



STATE of MISSISSIPPI

Strategic Plan for Alzheimer's Disease and Related Dementias

2020 — 2025



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INTRODUCTION

The Mississippi State Strategic Plan for Alzheimer’s Disease and Other Dementias (*State Plan*) is a collaborative project led by The MIND Center at the University of Mississippi Medical Center in partnership with the Department of Mental Health, the Alzheimer’s Association Mississippi Chapter, and Alzheimer’s Mississippi, along with stakeholders from across the state including the Department of Human Services, Division of Aging; and the Department of Health, Office of Preventive Services. More than 40 representatives have participated in the *State Plan* development and implementation from family caregivers to health care

professionals and affiliates from organizations and occupations across the state such as long term care, hospice, home health, clinical research, social work, nursing, public safety, and pharmacy.



National Plan to Address Alzheimer’s Disease

The *State Plan* was modeled after the National Alzheimer’s Project Act which was signed into law on January 4, 2011 and was developed in recognition of the enormous social, emotional, and economic impact of Alzheimer’s disease (AD) and other dementias and the need to insure we are prepared to meet the needs of individuals and families impacted by these diseases in Mississippi. State Alzheimer’s Disease Plans create an infrastructure and accountability necessary to build dementia-capable programs, services and systems for the growing number of people affected by AD and other dementias.

The *State Plan* outlines a comprehensive and inclusive state strategy to prepare for the current and impending issues facing the state by quantifying the number of individuals affected by Alzheimer’s disease and dementia and determining the levels of services available and needed at all stages of the disease for the individual affected as well as their caregivers. This approach helps to prepare Mississippi to address the Alzheimer’s epidemic with an integrated and cost-effective approach.

The *State Plan* represents a major focus on bringing together advocates, caregivers, and professionals from health care, education, and social services to identify ways to more effectively address current and future needs related to Alzheimer’s disease. Individuals with diverse backgrounds and areas of expertise converged to invest their time, energy, and talents on a voluntary basis in the development and implementation of the *State Plan*.

The *State Plan* outlines five goals, each with accompanying objectives and strategic priorities with a focus on (1) Research, (2) Community Awareness, (3) Coordinated Care, (4) Caregiver Support, and (5) Brain Health. Broadly speaking, the *State Plan* outlines actions to: increase awareness of and understanding about Alzheimer’s disease; bring focused attention to the quality of care and services for persons with Alzheimer’s disease and dementia while improving the capacity of Mississippi’s workforce to respond to the needs of persons with these diseases; strengthen support for caregivers; increase Mississippi’s capacity for Alzheimer’s and dementia-related research and data collection; and elevate the level of understanding of Mississippians regarding ways to promote or improve brain health.

Overview of Alzheimer's disease

Dementia is an umbrella term for diseases and conditions characterized by a decline in cognitive skills that affect a person's activities of daily living. Dementia is caused by damage to nerve cells in the brain called neurons which causes those neurons to function improperly and eventually die. This in turn can lead to changes in memory and behavior and problems with reasoning and judgment.

Clinical guidelines for the diagnosis of Alzheimer's disease have been formulated by the National Institutes of Health - Alzheimer's Disease and Related Disorders Association; the American Psychiatric Association in the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM5); and the Consortium to Establish a Registry in Alzheimer's Disease. In 2011, the National Institute on Aging and the Alzheimer's Association released new research and clinical diagnostic criteria for Alzheimer's disease. The criteria for the diagnosis of Alzheimer's disease require the finding of a slowly progressive memory loss of insidious onset in a fully conscious patient.¹

The Diagnostic and Statistical Manual of Mental Disorders (DSM) is often utilized by physicians to define dementia. In 2013 the American Psychiatric Association released the fifth edition of the DSM-5 which incorporates dementia into the diagnostic categories of major and mild neurocognitive disorders. Major neurocognitive disorders are generally characterized by cognitive decline that interferes with everyday activities and that may require assistance. Mild neurocognitive disorders are evidenced by modest cognitive decline that does not interfere with everyday activities.²

There are multiple types of dementia including, but not limited to, AD, vascular dementia, Lewy Body dementia, frontotemporal, mixed dementia and Parkinson's disease. Each type of dementia is associated with distinct symptom patterns and brain abnormalities. Some conditions result in behaviors that mimic dementia, but are in fact reversible if treated. These reversible causes may include infections and immune disorders, metabolic problems and endocrine abnormalities, nutritional deficiencies, medication side effects, subdural hematomas, poisoning, brain tumors, anoxia, and normal-pressure hydrocephalus.³

Alzheimer's disease is the most common form of dementia and accounts for an estimated 60% to 80% of cases. Eventually the person with Alzheimer's disease will require complete care as their ability to carry out basic bodily functions such as walking and swallowing will be impaired. Alzheimer's disease is ultimately fatal.⁴

Alzheimer's Disease and Dementia Prevalence

The impact of Alzheimer's disease is far-reaching. An estimated 5.8 million Americans have Alzheimer's dementia in 2019, including 55,000 in Mississippi. That's an increase of 1,000 in Mississippi over 2018. It is estimated that the number of people aged 65 and older living with Alzheimer's disease in Mississippi will increase by 18.2% by 2025 to 65,000.⁵


In Mississippi, the incidence of the disease is equally daunting. It is estimated that in 2014, 51,000 Mississippians aged 65 and older are living with Alzheimer's disease. This number does not include the many thousands more with younger-onset Alzheimer's disease or those with related dementias. Mississippi, like the rest of the country, is in the midst of an unprecedented growth in the older population. Between 2014 and 2025, the number of persons aged 65 and over with Alzheimer's disease in Mississippi is expected to grow by 27% (from 51,000 people to 65,000 people).⁵

The impact of Alzheimer's disease is experienced perhaps most intensely by family caregivers. Nationally, more than 16 million Americans provide unpaid care for people with Alzheimer's or other dementia. These caregivers provided an estimated 18.5 billion hours valued at nearly \$234 billion. In Mississippi, 207,000 caregivers provided a total of 236 million hours of unpaid care, valued at a total of \$3 billion. Caregivers of people living with Alzheimer's have a \$142 million higher health cost than those not caring for someone with Alzheimer's.⁵

Sadly, deaths due to Alzheimer's have increased an alarming 145 percent since 2000, while deaths for most other major diseases have decreased. Alzheimer's disease is the sixth leading cause of death in the U.S. It kills more than breast cancer and prostate cancer combined. One in three seniors dies with Alzheimer's or another dementia. In 2017, there were 1,626 deaths from Alzheimer's in Mississippi. This represents an increase of 267% in Alzheimer's deaths in Mississippi since 2000.⁵

The prevalence of Alzheimer's disease has a significant impact on the health care system and on health care costs and the costs are unsustainable. For the third consecutive year in 2018, the cost of caring for individuals with Alzheimer's is surpassing a quarter of a trillion dollars. By 2050, these costs could rise as high as \$1.1 trillion. It is expected that the Medicaid costs of caring for people with Alzheimer's in Mississippi will be \$587 in 2019 – and is expected to grow by 22.9 percent over the next six years (by 2025).⁵

The growth in the incidence and prevalence of Alzheimer's disease has important implications for health care providers. The expansion of the older population nationally and in Mississippi has created an increased demand for health care services, including importantly, the demand for long



term care services. Nursing homes, assisted living facilities, home health agencies, personal assistance services agencies, adult day services agencies and other providers require staff to support a growing population with long term care service needs.

Beyond that, all health care providers must rely increasingly on the availability of a workforce that has been trained to support the specific care needs of individuals with Alzheimer’s disease and related disorders. These statistics highlight the importance of the *State Plan* which is paramount to addressing the many challenges facing people with Alzheimer’s disease and their families in Mississippi.

References

¹ National Institute on Aging. “Alzheimer’s Disease Diagnostic Guidelines.” Dementia Resources for Health Professionals. Nov. 21, 2019.

www.nia.nih.gov/health/alzheimers-disease-diagnostic-guidelines

² American Psychiatric Association. “Diagnostic and Statistical Manual of Mental Disorders.” May 18, 2013.

www.psychiatry.org/psychiatrists/practice/dsm

³ Mayo Clinic. “Dementia Symptoms and Causes.” Patient Care & Health Information. April 19, 2019.

www.mayoclinic.org/diseases-conditions/dementia/symptoms-causes/syc-20352013

⁴Alzheimer’s Association. “What is Alzheimer’s Disease?” Alzheimer’s and dementia. Dec. 5, 2019.

www.alz.org/alzheimers-dementia/what-is-alzheimers

⁵Alzheimer’s Association. 2019 Alzheimer’s Disease Facts and Figures. Mar. 5, 2019.

www.alz.org/alzheimers-dementia/facts-figures

HISTORY

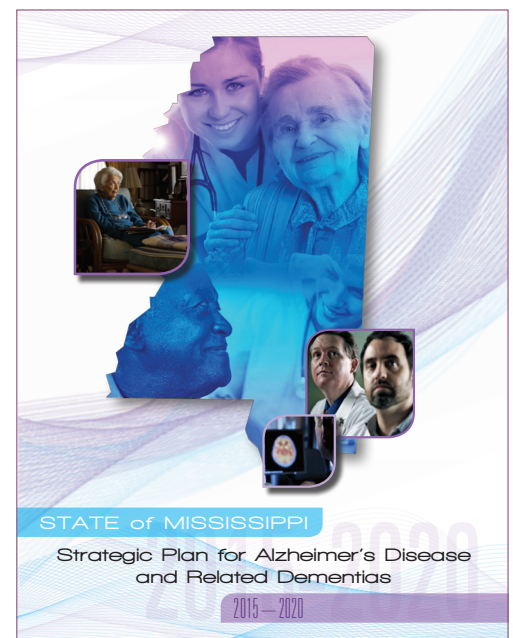
In 1998, the Alzheimer's Association Mississippi Chapter aggressively lobbied for and secured passage of legislation which for the first time, provided a means to address the critical issues related to Alzheimer's disease and dementia as a matter of state public policy. The genesis of the 1998 effort began in 1996 when Alzheimer's Association volunteers first appeared before the Public Health Committees of the Mississippi House of Representatives and Senate for support. In 1997, Senate Committee Chairman, Jim Bean, and House Committee Chairman, Bobby Moody, requested that the Association provide specific legislative recommendations.

Those specific recommendations were made in 1998. The Department of Mental Health, under the leadership of Director Randy Hendrix, PhD, supported legislation [codified at Mississippi Code of 1972, § 41-4-7 (ee)], which required that the Department of Mental Health develop an Alzheimer's *State Plan* for two key reasons:

- 1) To provide education and training to service providers, family caregivers, and others who deal with Alzheimer's disease and other dementias;
- 2) To develop adult day care, family respite care, and counseling programs to assist families who maintain persons with Alzheimer's disease and other dementias in the home setting.

Initially the *State Plan* served as an operational guide that outlined the activities and priorities for the Department of Mental Health Division of Alzheimer's Disease and Related Dementias. Effort to expand the *State Plan* grew with the passage of the National Alzheimer's Project Act of 2011 and subsequent development of a National Plan to Address Alzheimer's Disease. In 2013, the Division of Alzheimer's formalized strategic partnerships with relevant stakeholders in an effort to share resources related to Alzheimer's disease and other dementias and work began to create the formalized *State Plan* that exists today.

Following months of extensive collaboration amongst more than 40 contributors and stakeholders, the *2015 - 2020 State of Mississippi Strategic Plan for Alzheimer's Disease and Related Dementias* was released on December 5, 2014 at the 3rd Annual Mississippi Alzheimer's *State Planning* Summit. Implementation of the goals, objectives and strategic priorities outlined in the *State Plan* began on July 1, 2015 and continues today, with significant progress resulting in the focus areas including research, community awareness, coordinated care, caregiver support, and brain health. In 2018, the Department of Mental Health entered into a Memorandum of Understanding with The MIND Center at the University of Mississippi Medical Center to assume responsibility for the management of the *State Plan* to continue to advance its mission to address the challenges facing people with Alzheimer's and dementia and their families in Mississippi while strengthening collaboration among public and private stakeholders.






RESEARCH INTRODUCTION

A worldwide quest is currently underway to find new treatments to slow, stop, and even prevent Alzheimer's disease and related dementias. With increased public attention and federal research funding, the trajectory of these diseases can change. Under the leadership of the National Institutes of Health (NIH), the Alzheimer's research community is intensifying its efforts, seeking to identify effective ways to treat or prevent Alzheimer's and related dementias as soon as possible.

A division of the U.S. Department of Health and Human Services, NIH is the largest public funder of biomedical research in the world, investing more than \$30 billion in taxpayer dollars to achieve its mission to enhance health, lengthen life, and reduce illness and disability. Fighting Alzheimer's disease and related dementias is a priority not just at the NIH and other Federal agencies, but across the Nation and much of the world.

In January 2011, then President Obama signed the National Alzheimer's Project Act (NAPA), which called for an aggressive and coordinated U.S. plan to accelerate Alzheimer's disease research, provide better clinical care, and improve services for people with the disease and their families. The law also established an Advisory Council on Alzheimer's Research, Care, and Services, consisting of some of the Nation's foremost experts. The Advisory Council's first National Plan to Address Alzheimer's Disease in 2012 outlined objectives and set milestones to achieve the ultimate research goal: to find effective interventions to treat and prevent Alzheimer's and related dementias by 2025.¹



Updated annually, the research component of the National Plan is a collaborative, constantly evolving framework. It outlines the basic, translational, and clinical research needed to understand and conquer Alzheimer’s disease and related dementias. It also encourages the American public, which is increasingly aware of the devastation wrought by this disease, to be fully engaged in this critical effort.

Research currently underway in Mississippi is steadily adding to an enhanced understanding of the aging brain and we are closing in on more effective ways to prevent and treat Alzheimer’s and related diseases. The goals, objectives, and strategic priorities of the Research Group were mirrored after the National Alzheimer’s Project Act to promote research collaboration, participation, and funding in Mississippi. The evolution of the Research Group of the *State Plan* has led to the ascertainment of numerous institutions, organizations, and investigators in Mississippi and surrounding states who are actively involved in brain aging and neuroscience research.

Many of the identified researchers have become members of the Research Group leading in 2019 to the establishment of the Brain Aging Research Alliance (BARA) and the creation of a centralized website which will ultimately contain information regarding active Alzheimer’s and dementia research studies. Access to the website will be made available to investigators to promote research collaboration and to patients and families, primary care providers, and specialists to improve access to, and participation in, active research studies and clinical trials.

References

¹ U.S. Department of Health & Human Services. “National Alzheimer’s Project Act.” Oct. 31, 2019.
aspe.hhs.gov/national-alzheimers-project-act

GOAL 1: RESEARCH

Support research in Alzheimer's disease and related dementias to accelerate scientific discoveries.

OBJECTIVE 1: COLLABORATION

Promote research collaboration in Mississippi and other southeastern states to speed the development of new treatments and methods of prevention for Alzheimer's disease and other dementias.

STRATEGIC PRIORITIES:

1. Establish the Brain Aging Research Alliance (BARA) to include researchers and research affiliates from organizations, universities, and institutions across the state to serve as an umbrella structure to coordinate and foster research efforts on Alzheimer's disease and other dementias in Mississippi.
2. Conduct an annual survey of state universities, colleges, hospitals, and independent research organizations to identify what research is currently being conducted in the areas of Alzheimer's disease and related dementias as well as any studies planned in the future.
3. Create and maintain an authoritative list of active brain aging researchers in Mississippi and southeastern states (including those involved in industry-sponsored clinical trials and investigator-initiated research studies) and their affiliated research institutions.
4. Complete construction on a new, centralized website (www.brainagingresearchalliance.org) to publish and maintain the research information and make it accessible to patients, families, providers, researchers and research affiliates.
5. Convene a Brain Aging Research Symposium for researchers from Mississippi and other southeastern states to discuss the latest studies, theories, and discoveries and promote networking and collaboration opportunities.
6. Encourage private research organizations to explore research and partnership opportunities with other national agencies e.g. the National Institutes of Health (NIH), the National Institute on Aging (NIA), Collaboration for Alzheimer's Prevention (CAP), Global Alzheimer's Platform Network (GAP-NET), or the International Alzheimer's and Related Dementias Research Portfolio (IADRP).

OBJECTIVE 2: PARTICIPATION

Educate the public on the availability, purpose, and value of Alzheimer's disease and dementia research and encourage participation in current and future studies and clinical trials.

STRATEGIC PRIORITIES:

1. Develop comprehensive goals and strategies to enhance research recruitment and increase enrollment in clinical trials and research studies through community outreach.
2. Leverage digital platforms such as web and social media as well as public service announcements via radio/TV to enhance the distribution of research study information and promote participation.
3. Work with the *State Plan* Community Awareness Group to create and disseminate resource information about the new website (www.brainagingresearchalliance.org) to patients, families, researchers, and primary care providers to improve access to available research studies.
4. Create and distribute culturally sensitive and appropriately tailored informational materials and educational programs for the public focused on increasing research diversity and participation from underrepresented communities.
5. Collaborate with private, state, and federal partners to raise awareness regarding available research studies and to increase participation of medically underserved populations in our state.
6. Engage health care providers to encourage referral to and participation in Alzheimer's disease/dementia research projects and clinical studies.
7. Promote national websites that aggregate research study information e.g. clinicaltrials.gov, nia.nih.gov/Alzheimers/clinical-trials, trialmatch.alz.org, as resources for increasing participation in clinical trials.
8. Explore the use of telemedicine technology applications in research recruitment efforts to reach rural populations and remote communities.



OBJECTIVE 3: FUNDING

Leverage strategies to attract and increase research funding through various sources including state and federal government, universities, colleges, public and private individuals and organizations, and other stakeholders.

STRATEGIC PRIORITIES:

1. Support grassroots efforts to encourage congress to increase federal funding for Alzheimer's and dementia research.
2. Promote increased taxpayer contributions to Alzheimer's research through state-approved mechanisms such as a state income tax check-off to fund Alzheimer's research.
3. Identify organizations providing federal and private funding for Alzheimer's and dementia research and encourage researchers to apply for available grants to expand research funding.



COMMUNITY AWARENESS INTRODUCTION

As the prevalence of dementia grows, many myths and inaccurate information regarding Alzheimer's disease and other dementias persist. Public misperceptions about dementia not only lead to delayed diagnosis and stigma, but persons with dementia and those who care for them are often unaware of how to meet care needs. It is estimated that about 200,000 individuals younger than age 65 have some form of dementia, including Alzheimer's disease which is referred to as younger or early onset.¹

As approximately 55,000 Mississippians have been diagnosed with Alzheimer's disease alone², the need to understand dementia and how to provide care is paramount. Priorities of the plan include increasing public awareness across the state through education related to Alzheimer's disease and dementia, developing community partnerships and resources for individuals with dementia and their care partners, and promoting collaborative projects that seek to further the goals and objectives outlined in the *State Plan*. The Community Awareness Group partners with other *State Plan* groups to coordinate the dissemination of resources and materials that are developed to educate, inform and support Mississippians living with Alzheimer's and dementia as well as advocates and professionals involved in their care and support.

References

¹ Alzheimer's Association, Mississippi Alzheimer's Statistics, 2019 Alzheimer's Disease Facts and Figures report at alz.org/facts (retrieved December 2019).

² Alzheimer's Association, Mississippi Alzheimer's Statistics, 2019 Alzheimer's Disease Facts and Figures report at alz.org/facts (retrieved November 2019).

GOAL 2: COMMUNITY AWARENESS

Increase public awareness of Alzheimer's disease and other dementias.

OBJECTIVE 1: EDUCATION

Educate the public through dissemination of materials through a variety of venues including, but not limited to, schools, civic and faith-based organizations, media events, and public service announcements.

STRATEGIC PRIORITIES:

1. Disseminate content for public awareness campaigns to address a wide range of issues and audiences including, but not limited to, identifying early warning signs and effective strategies for obtaining appropriate diagnosis, recognizing the stage of the disease, and accessing available resources.
2. Determine appropriate venues for outreach and education.
3. Promote the use of social media such as Facebook and Twitter as well as traditional media including print, radio and television when disseminating public education campaign messages.
4. Ensure information and educational materials are offered at appropriate literacy, language, and legibility (font size) levels for a diverse population.

OBJECTIVE 2: COMMUNITY PARTNERSHIPS

Identify and develop essential community partnerships across the state.

STRATEGIC PRIORITIES:

1. Identify community partners who provide care and support services for those battling Alzheimer's and dementia or who have an interest in promoting prevention of these diseases.
2. Encourage partnerships with health care professionals such as providers, advanced practice nurses, clinicians and social workers.
3. Explore educational program models to assist community gatekeepers such as first responders, clergy, bank tellers and members of the general public with identifying individuals with cognitive impairments who are at risk in the community.

OBJECTIVE 3: REGIONAL RESOURCE SITES

Promote regional resource sites across the state that provide information and service listings.

STRATEGIC PRIORITIES:

1. Identify established information and referral clearinghouses.
2. Review existing resource and service listings for accuracy and breadth of information.
3. Update and expand information regarding topics related to dementia, resources and services.
4. Enhance sites with comprehensive information and resource listings.

OBJECTIVE 4: COLLABORATION

Collaborate with other State Plan Goal Groups to advance community awareness projects and activities of the *State Plan*.

STRATEGIC PRIORITIES:

1. Meet with Goal Group leaders to understand how the Community Awareness group can support their activities and initiatives.
2. Identify information sharing networks that can be leveraged to promote outreach and awareness to advance the goals and initiatives of the State Plan Goal Groups.
3. Partner with State Plan leadership to communicate progress on strategic priorities.



COORDINATED CARE INTRODUCTION

Providing all people who are battling Alzheimer’s disease and dementia with the highest quality of care in the most efficient manner requires an adequate supply of culturally-competent professionals with appropriate skills, ranging from direct care workers to community health and social workers to primary care providers and specialists. High-quality care should be provided from the point of diagnosis in settings including provider’s offices, hospitals, people’s homes, and nursing homes.¹

Improved quality of life for individuals affected by Alzheimer’s disease and other dementias can be achieved through a collaborative statewide system that addresses the complex and individualized care needs of the patient. Over the course of Alzheimer’s disease, the affected individual will encounter the full spectrum of care providers from the least skilled and untrained to the most specialized in the medical field.

This reliance on caregivers and health professionals at every stage of the disease requires accurate information and education on detection, diagnosis, care, treatment, and coordination among providers that spans every level of licensure. Further, care must address the complex needs that persons with Alzheimer’s and dementia have due to the physical, cognitive, emotional, and behavioral symptoms of the disease and any co-existing/chronic conditions.

The Coordinated Care Group seeks to address gaps in education, care coordination, and access to care through health care professionals and organizations across the state and to promote a culturally sensitive and competent healthcare workforce to improve the quality of life for individuals and families facing the devastation of Alzheimer’s disease and other dementias.

Reference

¹ U.S. Department of Health & Human Services. “National Alzheimer’s Project Act.” Oct. 31, 2019.
<https://aspe.hhs.gov/national-alzheimers-project-act>

GOAL 3: COORDINATED CARE

Enhance the delivery of coordinated, competent, and comprehensive dementia care to improve the quality of life for persons with Alzheimer's disease and dementia as well as their families/caregivers.

OBJECTIVE 1: EDUCATION

Create and implement structured educational programs to develop a workforce that is competent, culturally sensitive, and efficient in dementia care.

STRATEGIC PRIORITIES:

1. Determine the target audience for dementia programs such as nurses, nurse practitioners, physicians, certified nursing assistants, physical, speech and occupational therapists.
2. Identify currently available training programs relative to dementia care and support the expanded delivery of existing evidence-based education.
3. Collaborate and coordinate with other organizations in the state e.g. the American Heart Association, Diabetes Foundation, Mississippi State Medical Association, Office of Preventive Health, and the Mississippi Health Care Association, to establish state specific education programs to insure inclusion and focus on dementia care.
4. Create awareness about dementia care programs with target audiences and determine incentives for program completion such as a specific certification or designation.
5. Support education and training on cognitive care planning, coordinated care management codes, and transitional care management for health care providers working in dementia care.

OBJECTIVE 2: CARE COORDINATION

Improve the management and coordination of care for persons with Alzheimer's disease and dementia from presentation of illness through end of life.

STRATEGIC PRIORITIES:

1. Promote earlier diagnosis through the inclusion of cognitive assessment screening as part of the annual Medicare wellness visit by primary care and family medicine providers.
2. Update licensed health care providers on the latest research and best practices for care management of patients with Alzheimer's disease and other dementias.
3. Support the implementation of dementia care guidelines across all health care settings (such as home health, hospitals, rehabilitation, Department of Motor Vehicles and long term care) regarding the management and transition of care for persons with Alzheimer's and other dementias and their families/caregivers.
4. Encourage health care providers to include Alzheimer's disease and dementia in chronic disease management plans.

OBJECTIVE 3: ACCESS TO CARE

Expand access to dementia care through enhanced awareness and availability of dementia care services and resources.

STRATEGIC PRIORITIES:

1. Identify locations and services of current health care providers and gaps in accessibility to dementia care.
2. Create guidelines to identify comprehensive dementia care centers in Mississippi including those that offer diagnosis and treatment for Alzheimer's and dementia, as well as care delivery in the outpatient and/or inpatient arena, care coordination, counseling, and caregiver support services.
3. Educate community health care providers, patients, and families regarding where the comprehensive dementia care centers exist and how to access them.
4. Promote awareness of current telemedicine initiatives and sites and support statewide access to dementia care for medically underserved and rural communities.
5. Create collateral materials to distribute to providers, health departments and pharmacists regarding available dementia care resources and "need to know" information including the Medicare Annual Wellness visit for cognitive/dementia screenings.



CAREGIVER SUPPORT INTRODUCTION

In the state of Mississippi there are over 200,000 caregivers of persons with Alzheimer's disease and other related dementias who provide 236 million hours of unpaid care at a value of almost \$3 billion dollars.¹ These numbers are expected to significantly increase as our population ages and baby boomers become seniors in need of help.

Unpaid caregivers (often family members and women) are a most valuable resource that needs to be guarded to prevent our most vulnerable and largest growing population from being at even greater risk of institutionalization and exploitation. Family caregivers prevent health care systems from being overloaded with patients suffering from Alzheimer's disease and other related dementias.

To best help caregivers, we need to identify the current support services and resources that exist in our state, insure they are being utilized, and close any resource gaps. The most critical services for caregivers are respite care, adult day care, and home- and community-based services across the state. These services provide adjunct care so caregivers get a break, may continue to work, and can take care of themselves as well as their loved one. Comprehensive support for caregivers is vital to prevent caregiver burnout and institutional placement.

A key goal is to educate family caregivers who are providing care for Alzheimer's and dementia patients in the home or other settings. Caregivers are much more likely to report high stress levels, be prescribed antidepressant medication, and develop medical issues of their own than the general population, and all these issues then interfere with caregiving responsibilities. Research findings indicate that if caregivers are informed and educated they are better able to manage stress and have fewer medical illnesses of their own.

Supporting caregivers is an essential piece of the complicated puzzle of Alzheimer's disease and related dementias to maintain a patient's independence and allow them to age in place in their own home as long as possible, but caregivers need help to maintain their loved ones' independence and dignity.

Reference

¹ Alzheimer's Association, 2019 Alzheimer's Disease Facts and Figures report at alz.org/facts (retrieved November 2019).

GOAL 4: CAREGIVER SUPPORT

Enhance the availability of and access to support services for family caregivers of individuals with Alzheimer's disease and dementia.

OBJECTIVE 1: RESOURCES

Identify all available caregiver support services and resources across the state and make them available to the public and health care professionals.

STRATEGIC PRIORITIES:

1. Develop an online interactive state map to function as a centralized clearinghouse of information of available public and private caregiver support resources.
2. Promote continued collaboration and involvement of all community partners, both public and private, in centralizing information regarding available caregiver support services.

OBJECTIVE 2: EDUCATION

Support the delivery of educational programs to enhance public awareness of available support services in Mississippi and to better equip family caregivers to deliver quality care at home while maintaining their physical and psychological well-being.

STRATEGIC PRIORITIES:

1. Identify and collaborate with organizations and agencies that are currently providing educational information and training programs for communities, faith based services, caregivers, family members, and health care providers to expand availability as well as to identify underserved areas or groups.
2. Assist with providing materials to community groups, caregivers, health care providers and facilities through a centralized mechanism including online resources.
3. Provide training and resource materials to health care providers and the medical community to enhance knowledge of available resources and support services for caregivers.
4. Deliver education to family caregivers on best practices for care delivery in the home as well as methods to reduce caregiver stress and burnout.
5. Engage for-profit and non-profit foundations, the business community, and the state and federal government, to provide funding for caregiver training, support materials, and services.

OBJECTIVE 3: SERVICES

Increase the access to and availability of caregiver support services with a focus on the delivery of (1) respite care; (2) adult daycare; and (3) home and community-based services across the state including rural and urban areas with under-served populations.

STRATEGIC PRIORITIES:

1. Identify available resources in the areas of respite care, daycare and home/community based services, and promote expansion to remote and underserved areas.
2. Pursue appropriation of state and federal funding for the expansion of respite care, adult daycare, and home/community based services as well as adjunct services such as transportation.
3. Support legislative initiatives to expand services for Alzheimer's and dementia patients and/or support family caregivers.



BRAIN HEALTH INTRODUCTION

More than 5.8 million Americans and over 55,000 Mississippians are currently living with Alzheimer's and these numbers are projected to more than double by 2050¹ unless we implement strategies to prevent, slow or stop this devastating and costly disease. Promising prevention and brain health research is now focused on eliminating risk factors that contribute to the development of Alzheimer's disease and dementia, promoting behaviors which encourage brain health beginning early in life, and supporting earlier diagnosis and treatment.

We know that changes in the brain can occur many years before the first symptoms of Alzheimer's appear. These early brain changes point to a possible window of opportunity to prevent or delay debilitating memory loss and other symptoms of dementia. While research may identify specific interventions that will prevent or delay these diseases in some people, it's likely that many individuals may need a combination of treatments based on their own risk factors.²

Maintaining a healthy heart can help to maintain a healthy brain. We have long known that the diseases and conditions that clog the arteries of the heart also clog the arteries of the rest of the body, including the brain. It all boils down to damage of the arteries, the blood vessels critical for blood flow and oxygen delivery to the organs in the body. Arterial damage leads to blockages, which lead to heart disease and heart attacks, strokes, peripheral vascular disease, and vascular dementia.²

Meanwhile, more and more research is linking Alzheimer's and dementia to the same risk factors that cause heart disease including obesity, high blood pressure, high cholesterol, and diabetes. Research is still evolving, but evidence is strong that people can reduce their risk of cognitive decline by making key lifestyle changes, including participating in regular physical activity, staying socially engaged, and maintaining good heart health.

The objectives and strategies of the *State Plan* Brain Health Group are aimed at changing the trajectory of cognitive decline and improving brain health in Mississippi beginning early in life by focusing on assessing the severity and impact of cognitive decline in the state; including brain health in strategic planning for all Mississippi public health efforts; mobilizing community partners and stakeholders to join forces to promote brain health; and increasing community awareness and educating health care providers about the prevention and treatment of Alzheimer's disease and dementia, the correlation between Alzheimer's and chronic conditions (such as heart disease), and the benefit of early diagnosis and intervention.

References

¹ Alzheimer's Association, Mississippi Alzheimer's Statistics, 2019 Alzheimer's Disease Facts and Figures report at alz.org/facts (retrieved Dec. 2019).

² Tello, Monique. "Brain health rests on heart health: Guidelines for lifestyle changes." Harvard Health Blog. June 12, 2019. www.health.harvard.edu/blog/whats-good-for-the-heart-is-good-for-the-mind-2-2019061216812

GOAL 5: BRAIN HEALTH

Implement initiatives that improve brain health and promote healthy aging in Mississippians

OBJECTIVE 1: SURVEILLANCE

Leverage use of surveillance systems and survey mechanisms to assess the level of understanding about ways to promote brain health as well as the public health impact of declining brain function, inform public health policy and strategies, and monitor progress toward promoting improved quality of life.

STRATEGIC PRIORITIES:

1. Continue use of survey tools such as the Behavioral Risk Factor Surveillance System (BRFSS) and the Alzheimer's State Assessment Plan (ASAP) Survey to collect health outcomes data for persons with impaired brain function, Alzheimer's disease and other dementias, including the impact of cultural variances.
2. Review surveillance data on an ongoing basis to identify trends in brain health knowledge and understanding within the state.
3. Utilize surveillance data to inform the public and state government regarding the scope of brain function impairment in Mississippi and to guide the efforts of the Brain Health Group.

OBJECTIVE 2: PUBLIC AWARENESS AND EDUCATION

Develop a public awareness campaign incorporating culturally sensitive strategies to educate Mississippians about brain health across the life span and increase public awareness about Alzheimer's disease and other dementias.

STRATEGIC PRIORITIES:

1. Focus public awareness campaigns on the link between heart health and brain health and the importance of including brain health initiatives in wellness campaigns beginning in childhood.
2. Emphasize the role that nutrition, exercise, smoking cessation and management of comorbid health conditions such as hypertension, diabetes and obesity play in healthy aging and prevention of Alzheimer's and dementia.
3. Tailor educational programs to address the stigma associated with Alzheimer's disease and dementia.
4. Deliver outreach education on the early signs and symptoms of Alzheimer's disease and dementia and promote the benefits of early detection and diagnosis.

OBJECTIVE 3: PUBLIC HEALTH PRIORITY

Include brain health as a major consideration in strategic planning for all public health efforts, chronic diseases and issues related to aging and caregiving in Mississippi; engage and mobilize public and private community partners at both the national and state level to promote brain health.

STRATEGIC PRIORITIES:

1. Leverage strategies outlined in “The Healthy Brain Initiative,” the “Brain Health Partnership Prospectus,” and other brain health campaigns available for public use to promote healthy aging in Mississippi.
2. Integrate brain health strategies and recommendations into state and local public health plans where appropriate.
3. Establish and mobilize a broad network of partners in the areas of business, education, manufacturing, and other community-based employers and organizations to implement and promote brain health and wellness programs.
4. Develop partnerships with non-profits and public health programs in the state including, but not limited to, American Heart Association, Diabetes Foundation, Brain Injury Association, Office of Preventive Health, and The Partnership for a Healthy Mississippi, to prioritize brain health in public health policy.

OBJECTIVE 4: HEALTH CARE EDUCATION

Deliver educational programs to inform health care providers about current and emerging research findings in the areas of brain health promotion, prevention, and early diagnosis of Alzheimer’s disease and dementia.

STRATEGIC PRIORITIES:

1. Develop and implement continuing education programs that improve the ability of health care providers to: promote brain health and healthy aging, recognize early signs and symptoms of Alzheimer’s disease and other dementias utilizing brain health screening and assessment tools in a variety of clinical settings, and provide guidance to patients and families on where to seek treatment and support.
2. Encourage health care providers to make brain health check-ups standard practice as part of annual physicals and wellness visits.
3. Develop strategies to insure health care professionals recognize the role of families in the delivery of care for individuals with Alzheimer’s disease and the importance of caregiver stress management and promotion of their health and well-being.
4. Target the higher prevalence of Alzheimer’s and dementia among African Americans and Hispanics and encourage health care providers to promote disease prevention by addressing risk factors such as heart disease, diabetes, and obesity.



NEXT STEPS

States are on the front lines of caring for individuals with Alzheimer’s and dementia and supporting family caregivers. As a result, Alzheimer’s disease and dementia has a major impact on the state’s budget and financial considerations such as Medicaid. For our state to be prepared for the burgeoning number of Mississippians who are currently battling these diseases and will be affected by them in the future, a state plan to address Alzheimer’s and dementia is critical.

The 2020 – 2025 Mississippi State Strategic Plan for Alzheimer’s Disease and Related Dementias will continue to be an important roadmap to guide state government and stakeholder organizations and individuals on critical dementia issues and potential solutions. The same level of collaboration among individuals and organizations that went into developing the updated 2020 – 2025 State Plan is anticipated as the plan’s implementation is continued.

Full implementation and timely execution of the State Plan will be dependent on the involvement and contributions of a broad constituency of community partners as well as support from the state legislature. Given the high level of interest and commitment among individuals and organizations involved in the process thus far, it is expected that the plan will achieve results that will have a significant and positive impact on our state’s family caregivers, health care professionals, and those living with Alzheimer’s disease and other dementias.

2020 – 2025 STATE PLAN GOAL GROUP MEMBERS & CONTRIBUTORS

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