Is there an accessibility guide available?	
TOILETS	
Are there toilets on site?	
• How many?	
• How accessible are the toilets? Level access?	
• Is there a Changing Places toilet?	
• Unisex toilet?	
• What colours are the toilet doors and toilets?	
Note the brightness levels	
Is it easy to get out of the toilet (e.g. handles and locks)?	
Are taps labelled hot and cold?	
• Are there way out signs?	
Where are the toilets on the site (e.g. near to entrance, in cafe?)	
 Are toilets well-signed with large font and black on white/yellow?) 	
 User-friendly location(s) (e.g. how far would someone need to walk at furthest point?) 	

SITE AUDIT OBSERVATION SHEET

SIGNAGE	
Please describe signage on the site. Is the signage clear? Are the signs in bold or in contrasting colour (e.g. black on white or yellow). Are signs at eye-level? Are signs in upper and lower case? Are pictures used as well as words? Are there direction signs placed at key touchpoints? e.g. entrance, shop, café, site features, toilets, customer service/help points, waymarked routes/trails, how to exit.	
take time out?How would someone know about this?	
Are steps or other hazard areas clearly highlighted so they are visible?	
STAFF INTERACTIONS	
Are staff trained (e.g. Dementia Friends, or bespoke programme)? • Are staff friendly and helpful? • Is any staff member wearing a sunflower lanyard? • Are staff wearing Dementia Friends badges?	
EVENTS AND ACTIVITIES	
Have you observed (or are there) events for PLWD? If not for PLWD, obtain information on the site's events programme.	
Please obtain information on community or volunteer activities for PLWD. If not for PLWD, then activities and volunteering opportunities for older people.	
Other on-site observations	

References

- WHO (2013). WHO Director-General addresses G8 dementia summit who.int/director-general/speeches/detail/ who-director-general-addresses-g8-dementia-summit
- 2. Young onset dementia is often shortened to the acronym YODA and Alzheimer's Society estimate that over 70,000 people are living with the condition in the UK.
- 3. World Health Organisation (2022). who.int/news-room/fact-sheets/detail/dementia, accessed 4 January 2024.
- 4. dementiastatistics.org/perceptions-and-inequalities/public-perceptions
- 5. Agency is a term used to denote where a person acts on their own behalf and represents a way they convey their thoughts and actions to express their power. Ultimately dementia affects the ability or capacity to act independently and use free will to make decisions.
- 6. This approach draws its stimulus from the growth in positive psychology, especially the work of Seligman, M (2011) Flourish: A Visionary New Understanding of Happiness and Well-Being. New York: Simon and Schuster. Seligman's PERMA framework has salience for our dementia research with its focus on the five elements of PERMA (Positive emotions are encouraged and fostered such as happiness, joy and love; Engagement where people are encouraged to use their strengths with happiness a by-product of the challenge posed by engagement; Positive Relationships, where people feel supported, loved and cared for within a nurturing social environment; Meaning, where people can get a sense of worth and seeing meaning even in adversity such as being diagnosed with dementia; Accomplishments and Achievements, where people can set themselves goals and achieve them, such as planning to participate a day out in nature and then feeling they have mastered the challenge of the day.)
- UK Research and Innovation is a non-departmental public body of the Government of the United Kingdom that directs research and innovation funding.
- 8. ukri.org/what-we-do/browse-our-areas-of-investment-and-support/healthy-ageing
- 9. The visitor economy embraces the hospitality and tourism sector (food and drink provision via cafés, restaurants and accommodation), travel agencies, transport providers, cultural activities like galleries, events and retailing. There is often a blurring of the terms visitor economy, tourism and leisure as residents may also use the facilities and services in their leisure time. The term broadly refers to the supporting infrastructure that caters for the needs of visitors and residents especially in their leisure time and so is very wide ranging in what is included in such a categorisation.
- 10. Wu Y-T, Clare L, Jones IR, et al. (2021) Perceived and objective availability of green and blue spaces and quality of life in people with dementia: results from the IDEAL programme. Social Psychiatry and Psychiatric Epidemiology, 56(9), https://doi.org/10.1007/s00127-021-02030-y.
- 11. Public Health England (2020) Improving Access to Greenspace: A New review for 2020, London: Public Health England.
- 12. See bluehealth, bluehealth2020.eu/resources/bluebenefits
- 13. DEEP is an acronym for the UK Network of Dementia Voices (dementiavoices.org.uk) which comprises local groups of people living with dementia to enable them to have a voice about things that matter to them.
- 14. Innes, A., Page, S. J. and Cutler, C. (2015). Barriers to leisure participation for people with dementia and their carers: An exploratory analysis of carer and people with dementia's experiences. Dementia, 15(6), 1643–1665.
- 15. One definition of carer is an unpaid person who cares for someone who has an illness or disability needing support, which may be a family member or friend. Although paid carers exist, in terms of dementia, it is frequently associated with a partner or family member. However, not all family members think of themselves as carers especially in the earlier stages of dementia, and some people prefer other terms such as 'supporters' or 'care partners'. In a visitor economy setting, we also need to distinguish between family/friend supporters, volunteers and paid staff. We use carer in the report to denote the person who normally accompanies their partner or friend on visitor economy visits.
- 16. Klug, K., Page, S. J., Connell, J., Robson, D. and Bould, E. (2017). Rethinking Heritage: A guide to help make your site more dementia-friendly. London: Historic Royal Palaces.
- 17. World Health Organisation (2021). Developing a Dementia-Inclusive Society: WHO Toolkit for Developing Dementia-Friendly Initiatives. Geneva: World Health Organisation.
- 18. European Commission (2019). The Silver Economy. An overview of the European Commission's activities. Global Silver Economy Forum, Finland, 9-10 July 2019.
- 19. Office for National Statistics (2014). Family Spending in the UK 2014. London: Office for National Statistics.
- 20. Centre for Economics and Business Research (CEBR) (2014). Cost of Dementia to English Businesses: A Study into The Costs to Business From Time Taken to Care, Workforce Skills and Knowledge Lost and Consumer Spending at Risk Through a Lack of Understanding of Dementia. London: CEBR.

- 21. Centre for Economics and Business Research (2019) The Economic Cost of Dementia to English Businesses 2019 Update. A report for Alzheimer's Society. London: CEBR.
- 22. Age UK (2017). Age-Friendly Business: Valuing and including Older Consumers in Supermarkets and Service Companies. London: Age UK.
- 23. Barclays (2015). An Ageing Population: The Untapped Potential for Hospitality and Leisure Businesses. London:Barclays.
- 24. In terms of international tourism see visitbritain.org/research-insights/2023-inbound-tourism-forecast; for domestic tourism see visitbritain.org/research-insights/great-britain-domestic-overnight-trips-latest.
- 25. Graefe, A. R. and Vaske, J. J. (1987). A framework for managing quality in the tourist experience. Annals of Tourism Research, 14(3), 390-404.
- 26. Keady, J. D., Campbell, S., Clark, A., Dowlen, R., Elvish, R., Jones, L., . . . Williams, S. (2020). Re-thinking and repositioning 'being in the moment' within a continuum of moments: Introducing a new conceptual framework for dementia studies. Ageing & Society, 42(3), 681-702.
- 27. See for example the key founding studies in the field which include: Parasuraman, A., Ziethmal, A. and Berry, L. (1985) A conceptual model of service quality and its implications for further research. Journal of Marketing 48:41–50 and Gilbert, D. and Joshi, I. (1992) 'Quality management and the tourism and hospitality industry', in C. Cooper and A. Lockwood (eds) Progress in Tourism, Recreation and Hospitality Management, Vol. 4. London: Belhaven and Ryan, C. (1994) Researching Tourist Satisfaction: Issues, Concepts and Problems. London: Routledge.
- 28. Parasuraman, A., Ziethmal, A. and Berry, L. (1985) A conceptual model of service quality and its implications for further research. Journal of Marketing 48:41–50.
- 29. The idea is explained further by Lane, M. (2007). The Visitor Journey: the new road to success. International Journal of Contemporary Hospitality Management, 19(3), 248–254.
- 30. Mitchell, L., Burton, E., Raman, S., Blackman, T., Jenks, M. and Williams, K. (2003). Making the outside world dementia-friendly: Design Issues and Considerations. Environment and Planning B: Planning and Design, 30(4), 605-632.
- 31. Mitchell, L. and Burton, E. (2006). Neighbourhoods for life: Designing dementia-friendly outdoor environments. Quality in Ageing and Older Adults.7(1), 26-33.
- 32. Appleton, J. (1975) The Experience of Landscape. New York: John Wiley and Sons.
- 33. Fromm, E. (1973) The Anatomy of Human Distinctiveness. New York: Henry Holt and Company.
- 34. Hickman, C. (2013) Therapeutic Landscapes: A History of English Hospital Gardens. Manchester: Manchester University Press.
- 35. Tyson. M. (1998) The Healing Landscape: Therapeutic Outdoor Environments. New York: McGraw Hill; Williams, Abingdon: Taylor and Francis (ed.) (2007) Therapeutic Landscapes.
- 36. Edwards, C. (2013) An evaluation of therapeutic gardens influence on the quality of life of aged care home residents. Dementia: 12(4), 494–510
- 37. Rodiek, S. and Schwartz, B. (eds) (2007) Outdoor Environments for People with Dementia, Binghampton, NY: Haworth Press.
- 38. Kaplan, R. and Kaplan, S. (1989) The Experience of Nature. Cambridge: Cambridge University Press, p.173.
- 39. Champagne, T. (2018). Sensory Modulation in Dementia Care: Assessment and Activities for Sensory-Enriched Care. London: Jessica Kingsley Publishers.
- 40. Souter-Brown, G. (2014) Landscape and Urban Design for Health and Well-Being: Using Healing, Sensory and Therapeutic Gardens. London: Routledge.
- 41. Gonzalez, M. (2014) Benefits of sensory garden and horticultural activities in dementia care: A modified scoping review, Journal of Clinical Nursing 23 (19/20), 2698–2718. Studies such as D. Buck (2016) Gardens and Health for the Kings Fund www.kingsfund.org.uk/publications/gardens-and-health and the Worcester University (No Date) Making Your Garden Dementia-Friendly, www.worcester.ac.uk/documents/Making-your-garden-dementia-friendly-booklet-final.pdf, illustrate the well known benefits of gardening along with the recent movement for dementia-friendly allotments building on much of the work on the sensory value of gardens such as Bristol's Alive Programme, thebristolmayor.com/2021/08/09/dementia-friendly-allotments.
- 42. Collins, R., Owen, S., Opdebeeck, C., Ledingham, K., Connell, J., Quinn, C., Page, S., & Clare, L. (2023). Provision of outdoor nature-based activity for older people with cognitive impairment: a scoping review from the ENLIVEN project. Health and Social Care in the Community. https://doi.org/10.1155/2023/4574072
- 43. Mapes, N., Milton, S., Nicholls, V. and Williamson, T. (2016). Is it nice outside? Consulting people living with dementia and their carers about engaging with the natural environment. Natural England. Natural England Commissioned Report. (Number 211). publications.naturalengland.org.uk/file/6209724725854208
- 44. A full version of the study can be accessed online: Page, S. J., Connell, J., Price, S., Owen, S., Ledingham, K, and Clare, L. (in press), Operationalizing transformative tourism: Creating dementia-friendly outdoor and nature-based visitor experiences, Journal of Travel Research. https://doi.org/10.1177/00472875231217735

- 45. Connell, J., Page, S. J., Sheriff, I., & Hibbert, J. (2017). Business engagement in a civil society: Transitioning towards a dementia-friendly visitor economy. Tourism Management, 61, 110-128.
- 46. Klug, K., Page, S. J., Connell, J., Robson, D. and Bould, E. (2017). Rethinking Heritage: A guide to help make your site more dementia-friendly. London: Historic Royal Palaces.
- 47. See alzheimersresearchuk.org/dementia-hotspots-maps-reveal-scale-condition-across-uk/#:~:text=The%20 five%20constituencies%20with%20the,Norfolk%2024%20per%201%2C000%20people
- 48. Translational research, as an element of applied research, has at its roots the premise that the results can be translated into practice that benefits human health which in this case is the aim of helping people live well with dementia through visitor experiences that utilise nature. Here the emphasis in translational research is to put the findings into practice as quickly as possible with a societal benefit.
- 49. The origin of the memory box (sometimes called a rummage or reminiscence box) as a form of storing a keepsake or memory of a loved one can be dated to the Victorian era. Its wider use in dementia is to help stimulate long-term memory through the use of keepsakes especially where the people living with dementia are involved in the making of them. The idea helps to develop a more people-centred approach to dementia care and a useful starting point is the Liverpool Museum's Service House of Memories Programme (see liverpoolmuseums.org.uk/house-of-memories) and the Tyne and Wear Archive and Museums (see dementiaaction.org.uk/members_and_action_plans/3654-tyne_and_wear_archives_and_museums)
- 50. Memory Cafés are a concept that aims to offer a safe space in which people with dementia can meet, have fun and socialise over a beverage as well as an opportunity meet and make new friends. The idea originated in The Netherlands in the 1990s as a first step in addressing some of the stigma associated with dementia. The idea diffused internationally, to the USA in the 2000s, with the first café set up in Santa Fe, and to Europe in 2008. It offers a self-support model and cafés are often run by volunteers. In the UK, Age UK have produced a toolkit to help with establishing a Memory Café (ageuk.org.uk/bp-assets/globalassets/norfolk/age-uk-norfolk-dementia-cafetoolkit.pdf) offering many useful cues to what type of environment and ambience to create for people living with dementia.
- 51. ESG is an acronym used to describe the environmental, social and governance factors which investors are increasingly focusing on with organisations in terms of their sustainability performance. In simple terms it translates to how organisations are perceived by customers and clients in terms of their compliance with sustainability issues and their ethical behaviour and practices such as the use of supply chains and labour and legal practices. In the field of social sustainability, it has started to focus on the organisation's practices towards issues such as inclusion and so it is not surprising that many public, voluntary and private sector organisations in the visitor experience sector have created policies and initiatives to expand the inclusivity of their organisation where they rely on visitors as their core business. It is in this contexts that dementia-inclusivity is located.
- $52. \ george in stitute.org/news/people-living-with-dementia-at-risk-from-rising-temperatures-study-finds$

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Email: ENLIVEN@exeter.ac.uk **Telephone:** 01392 725313