A PUBLIC HEALTH APPROACH TO ALZHEIMER’S AND OTHER DEMENTIAS

A Public Health Approach to Alzheimer’s and Other Dementias is an introductory curriculum from the Alzheimer’s Association that is intended to increase awareness of the impact of Alzheimer’s and other dementias as well as the role of public health. Developed as part of a cooperative agreement with the Centers for Disease Control and Prevention’s Healthy Aging Program, and in partnership with Emory University’s Rollins School of Public Health, this curriculum addresses cognitive health, cognitive impairment, and Alzheimer’s disease and is for use by undergraduate faculty in schools and programs of public health. The curriculum has four modules that are designed to be used individually or as a whole.

ALZHEIMER’S DISEASE – A PUBLIC HEALTH CRISIS (Module 1)

About Module 1:

Module 1: Alzheimer’s Disease – A Public Health Crisis frames Alzheimer’s disease and dementia as a public health epidemic with a large and rapidly growing burden that bears significant impact on the nation. Alzheimer’s disease is felt at a national, state, and local level through financial burdens, resource needs, and professional requirements.

Module 1 focuses primarily on the United States as it explores the current and projected scope of the epidemic, the financial burden on federal and state governments as well as individuals, and the care burden on caregivers and the health care system. Health disparities are highlighted, as rates of Alzheimer’s disease are substantially higher for African-Americans and Hispanics.

Learning Objectives:

At the end of Module 1: Alzheimer’s and Dementia – A Public Health Crisis, students will be able to:

- Provide a general description of dementia and Alzheimer’s
- Explain the current and projected scope of the Alzheimer’s disease epidemic
- Discuss the cost burden of Alzheimer’s disease for federal/state governments and individuals/caregivers
- Describe care burden as related to Alzheimer’s disease including caregivers and the health care system
• Identify health disparities as they relate to Alzheimer’s disease and dementia
• Explain why public health must play a role in addressing the Alzheimer’s disease epidemic

ALZHEIMER’S AND OTHER DEMENTIAS-THE BASICS (Module 2)

About Module 2:

Module 2: Alzheimer’s and Other Dementias – The Basics provides background information on Alzheimer’s disease and other dementias. It lays a foundation for what cognitive health is, and how changes within the brain may lead to cognitive aging, cognitive impairment, and Alzheimer’s disease and other dementias.

The module then shifts to focus more specifically on Alzheimer’s disease. Learners gain a general understanding about the three stages of Alzheimer’s disease, risk factors, and ways the disease is diagnosed and treated. The module also addresses unique aspects of Alzheimer’s disease (including financial hardship, stigma, and vulnerability to abuse), and the role and burden of caregivers.

Learning Objectives:

At the end of Module 2: Alzheimer’s and Other Dementias – The Basics, students will be able to:

• Define cognitive health
• Define and differentiate between dementia and Alzheimer’s disease
• List at least five common symptoms of Alzheimer’s disease
• Describe the changes that occur during the course of Alzheimer’s disease
• Identify at least three risk factors associated with Alzheimer’s disease
• Describe the role of caregivers in the care of someone with Alzheimer’s disease

WHAT IS THE ROLE OF PUBLIC HEALTH? (Module 3)

About Module 3:

Module 3: What is the Role of Public Health? briefly describes the Alzheimer’s disease epidemic in the U.S., followed by a discussion of three tools of public health that may play a significant role in mitigating the Alzheimer’s disease crisis.
The three public health intervention tools discussed are:

1. Surveillance/monitoring
2. Primary prevention
3. Early detection and diagnosis

Each tool is described and applied to the context of a public health response to Alzheimer’s disease and dementia. Progress to date and challenges associated with each tool are addressed.

**Learning Objectives:**

At the end of Module 3: What is the Role of Public Health?, students will be able to:

- List three key tools public health can apply to the Alzheimer’s epidemic.
- Describe surveillance/monitoring and how public health practitioners may apply it in response to Alzheimer’s disease.
- Name the two Behavioral Risk Factor Surveillance System (BRFSS) modules that pertain to cognitive health.
- Describe primary prevention and how public health practitioners may apply it in response to Alzheimer’s disease.
- Explain why it is important to promote early detection of Alzheimer’s disease.

**DEMENTIA CAPABLE SYSTEMS (Module 4)**

**About Module 4:**

Module 4: Dementia Capable Systems and Dementia Friendly Communities addresses the public health response to the Alzheimer’s epidemic on a state and community level.

The module describes the concept of a “dementia capable” system, which involves accommodating the needs of a population that experiences memory loss, a variety of physical, cognitive, and behavior symptoms, and other co-morbidities.

Module 4 explores how public health may support the development of such systems on a state and local level through: public health research and translation, support services and programs, workforce training, and dementia-friendly communities.

**Learning Objectives:**

At the end of Module 4: Dementia Capable Systems and Dementia Friendly Communities, students will be able to:
• Define “dementia capable”
• Explain how public health can contribute to the development of dementia capable systems through: public health research and translation, support services and programs, workforce training, and dementia-friendly communities
• List at least 3 support services that may benefit someone with Alzheimer’s disease or dementia
• List at least 2 support services that may benefit a caregiver of someone with Alzheimer’s disease or dementia
• Identify at least 3 professions that would benefit from receiving workforce training related to Alzheimer’s disease and dementia
• Describe at least 2 components of a dementia-friendly community

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