

# Convergence: Laying the Groundwork for Repurposing Distressed Urban Mall Environments for Mixed-Use Dementia-Friendly City Centers

## RESEARCH TEAM:

Emily Roberts, PhD

## INSTITUTION:

Oklahoma State University



## EXECUTIVE SUMMARY

### PURPOSE OF STUDY

This study focused on community engagement research laying groundwork for the Dementia Friendly City Center model for integrated dementia programs and services and housing through adaptive reuse of closed malls.

### RESEARCH SUMMARY

Approximately 5.4 million Americans have some form of dementia and these numbers are expected to rise in the coming decades, leading to an unprecedented demand for memory care housing and services. In searching for **innovative options to create more autonomy and better quality of life in dementia care settings, repurposing existing structures, in particular vacant urban malls,** may be one option for the large sites needed for the European model of dementia villages. These settings may become **sustainable Dementia Friendly City Centers (DFCC)** because, in the case of enclosed mall construction, the internal infrastructure is in place for lighting, HVAC, and a varied spatial configuration of public spaces.

**This study focused on community engagement research laying groundwork for the DFCC model for centralized dementia programs and services and housing.** Using an 800,000 square foot case study closed mall site, community engagement and focus group themes delineated the opportunities and barriers to the initiative. The DFCC model can be seen as one opportunity to make life better not only for those with needs associated with dementia now, but also for ourselves in the future. Educating and updating future stakeholders about the value of this model of care will be critical in transforming current hurdles into future opportunities for integrated dementia care models.

### IMPLICATION HIGHLIGHTS

- Our society is currently experiencing a convergence of needs which include: (1) the need for support for a growing population of individuals living with dementia; (2) the need for rethinking adaptive reuse of large commercial mall sites that are closing for improved economic stability in those communities; and (3) the need for sustainable building practices, such as adaptive reuse, to positively impact global climate change.

- Dementia-friendly initiatives using mall adaptive reuse support inclusive and enabling environments for individuals living with dementia and their families.
- Mall adaptive reuse offers potential for spatial expansion needs for dementia care, including flexible quarantine spaces during times of need for expanded infection control (i.e. COVID-19).



Download the [Adaptive Reuse of Closed Malls for Dementia Housing Programs & Services: An Information Guide](#) for details

Download the [Adaptive Reuse of Closed Malls for Dementia Housing Programs & Services: A Startup Toolkit](#) for more resources

## CONVERGENCE: LAYING THE GROUNDWORK FOR REPURPOSING DISTRESSED URBAN MALL ENVIRONMENTS FOR MIXED-USE DEMENTIA-FRIENDLY CITY CENTERS

### BACKGROUND

This research began with a monthly meeting of stakeholders at the state level discussing the ongoing and growing need for innovation in dementia care and the potential of closed mall properties to meet this need. Upon receiving funding from the ASID Foundation Transform Research Grant Program, we were able to conduct a community workshop in Oklahoma City attended by over 60 individuals from multiple stakeholder groups. This was an opportunity to bring together a group of speakers from around the country to address issues on sustainable building practices and design and construction for memory care settings. Topics discussed in the workshop included:

- **Urban Re-greening Through Sustainable Building Practices**  
Energy generation, graywater systems, green roof tech, waste management, and maintenance.
- **Therapeutic Environments for Health and Wellness**  
Spirituality, walking trails, pool/fitness, pet therapy, multi-sensory gardens, library, and community classrooms.
- **Re-purposing Commercial Mall Environments**  
Shopping/dining options, accessibility, visibility, security, seating, community outdoor venue, ownership, and federal/state/local partnerships.

- **Improved and Expanded Dementia Programs and Services**

Intergenerational education, medical, OT, PT, social services, volunteerism, community education, PACE and other day programs, research, technology, and regulation.

A series of five focus groups were then conducted in person, and via online video conference (caregiver, healthcare worker, architect/developer, medical provider, LTC resident). The focus groups lasted for 1 hour and the grant PI served as a moderator and announced the rules of participation at the beginning of the focus group. To promote discussion, it was stressed that there were no right or wrong answers and the aim was for participants to express their opinions about the initiative. The participants were asked open-ended, semi-structured questions. These questions were based on topics developed during the community workshop. Each participant was given an opportunity to answer all of the questions. There were follow-up questions when a specific topic needed further investigation or detail. The focus groups were audio taped. In addition, observational notes were recorded about participants' reactions (e.g. laughing, puzzlement, or sadness) in order to provide more contextual information.

A qualitative inductive content analysis was used to analyze data following the steps recommended by Elo and Kyngas (Elo & Kyngas, 2008). First, the focus group recordings were transcribed verbatim.

Then the text was read and reread by all members of the research team to get a sense of the whole and check the accuracy of the transcription. After that, all authors assigned essence-capturing codes to words, sentences, or strings of words that conveyed the same meaning. Codes that shared a commonality were then grouped into mutually exclusive themes without using a preexisting categorization framework. This allowed new themes to emerge from the transcription. Quotes from participants were used to illustrate the themes and to keep the interpretation closely linked to the raw data. Themes were presented based on the frequency of their use during the focus group session.

## **METHODOLOGY**

**Community-engaged research** is the process of working collaboratively with groups of people affiliated by geographic proximity, special interests, or similar situations with respect to issues affecting their well-being. This research included an in-person day long community stakeholder workshop was held with 60+ community stakeholders, including family caregivers, health care workers, designers/developers, medical providers, and LTC residents. Analysis of the workshop topics and dialogues resulted in a series of focus groups for each of these stakeholder groups. A final virtual workshop with stakeholders took place to discuss the focus group findings, the initiative's opportunities and barriers, and potential next steps.

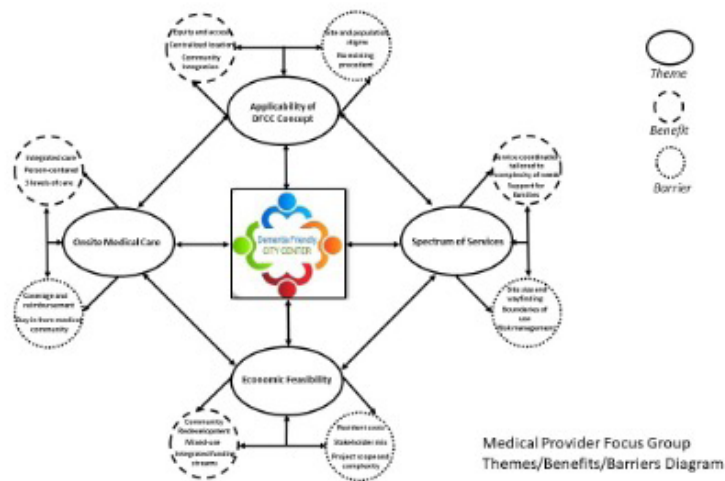
## KEY FINDINGS

Four major themes were identified from the medical provider focus group transcriptions which include: 1) applicability of the DFCC concept; 2) spectrum of services; 3) economic feasibility; and 4) on-site medical care (Figure 1). The medical provider focus group took place prior to the current COVID-19 pandemic and focused primarily on the system that would need to be in place for the DFCC model to be economically feasible through the lens of medical provision.

Five major themes were identified from the architect/developer focus group which include: 1) mixed-use precedents; 2) sustainable building practices; 3) linking the old with the new; 4) financial implications; and 5) development partnerships.

Five themes were identified from the community focus group transcription content analysis which include: 1) community education and acceptance; 2) amenities and activities; 3) maintaining family connections; 4) resident adaptation; and 5) staffing.

FIGURE 1. MEDICAL PROVIDER FOCUS GROUP THEMATIC DIAGRAM



## NEXT STEPS

While the student designs and data gathered from stakeholders have helped develop a grassroots understanding of the intricacies of the initiative at the state level, the next step requires engagement of federal level policy makers and program offices. To continue this research, engagement in federal level discussions of the larger questions of public/private funding opportunities, scalability of the new model and the necessary steps for the development of a national program which can enhance opportunities for health and wellness in dementia care are critical.

Potential contributing partners on this project could include, but not limited to: policy makers from the Environmental Protection Agency (EPA), the U.S. Department of Housing and Urban Development (HUD), the Administration for Community Living (ACL), the National Institute of Health (NIH), and the Centers for Medicare and Medicaid (CMS). In addition, international travel to research innovative dementia care models and sharing the Dementia Friendly City Center model with policy makers and care providers in Europe, Canada, and Asia will inform the opportunities for this new paradigm of care both nationally and internationally.

## RESEARCH BIO

**EMILY ROBERTS, PHD** is an associate professor of Interior Design at Oklahoma State University and has a research focus in Environmental Gerontology, the study of the person-environment fit between older adults and the physical environment. As an Environmental Gerontologist, Dr. Roberts has studied the factors involved in aging in place, as well as evolving models of long-term care, particularly for older adults with dementia and their families. Dr. Roberts has conducted research in the United States in Special Care Units for individuals with dementia, as well as in Canada, Taiwan, Germany, Czech Republic, and the Netherlands, focusing on innovation in government funded community-based dementia care programs.

## PUBLICATIONS

Roberts, E. and Carter H. (2022) (Accepted 2021) Adaptive reuse of malls for innovation in integrated dementia care: Architect and developer perspectives. In Ferdoous, F. (Ed) Springer International Publishing: Cambridge, MA.

Roberts, E. and Shehadeh, A (2021). (In press) Community visioning for innovation in integrated dementia care: Stakeholder focus group outcomes. *Journal of Primary Care and Community Health*.

Roberts, E. and Carter, H., (2020). Rethinking dementia care in the time of the Coronavirus outbreak. *Inquiry-The Journal of Health Care Organization Provision and Financing*, 57, 1-6.

## FEATURED ARTICLES

Wasick, J. (2020). Once Meccas of Retail Therapy, Now Homes to Elder Americans - *New York Times*, Published October 24, 2020.

Bourbon, B. (2020). 5 out of the Box Strategies for the Retail Real Estate Market - *Gensler Architects Research and Insight*, Published June 23, 2020.

Sodo, C. (2019). Mall Conversions Could Build on Pioneering Dementia Village Model - *Senior Housing News*, Published December 17, 2019.

## CONFERENCE PROCEEDINGS

Roberts, E. (2021) *Thinking outside of the box through adaptive reuse of closed malls for dementia programs and services*. Alzheimer's Association International Conference (In person). Denver, CO July 2021 (Poster Presentation)

Roberts, E. (2020) *Distressed urban mall environments for mixed-use Dementia Friendly City Centers*: Gerontological Society of America Annual Meeting (Virtual) November 2020. (Poster Presentation)

Anderzhon, J. & Roberts, E. (2019) Creating Senior Communities with existing building stock Leading Age National Conference, San Diego, CA, October 2012 (Oral Presentation)

Roberts, E. (2019) *Laying the groundwork for dementia friendly city centers: Community visioning outcomes*. Environmental Design Research Association, Brooklyn, New York May 2019 (Oral Presentation)