

INTRODUCTION

The [Healthy Brain Initiative: State and Local Road Map for Public Health, 2023-2027](#) (HBI Road Map) is the first in the HBI Road Map Series to develop an evaluation tool in an effort to measure the local, tribal, state and national impact of the HBI Road Map Actions.

The overarching vision of the HBI is that everyone deserves a life with the healthiest brain possible. This tool helps to measure the progress toward that vision by offering suggested measures and metrics for state, local and tribal health departments to track, evaluate and measure implementation of the HBI Road Map. For additional guidance on setting up an evaluation plan and logic model, use the [CDC Framework for Program Evaluation](#). The measures in this tool fit into step 4 of the framework — gather credible evidence.

The 24 actions of the HBI Road Map are divided across 4 domains, aligned with the Essential Public Health Services. Each domain has desired outcomes for groups of related actions, allowing for state and local public health efforts to work toward collective impact.

Measuring the Impact of the HBI Road Map

The Alzheimer’s Association® is committed to tracking the nationwide impact of the HBI Road Map. To do this, state, local and tribal level evaluation is needed. Nationwide evaluation, like data collection, works best when public health departments are tracking similar measures at a similar cadence. This evaluation tool offers suggested evaluation measures for each action and the Alzheimer’s Association is committed to collecting and analyzing these measures across the country to evaluate the nationwide impact.

Potential users of this tool are state, local and tribal health officials working to implement the HBI Road Map. The tool can be used by Alzheimer’s and Dementia state coalitions and could be used to measure progress on an Alzheimer’s disease jurisdictional plan. The tool is also useful for CDC BOLD Awardees and can provide data measures to show progress toward the required outcomes of that award. It specifically can help track progress on the required intermediate outcome “improved implementation of jurisdiction Alzheimer’s disease and related dementias (ADRD) goals that are comprehensive across public health domains, ADRD topics and prevention levels.” The tool can also provide data to answer the first two BOLD evaluation questions:

1. What progress has been made adding designated Road Map Series actions to Alzheimer’s disease and related dementia (ADRD) jurisdictional strategic plans?
2. What progress has been made in the implementation of Road Map Series actions?

The national evaluation will include data and metrics from a variety of sources including the Behavioral Risk Factor Surveillance System (BRFSS), Medicare claims data and Healthy People 2030 objectives. It will provide an annual overview of nationwide implementation of the HBI Road Map as well as a summary of the entire four-year span of the document. State, local and tribal health departments are encouraged to work with their local Alzheimer’s Association chapters to share their evaluation plans and data collected through this tool to be part of the national evaluation. The Alzheimer’s Association can help store data over time and provide an annual report of data and progress. Contact publichealth@alz.org for more information about connecting with your local chapter and contributing to the national evaluation.

HBI Road Map Domains

Strengthen Partnerships and Policies (P Domain): Public health strengthens, supports and mobilizes community partnerships to improve brain health. It also creates, champions and implements supportive policies and plans.

P – Outcomes

- Increase community partnerships
- Increase integration with other chronic disease efforts
- Increase policy action and implementation

Measure, Evaluate and Utilize Data (M Domain): Public health monitors health status to identify and solve community health problems and evaluates effectiveness, accessibility and quality of personal and population-based health services. Findings are translated into programs and policies to improve brain health across the life course.

M – Outcomes

- Increase data availability, quality and utilization
- Increase data-informed decision making and action

Build a Diverse and Skilled Workforce (W Domain):

Public health trains and prepares the public and personal health care workforce to educate their constituents and provide the best care to people at risk for or living with dementia while supporting caregivers.

W – Outcomes

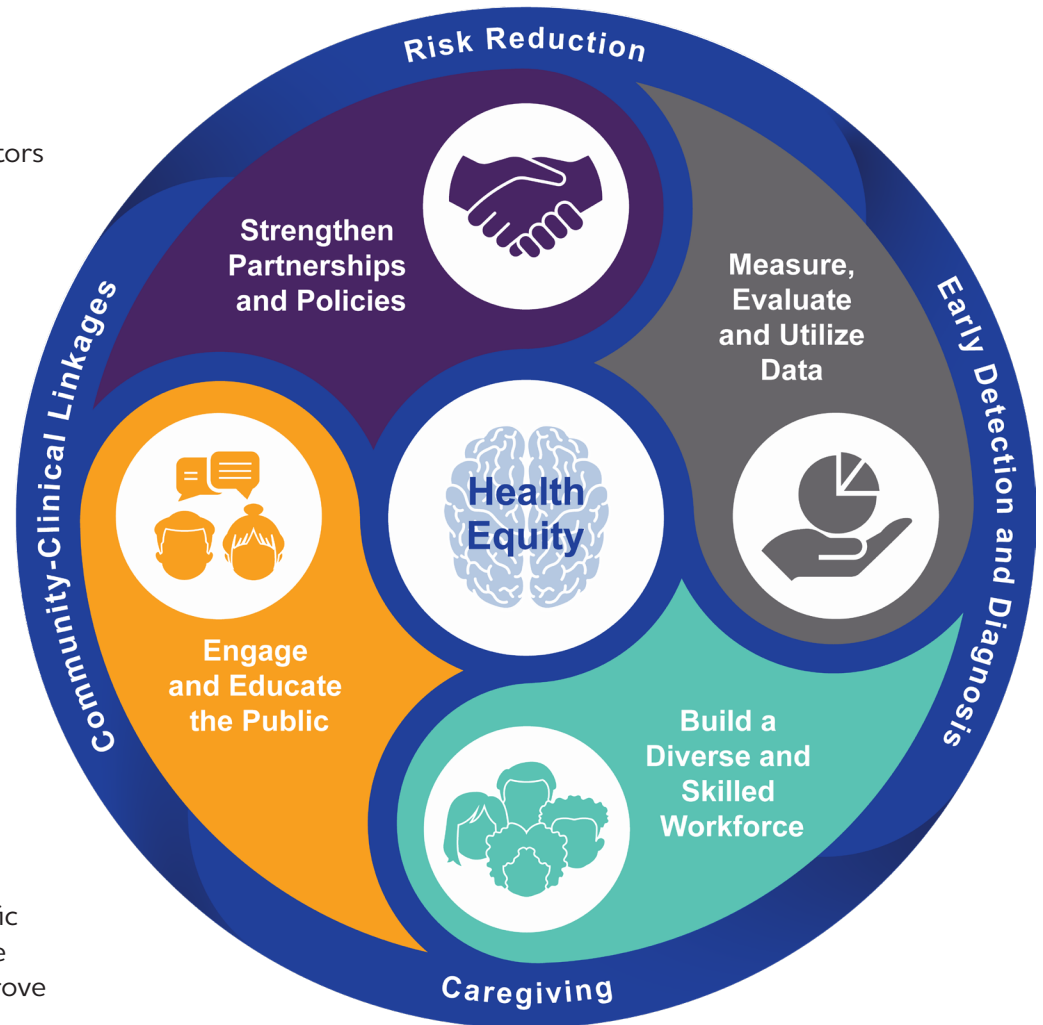
- Reduce stigma and bias about cognitive decline
- Increase knowledge and skills of current and future workforce

Engage and Educate the Public (E Domain):

Public health engages with diverse communities to understand how messages are best delivered and what information to convey to specific populations. Public health communicates effectively to educate people about factors that influence brain health and ways to maintain or improve their cognitive health and quality of life.

E – Outcomes

- Increase public knowledge about brain health, risk factors for dementia and benefits of early detection and diagnosis
- Increase public knowledge and use of services for people living with dementia and their caregivers



USING THE EVALUATION TOOL

This evaluation tool provides suggested measures for each action and evaluation questions to guide further impact evaluations. The tool can be used in whole or in part. Every health department will not track every Road Map action each year.

The suggested measures are below, presented by HBI Road Map Domain, Outcome and Action. Each action has 4-8 questions to get started with data collection. Measuring these items from the beginning of your work with the new HBI Road Map will establish a baseline that can be measured against in the years to come. Continuing to answer these questions and track the answers over time will provide your program with information about how it has changed. The evaluation questions can help you develop additional data points specific to the impacts your program hopes to achieve. There is also a pre-populated [excel document](#) available to use for data collection based on the tables below.

The evaluation questions for each action follow a similar structure:

- Standard questions for each action
 - Which level(s) of prevention are the activities in this action focused on? (primary, secondary, tertiary)
 - The intention of starting with this question is to track the comprehensive approach to implementing the HBI Road Map with an emphasis on addressing priorities across the life course.
 - Is the work in this action focused on any specific demographic of the jurisdiction's population?
- From there, an additional 2-6 questions are asked specific to each action.
 - Depending on your jurisdiction's activities, you may not answer all of the additional questions. For example, with P-1, if your jurisdiction has not yet developed a coalition on brain health, dementia and caregiving, you would answer through question 3. Once a coalition has been established, you would then proceed to the next measure listed (question 4 onward).
- Finally, there are suggested evaluation questions for each action to guide your impact evaluation.

Additional notes for successfully using the tool:

- Focus on the actions that your health department is working on. All actions are displayed in the tool, but it is not expected that every health department is collecting data on every action.
- Define "High Risk Areas" for your community. Many of the actions talk about focusing on those at highest risk. Depending on the goal of your program, this can have different meanings. Use tools such as the [county level prevalence estimates for Alzheimer's disease](#) (find your state), CDC's [PLACES](#) and [Social Vulnerability Index](#) tools to understand more about risk in your community.
- Establish a standard timeline for data collection that can be followed annually. Consider the internal and external reporting that you need to do when determining this timeline for data collection.

[Download](#) a pre-populated Excel document with outcomes, actions and measures included. The document also contains selections for each measure for ease of tracking. Be sure to enable macros to ensure full functionality.

DOMAIN: P - STRENGTHEN PARTNERSHIPS AND POLICIES

Outcome	Action	Proposed Measures	Impact Evaluation Question
<p>Increase community partnerships</p>	<p>P-1 Convene and leverage diverse and inclusive multi-sector coalitions to strengthen supportive, equitable policies within communities, workplaces and health care settings across the life course of brain health.</p>	<ol style="list-style-type: none"> 1. Which level(s) of prevention are the activities in this action focused on? 2. Is the work in this action focused on any specific population, community or group within the jurisdiction? If so, which ones? 3. Does the jurisdiction have a coalition on brain health, dementia and caregiving formally established? 4. Is the health department is an official member of the coalition? 5. Which sectors are represented on the coalition? 6. How many organizations on the coalition represent communities or populations in the jurisdiction who are most affected by dementia? 	<p>What has been the impact of the coalition to increase community partnerships?</p> <p>What progress has been made adding designated Road Map Series actions to ADRD jurisdiction strategic plans?</p> <p>Tips for measuring impact: Set evaluation goals and metrics to any policy or plan that is developed for the coalition. How will you measure progress? How will you measure the impact of partnerships? Remember to ask coalition partners what data they are collecting and if they can share that data to measure progress.</p>
	<p>P-2 Utilize community-clinical linkages to improve equitable access to community-based chronic disease prevention, dementia support and healthy aging programs.</p>	<ol style="list-style-type: none"> 1. Which level(s) of prevention are the activities in this action focused on? 2. Is the work in this action focused on any specific group of the jurisdiction's population? 3. Are you pursuing or have you established partnerships with both community and clinical organizations in the jurisdiction? 4. How many clinical or health care provider partnerships exist? 5. How many community-based organization partnerships exist? 6. How many community-clinical linkage referral systems have been established (e.g., how many clinical settings have referral systems to dementia or caregiving community-based programs and services)? 	<p>What has been the impact of increased community-clinical linkages?</p> <p>To what degree has there been increased coordination across health care systems and existing services, public health agencies and community-based organizations by means of community-clinical linkages?</p> <p>Tips for measuring impact: When a community-clinical linkage is established, track referral and enrollment and change in referral and enrollment over time. Use total population but also specific demographics (like race or geography) to make sure you are reaching the intended population.</p>

<p>Increase community partnerships (cont.)</p>	<p>P-3 Partner across the community to promote equitable access to services, supports and quality care for people living with dementia and their caregivers.</p>	<ol style="list-style-type: none"> 1. Which level(s) of prevention are the activities in this action focused on? 2. Is the work in this action focused on any specific group of the jurisdiction's population? 3. Are you pursuing or have you established partnerships with both community and clinical organizations in the jurisdiction? 4. How many community-based organization partnerships are established? 5. Who do the community-based organizations serve? 	<p>What has been the impact of increased community partnerships?</p> <p>Tips for measuring impact: Assess changes in referral and enrollment, such as numbers and, demographics, based on goals (i.e.: increase reach to African American community).</p> <p>Have community partners you are working with made any internal policy or programs changes to increase their impact on social determinants of health (SDOH) related to brain health? Ask if they are willing to share data on their progress or reach.</p>
	<p>P-4 Partner with public and private health plans to implement evidence-informed policies and programs that impact social determinants of health related to brain health and cognitive impairment.</p>	<ol style="list-style-type: none"> 1. Which level(s) of prevention are the activities in this action focused on? 2. Is the work in this action focused on any specific group of the jurisdiction's population? 3. Are you pursuing or have you developed partnerships with health insurance plans (public or private)? 4. How many health insurance plan partnerships are established? 5. What is the estimated total number of lives covered by health plans on the coalition? 6. Do the demographics of the covered lives represented by health plans on the coalition align with the demographics of the jurisdiction? 	<p>What has been the impact of coalition involvement for health plans?</p> <p>Tips for measuring impact: Have health plans you are working with made any internal policy or programs changes to increase their impact on SDOH related to brain health? Ask if they are willing to share data on their progress or reach.</p>

<p>Increase integration with other chronic disease efforts</p>	<p>P-5 Build on existing state and local public health chronic disease, healthy aging, and disability programs and policies to address social determinants of health and improve health equity related to brain health.</p>	<ol style="list-style-type: none"> 1. Which level(s) of prevention are the activities in this action focused on? 2. Is the work in this action focused on any specific group of the jurisdiction's population? 3. Is the health department integrating brain health messaging into other chronic disease programs? 4. Which chronic disease programs have integrated brain health messaging? 5. Are there policies requiring collaboration across chronic disease programs to address social determinants of health and health equity? 	<p>What has been the impact of collaboration with other chronic disease, healthy aging and disability programs?</p> <p>Tips for measuring impact: Talk with your internal partners about common measures you can all track to measure the impact of your collaboration. See if there are results from prior campaigns that did not include brain health messaging that you can compare to.</p>
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TIP FOR SUCCESS

Diversify Data Sources

When conducting an evaluation, it is important to ensure that data sources are reliable, diverse and clean. Common national and state data sources related to the HBI include BRFSS, Healthy People 2030 dementia objectives, Medicare Current Beneficiary Survey and the Eldercare Locator. Common state-specific data sources include the State Alzheimer's Disease or Dementia Registry, State Alzheimer's Plan Task Force, State Health Assessment and Vital Statistics data. When collecting data, ensure that all qualitative and quantitative data aligns with interested groups' expectations, project timelines and overall project objectives. Additionally, ensure that data sources meet the project's needs before using them so that efficiency is maintained. Encourage use of data sharing agreements to streamline timely data sharing between local, state and national agencies. Throughout the entire process, consider recommendations from [data equity principles](#) to ensure that data sources are regularly reviewed to determine where inequities lie and where additional data is needed.

<p>Increase policy action and implementation</p>	<p>P-6 Equip policymakers with information on risk factors, the stigma associated with cognitive impairment and the impact of social determinants of health; and offer evidence-informed policy options across the life course.</p>	<ol style="list-style-type: none"> 1. Which level(s) of prevention are the activities in this action focused on? 2. Is the work in this action focused on any specific group of the jurisdiction's population? 3. Have health department senior leaders been briefed on the status of brain health, dementia and caregiving within jurisdiction in the last 12 months? 4. What is the frequency of the briefings? 5. Is there a health department annual report on brain health, dementia and caregiving? 6. Is the report shared with the legislature or governing body? 7. Are there other health department reports that contain information on brain health, cognitive decline or dementia? 	<p>How has executive and legislative communication changed awareness of policy makers about brain health, dementia, and caregiving?</p> <p>Tips for measuring impact: Think about the different ways members of the coalition interact with policymakers. Are there additional opportunities to share brain health information? Additional seats on workgroups?</p>
	<p>P-7 Join ongoing coalitions and partnerships to prevent or remediate abuse, neglect and exploitation of people living with dementia.</p>	<ol style="list-style-type: none"> 1. Which level(s) of prevention are the activities in this action focused on? 2. Is the work in this action focused on any specific group of the jurisdiction's population? 3. Does the health department have a partnership with the state aging agency and/or local area agency on aging to specifically inform policies on abuse, neglect and exploitation? 4. How many coalitions or groups does the health department sit on that work to prevent abuse, neglect and exploitation of people living with dementia? 5. How many policies (local or jurisdiction wide) have been enacted in the last 12 months that address abuse, neglect and exploitation of people living with dementia? 	<p>How has this work impacted people living with dementia?</p> <p>Tips for measuring impact: Talk with partners focused on elder abuse to see if there are specific measures to add about people living with dementia or existing measures you can share with each other to better understand the impact of your partnership.</p>

DOMAIN: M - MEASURE, EVALUATE AND UTILIZE DATA

Outcome	Action	Proposed Measures	Impact Evaluation Question
<p>Increase data availability, quality and utilization</p>	<p>M-1 Support implementation of the Behavioral Risk Factor Surveillance System (BRFSS) optional modules for Cognitive Decline and Caregiving, and use the data to shape programs and policies.</p>	<ol style="list-style-type: none"> 1. Which level(s) of prevention are the activities in this action focused on? 2. Is the work in this action focused on any specific group of the jurisdiction’s population? 3. Has the BRFSS Cognitive Decline Module been implemented in the last 12 months? 4. What is the percent prevalence of subjective cognitive decline (SCD) in the state? 5. Has the BRFSS Caregiver Module been implemented in the last 12 months? 6. What is the percent prevalence of dementia caregivers in the state? 7. Has existing SCD or Caregiving BRFSS data been featured in jurisdiction dementia plans or executive communication? 8. Has existing SCD or Caregiving BRFSS data been used to analyze needs of specific populations within the jurisdiction? 	<p>How is BRFSS Data being used to inform programs and policies to advance health equity?</p> <p>What additional work to prepare to implement BRFSS could be measured or documented to show progress?</p> <p>Tips for measuring impact: Even if you are not completing each module each year, measure use of your most recent data at least every 12 months.</p>
	<p>M-2 Supplement existing state, local and BRFSS data with data from health systems, health plans, pharmacies, and other health care providers and community organizations to better understand disparities and opportunities for improving equity.</p>	<ol style="list-style-type: none"> 1. Which level(s) of prevention are the activities in this action focused on? 2. Is the work in this action focused on any specific group of the jurisdiction’s population? 3. Has the health department analyzed BRFSS data with data from other partner organizations or coalition members? 4. Are other partner organizations or coalition members using BRFSS data in their communications and/or for their own analysis? 5. How many partners have used BRFSS data in the last 12 months? 	<p>How has reach increased and programming changed because of new data collaborations?</p> <p>How has the sharing and collaborative use of data changed the decision making process?</p> <p>Tips for measuring impact: Focus on equity — how has this action helped inform decision making about what programs are needed and where to improve equitable outcomes?</p>

<p>Increase data availability, quality and utilization (cont.)</p>	<p>M-3 Evaluate implementation of the HBI Road Map actions to identify successes and needed improvements.</p>	<ol style="list-style-type: none"> 1. Which level(s) of prevention are the activities in this action focused on? 2. Is the work in this action focused on any specific group of the jurisdiction’s population? 3. Does the health department have an evaluation plan on brain health, dementia and caregiving tied to Road Map outcomes? 4. Has the health department partnered with the Alzheimer’s Association to record the actions, outcomes and related data being collected? 5. Does the evaluation plan include measurements related to health equity? 	<p>How has the data from this evaluation been used?</p> <p>Tips for measuring impact: Complete this evaluation tool and share your progress with the Alzheimer’s Association to complete this action and contribute to the national evaluation of the HBI Road Map.</p>
<p>Increase data-informed decision making and action</p>	<p>M-4 Translate data analyses and evaluation findings into state and community strategic and health improvement plans that support brain health across the life course and quality of life for people living with dementia and their caregivers.</p>	<ol style="list-style-type: none"> 1. Which level(s) of prevention are the activities in this action focused on? 2. Is the work in this action focused on any specific group of the jurisdiction’s population? 3. Are brain health, healthy aging, dementia and/or caregiving included in jurisdiction-wide plans (e.g., state health improvement plan, community health improvement plan)? 4. Which plans include brain health, healthy aging, dementia or caregiving? 5. Does at least one member of the jurisdiction’s state/community health improvement plan development committee have expertise in brain health? 6. Is there a specific brain health related objective in the state/community health improvement plan? 	<p>How was brain health data used to inform state/local planning processes?</p> <p>Tips for measuring impact: Focus on equity – how has this action helped inform decision making about what programs are needed and where?</p>

TIP FOR SUCCESS

Keep Track of Progress

Project leads can utilize a variety of tools and measures to monitor progress and ensure that a project is moving forward. This tool is one of those examples. Work with partners to develop a project plan that highlights deliverables, milestones, individual roles and a realistic timeline. Set times for regular check-ins to share data and review data quality. Lastly, work with partners to create an accountability plan that establishes how you intend to communicate with one another.

<p>Increase data-informed decision making and action (cont.)</p>	<p>M-5 Share findings with community organizations, agencies, policymakers and provider associations to help focus community awareness efforts, resource needs, programs and policies, particularly for populations most impacted.</p>	<ol style="list-style-type: none"> 1. Which level(s) of prevention are the activities in this action focused on? 2. Is the work in this action focused on any specific group of the jurisdiction's population? 3. Are data and evaluation results shared with the community and with coalition partners? 4. How many partners have evaluation data been shared with? 5. Who do these partners serve? 	<p>How has sharing data back with community partners impacted their ability to make decisions about community programming and resources?</p> <p>Tips for measuring impact: Focus on equity – how has this action helped inform decision making about what programs are needed and where? Which populations have you reached that you did not reach previously?</p>
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TIP FOR SUCCESS

Engage Key Personnel within the Health Department

Health department staff often wear multiple hats and bring a wealth of cross-cutting knowledge to the public health programs that they support. As a result, it is important for health agency staff to engage with one another across divisions of the health department to encourage resource and knowledge-sharing to optimize project evaluation. Specific health department staff with skill sets and subject matter expertise that could be helpful to engage in the evaluation process may include agency-wide or programmatic evaluation specialists, epidemiologists, performance improvement managers or other similar roles. Since each health department can vary in its organizational structure, it is important to take an intentional approach to internal staff engagement to determine which personnel should be involved in the evaluation process.

DOMAIN: W - BUILD A DIVERSE AND SKILLED WORKFORCE

Outcome	Action	Proposed Measures	Impact Evaluation Question
<p>Reduce stigma and bias about cognitive decline</p>	<p>W-1 Provide evidence-informed training and informational resources for primary health care providers to facilitate culturally sensitive conversations about brain health with patients and caregivers across the life course.</p>	<ol style="list-style-type: none"> 1. Which level(s) of prevention are the activities in this action focused on? 2. Is the work in this action focused on any specific group of the jurisdiction's population? 3. Has information on brain health been shared with primary care providers in the last 12 months? 4. How many primary care providers have been reached with brain health information in the last 12 months? 5. How often is information being shared? 6. Has evidence-informed training around brain health and how to have culturally sensitive conversations been delivered to primary care providers in the last 12 months? 7. How many providers have taken the training in the last 12 months? 8. Of the providers reached by messaging and/or training, how many serve patients in high risk areas? 	<p>What has changed in the primary care landscape as a result of these efforts?</p> <p>To what degree have providers increased their awareness and understanding of ADRD topics?</p> <p>Tips for measuring impact: Use the evaluation data associated with the programs you are using to educate professionals as part of this action. If you are working with partners, ask if they have an evaluation and can share the results.</p> <p>Consider the BRFSS Cognitive Decline module data on "Have you or anyone else discussed your difficulties with thinking or memory with a health care provider?"</p>

TIP FOR SUCCESS

Report Back to the Community

When disseminating evaluation results back to the community, it is important to create communication materials that are easily understood. Developing materials in various formats, such as infographics, mailers, and posts for social media are a few examples of ways to share information with community members. Additionally, apply an equity lens when developing messages, creating materials and expanding reach. These considerations can look like abiding by accessibility requirements, developing materials in multiple languages, using person-centered language, and engaging people affected by the information in development of the dissemination strategy.

<p>Increase knowledge and skills of current and future workforce</p>	<p>W-2 Train current and future public health professionals about risk factors for cognitive decline and dementia and ways to integrate this information with other chronic disease prevention strategies.</p>	<ol style="list-style-type: none"> 1. Which level(s) of prevention are the activities in this action focused on? 2. Is the work in this action focused on any specific group of the jurisdiction's population? 3. Have trainings around risk factors for cognitive decline and dementia been held for public health professionals in the last 12 months? 4. How many public health professionals have taken the training in the last 12 months? 5. Have public institutions of higher education (public colleges) incorporated risk factors for cognitive decline and brain health into their curriculum? 6. How many schools have incorporated this information into their curriculum? 	<p>How has this training impacted chronic disease efforts?</p> <p>To what degree have other professionals increased their awareness and understanding of ADRD topics?</p> <p>Tips for measuring impact: Use the evaluation data associated with the programs you are using to educate professionals as part of this action. If you are working with partners, ask if they have an evaluation and can share the results.</p>
	<p>W-3 Promote inclusion of the life course approach to brain health in licensing, certification and continuing education requirements for health care and allied professionals.</p>	<ol style="list-style-type: none"> 1. Which level(s) of prevention are the activities in this action focused on? 2. Is the work in this action focused on any specific group of the jurisdiction's population? 3. Has the health department had conversations about modifying licensing, certification or continuing education for health care providers to include training on brain health, cognitive decline, early detection and diagnosis and care management for dementia? 4. How many licensure exams include any information about brain health or dementia? Which ones? 5. How many certification programs include any information about brain health or dementia? Which ones? 6. How many continuing education credits were earned in programs that include any information about brain health or dementia? 	<p>What has changed in the care landscape as a result of these efforts?</p> <p>To what degree have providers increased their awareness and understanding of ADRD topics?</p> <p>Tips for measuring impact: Use the evaluation data associated with the programs you are using to educate professionals as part of this action. If you are working with partners, ask if they have an evaluation and can share the results.</p> <p>Think about brain health across the life course and what types of providers a person will need at any given stage — how many provider types have brain health included in their licensing or continuing education requirements?</p>

<p>Increase knowledge and skills of current and future workforce (cont.)</p>	<p>W-4 Strengthen training of community health and direct service workers about brain health across the life course to improve equitable care and quality of life for those living with cognitive decline and to support caregivers.</p>	<ol style="list-style-type: none"> 1. Which level(s) of prevention are the activities in this action focused on? 2. Is the work in this action focused on any specific group of the jurisdiction's population? 3. Has the health department had conversations about modifying the direct service or community health worker training and certifications to include information about brain health, dementia and caregiving? 4. How many direct service or community health workers have been trained on brain health, dementia and caregiving? 5. How many direct service or community health worker training programs available in your jurisdiction include brain health, dementia and caregiving? 	<p>How has increased training of community health workers (CHW) and direct service workers (DSW) impacted utilization of services for people living with dementia and their caregivers?</p> <p>To what degree have other professionals increased their awareness and understanding of ADRD topics?</p> <p>Tips for measuring impact: Use the evaluation data associated with the programs you are using to educate professionals as part of this action. If you are working with partners, ask if they have an evaluation and can share the results.</p>
	<p>W-5 Partner with public safety and emergency response agencies to improve their ability to recognize and meet the needs of people living with cognitive decline and dementia.</p>	<ol style="list-style-type: none"> 1. Which level(s) of prevention are the activities in this action focused on? 2. Is the work in this action focused on any specific group of the jurisdiction's population? 3. Has the health department had conversations about modifying public safety/emergency trainings to include information about the special needs of people living with cognitive decline and dementia? 4. How many public safety/emergency workers have been trained in the last 12 months? 5. Do any public safety/emergency response agencies within the jurisdiction have a dedicated mobile crisis services unit or program for dementia? 	<p>How has increased training of public safety and emergency response agencies impacted utilization of services for people living with dementia and caregivers?</p> <p>To what degree have other professionals increased their awareness and understanding of ADRD topics?</p> <p>Tips for measuring impact: Use the evaluation data associated with the programs you are using to educate professionals as part of this action. If you are working with partners, ask if they have an evaluation and can share the results.</p>

DOMAIN: E - ENGAGE AND EDUCATE THE PUBLIC

Outcome	Action	Proposed Measures	Impact Evaluation Question
<p>Increase public knowledge about brain health, risk factors for dementia, and benefits of early detection and diagnosis</p>	<p>E-1 Engage diverse audiences to develop culturally responsive messaging about brain health, cognitive decline, healthy aging and caregiving.</p>	<ol style="list-style-type: none"> 1. Which level(s) of prevention are the activities in this action focused on? 2. Is the work in this action focused on any specific group of the jurisdiction's population? 3. Do you have a way to engage the community when creating messaging? 4. Which populations have been engaged to develop messaging? 5. How many communication campaigns have tailored messages to be culturally responsive to different communities? 	<p>What has been the result of engaging the community to develop culturally responsive messaging?</p> <p>Tips for measuring impact: Think about the communities that you were not able to reach vs. communities you were. Are there any lessons learned? What trends are you seeing as you have more community conversations?</p>
	<p>E-2 Disseminate culturally responsive messaging to encourage conversations about brain health, cognitive decline, healthy aging and caregiving.</p>	<ol style="list-style-type: none"> 1. Which level(s) of prevention are the activities in this action focused on? 2. Is the work in this action focused on any specific group of the jurisdiction's population? 3. Have culturally responsive messages been disseminated? 4. Which populations have these messages been disseminated to? 5. How many people have the messages reached? 6. What is the frequency of the messaging? 	<p>How have dissemination strategies changed after community involvement?</p> <p>To what degree have members of the public increased their awareness and understanding of ADRD topics?</p> <p>How have changes in awareness and understanding of ADRD topics varied across key segments of the general public?</p> <p>Tips for measuring impact: Think about data that can be used to measure long term results like the BRFSS measure on cognitive decline module in response to the question, "Have you or anyone else discussed your difficulties with thinking or memory with a health care provider?" Consider stratifying these data by different populations.</p>

<p>Increase public knowledge about brain health, risk factors for dementia, and benefits of early detection and diagnosis (cont.)</p>	<p>E-3 Engage with communities, especially those at highest risk, about risk factors for dementia and how people living with dementia can best thrive in their communities.</p>	<ol style="list-style-type: none"> 1. Which level(s) of prevention are the activities in this action focused on? 2. Is the work in this action focused on any specific group of the jurisdiction's population? 3. Does the health department have educational programming about risk factors for dementia and brain health across the life course? 4. How many individuals have received this educational programming? 5. How often are these programs delivered in communities? 	<p>How have these messages changed conversations about brain health, dementia and caregiving in the community?</p> <p>To what degree have members of the public increased their awareness and understanding of ADRD topics?</p> <p>How have changes in awareness and understanding of ADRD topics varied across key segments of the general public?</p> <p>Tips for measuring impact: Think about your reach. How could you reach other communities? How have you systematically addressed barriers? And how have those barriers lessened?</p>
	<p>E-4 Embed cognitive decline risk factors into evidence-informed health promotion and chronic disease prevention awareness and education campaigns.</p>	<ol style="list-style-type: none"> 1. Which level(s) of prevention are the activities in this action focused on? 2. Is the work in this action focused on any specific group of the jurisdiction's population? 3. Do other chronic disease or health promotion campaigns and educational programs include brain health messaging? 4. List the programs that include brain health messages. 5. How many individuals have received this programming? 6. How often are these programs delivered in communities? 	<p>What has been the impact of combining brain health messaging with other chronic disease and health promotion messaging?</p> <p>To what degree have members of the public increased their awareness and understanding of ADRD topics?</p> <p>How have changes in awareness and understanding of ADRD topics varied across key segments of the general public?</p> <p>Tips for measuring impact: Think about your reach within your health department. How can brain health become embedded throughout health promotion and chronic disease prevention programs?</p>

<p>Increase public knowledge about brain health, risk factors for dementia, and benefits of early detection and diagnosis (cont.)</p>	<p>E-5 Partner with educational systems (K-12 and post-secondary) to include brain health and dementia in their curricula.</p>	<ol style="list-style-type: none"> 1. Which level(s) of prevention are the activities in this action focused on? 2. Is the work in this action focused on any specific group of the jurisdiction's population? 3. Is brain health messaging included in chronic disease prevention/health promotion curricula for K-12 or post-secondary schools? 4. How many K-12 school systems have brain health messaging in their curricula? 5. How many post-secondary schools have brain health messaging in their curricula? 	<p>How has inclusion of brain health messaging impacted conversations about brain health? Long term — how has it impacted students going into related professions?</p> <p>To what degree have members of the public increased their awareness and understanding of ADRD topics?</p> <p>How have changes in awareness and understanding of ADRD topics varied across key segments of the general public?</p> <p>Tips for measuring impact: Think about long term measures such as the number of students going into neurology, gerontology or other brain health-related professions or specialties.</p>
<p>Increase public knowledge and use of services for people living with dementia and their caregivers</p>	<p>E-6 Enhance communication with people living with dementia, their families and caregivers about how to access services, care and social supports.</p>	<ol style="list-style-type: none"> 1. Which level(s) of prevention are the activities in this action focused on? 2. Is the work in this action focused on any specific group of the jurisdiction's population? 3. Does the health department have a consistent way to reach people living with dementia and their families and caregivers with messaging and educational information? 4. Does the health department have messaging about dementia-specific services, care and social supports? 5. How many individuals have received this message? 6. How often are these messages delivered in communities? 	<p>How has utilization of services changed?</p> <p>Tips for measuring impact: Look at referral and enrollment demographics and analyze what communities are not being reached.</p> <p>Are there needed services that are not offered or services that are not reaching certain populations?</p>

<p>Increase public knowledge and use of services for people living with dementia and their caregivers (cont.)</p>	<p>E-7 Ensure caregivers have information, tools and resources about their vital role and ways to maintain their own health and well-being.</p>	<ol style="list-style-type: none"> 1. Which level(s) of prevention are the activities in this action focused on? 2. Is the work in this action focused on any specific group of the jurisdiction's population? 3. Does the health department have a consistent way to reach caregivers with messaging and educational information? 4. Does the health department have messaging about dementia-specific caregiver information, tools and resources? 5. How many caregivers have received this programming or message? 6. How often are these programs or messages delivered in communities? 	<p>How has utilization of services changed?</p> <p>Tips for measuring impact: Look at what communities are not being reached.</p> <p>Are there needed services that are not offered or services that are not reaching certain populations?</p>
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CONCLUSION

From its origin, the Healthy Brain Initiative Road Map Series has highlighted the need for quality data on dementia and public health. As this work has evolved, the fourth edition aims to be the first to have an associated impact evaluation. The Alzheimer's Association will be tracking progress on the actions annually in the last quarter of each year. If you are using the evaluation tool please contribute to this national evaluation by contacting the Alzheimer's' Association Public Health team at publichealth@alz.org.