Making Alzheimer’s Our Next Public Health Success Story

Are communities ready to respond to a large population of older people with dementia? Current projections indicate the number of people living with Alzheimer’s and other dementias is ballooning as the Baby Boom generation gets older. Those with dementia will require more and more support as cognitive, behavioral, and physical functioning worsens over time. This means Medicare and Medicaid costs are rising dramatically, and the additional burden on family caregivers is endangering their own health.

With a strong response, public health can mitigate the future impacts of Alzheimer’s and other dementias, especially among vulnerable populations. The Alzheimer’s disease continuum spans decades, providing many opportunities to change outcomes across communities. Just as with other chronic and degenerative conditions, public health can reduce risk in populations, further early detection and diagnosis, improve safety and quality of care for people living with cognitive impairment, and attend to caregivers’ health and wellbeing.

The Healthy Brain Initiative’s (HBI) State and Local Public Health Partnerships to Address Dementia, The 2018-2023 Road Map will chart a course for state and local public health agencies and their partners to act quickly and strategically to prepare their communities by stimulating needed changes in policies, systems, and environments. To focus the public health response, experts developed an agenda of 25 actions for public health leaders to promote brain health, better care for people with cognitive impairment, and increase attention to caregivers. Other Road Map actions build public health capacity.

Alignment of HBI Road Map actions with Essential Services of Public Health ensures that initiatives to address Alzheimer’s can be easily and efficiently incorporated into existing public health initiatives. Cross-sector partnerships, data, and pursuit of health equity are critical to achieving major gains against Alzheimer’s—just as they underlie public health successes in HIV/AIDS, cardiovascular disease, and cancer.

Accelerated progress against dementia requires state and local public health leaders to chart a course for better outcomes. The HBI Road Map outlines the most needed and practical steps that state and local health departments can accomplish. Implementation of the HBI Road Map enables public health to lead with urgency and act for impact.

> Sign up to receive the full HBI Road Map and learn about opportunities for leadership action at alz.org/publichealth.

In October 2018, CDC and the Alzheimer’s Association will release this HBI Road Map for State and Local Public Health Partnerships as well as a companion HBI Road Map for Indian Country.

SELECT FACTS

- Today, nearly 6 million Americans are living with Alzheimer’s dementia, with annual costs topping $277 billion. In 2050, 14 million will be affected, with an annual cost to the U.S. of $1.1 trillion.

- African Americans, Hispanics, and women are particularly at risk of developing Alzheimer’s and other dementias.

- More than 95% of people with dementia have one or more other chronic conditions.

- In 2015, there were 1,471 emergency department visits for every 1,000 Medicare beneficiaries with dementia.

- About 1 in 3 Alzheimer’s caregivers report their health has become worse due to care responsibilities.

Conceptual Framework for the Healthy Brain Initiative Road Map

The Action Agenda of the HBI Road Map aligns across four Essential Services of Public Health. Each action was developed with attention to three guiding core principles.
The HBI Road Map has an agenda of 25 actions for state and local public health agencies and their partners to accomplish. Actions highlighted with a >> are primed for implementation.

**EDUCATE & EMPOWER**

**E-1** Educate the public about brain health and cognitive aging, changes that should be discussed with a health professional, and benefits of early detection and diagnosis.

**E-2** Integrate the best available evidence about brain health and cognitive decline risk factors into existing health communications that promote health and chronic condition management for people across the life span.

**E-3** Increase messaging that emphasizes both the important role of caregivers in supporting people with dementia and the importance of maintaining caregivers' health and well-being.

**E-4** Promote prevention of abuse, neglect, and exploitation of people with dementia.

**E-5** Provide information and tools to help people with dementia and caregivers anticipate, avert, and respond to challenges that typically arise during the course of dementia.

**E-6** Strengthen knowledge about, and greater use of, care planning and related tools for people with all stages of dementia.

**E-7** Improve access to and use of evidence-informed interventions, services, and supports for people with dementia and their caregivers to enhance their health, well-being, and independence.

**DEVELOP POLICIES AND MOBILIZE PARTNERSHIPS**

**P-1** Promote the use of effective interventions and best practices to protect brain health, address cognitive impairment, and help meet the needs of caregivers for people with dementia.

**P-2** Assure academic programs, professional associations, and accreditation and certification entities incorporate the best available science about health, cognitive impairment, and dementia caregiving into training for the current and future public health workforces.

**P-3** Support better informed decisions by educating policy makers on the basics of cognitive health and impairment, the impact of dementia on caregivers and communities, and the role of public health in addressing this priority problem.

**P-4** Improve inclusion of healthcare quality measures that address cognitive assessments, the delivery of care planning to people with diagnosed dementia, and improved outcomes.

**P-5** Engage public and private partners in ongoing planning efforts to establish services and policies that promote supportive communities and workplaces for people with dementia and their caregivers.

**P-6** Assure public health plans that guide emergency preparedness and emergency response address the special needs of people with dementia and their caregivers, support access to critical health information during crises, and prepare emergency professionals for situations involving people with dementia.

**ASSURE A COMPETENT WORKFORCE**

**W-1** Educate public health and healthcare professionals on sources of reliable information about brain health and ways to use the information to inform those they serve.

**W-2** Ensure that health promotion and chronic disease interventions include messaging for healthcare providers that underscores the essential role of caregivers and the importance of maintaining their health and well-being.

**W-3** Educate public health professionals about the best available evidence on dementia (including detection) and dementia caregiving, the role of public health, and sources of information, tools, and assistance to support public health action.

**W-4** Foster continuing education to improve healthcare professionals’ ability and willingness to support early diagnoses and disclosure of dementia, provide effective care planning at all stages of dementia, offer counseling and referral, and engage caregivers, as appropriate, in care management.

**W-5** Strengthen the competencies of professionals who deliver healthcare and other care services to people with dementia through interprofessional training and other strategies.

**W-6** Educate healthcare professionals about the importance of treating co-morbidities, addressing injury risks, and attending to behavioral health needs among people at all stages of dementia.

**W-7** Educate healthcare professionals to be mindful of the health risks for caregivers, encourage caregivers’ use of available information and tools, and make referrals to supportive programs and services.

**MONITOR & EVALUATE**

**M-1** Implement the Behavioral Risk Factor Surveillance System (BRFSS) optional module for Cognitive Decline in 2019 or 2020, and the BRFSS optional module for Caregiving in 2021 or 2022.

**M-2** Support national data collection on dementia and caregiving.

**M-3** Use data gleaned through available surveillance strategies and other sources to inform the public health program and policy response to cognitive health, impairment, and caregiving.

**M-4** Embed evaluation into training and caregiving support programs to determine program accessibility, effectiveness, and impact.

**M-5** Estimate the gap between workforce capacity and anticipated demand for services to support people with dementia and their caregivers.