MODULE

EARLY DETECTION OF DEMENTIA

Public Health and Early Detection of Dementia

INSTRUCTOR GUIDE

ALZHEIMER'S ASSOCIATION

HEALTHY BRAIN INITIATIVE

EMORY ROLLINS SCHOOL OF PUBLIC HEALTH | Emory Centers for Public Health Training and Technical Assistance

BOLD PUBLIC HEALTH CENTER OF EXCELLENCE EARLY DETECTION OF DEMENTIA

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WHAT IS INCLUDED IN THE INSTRUCTOR'S GUIDE?

- **How to Use the Public Health and Early Detection of Dementia Module Instructor Guide:** Provides guidance on how to use the Instructor Guide.
- **About the Public Health and Early Detection of Dementia Module:** Provides a brief overview of the Public Health and Early Detection of Dementia module and how it fits within the larger public health curriculum on addressing dementia.
  - **Learning Objectives:** Lists 3 learning objectives for a participant completing this module.
- **Competencies:** Lists competencies met by this module from **AGHE/GSA**; **CEPH**; **Council on Linkages/ASPPH**; **Certified Health Education Specialists (CHES)**.
- **Participant Engagement Options:** Includes supplementary resources that are designed to increase participant engagement and enhance understanding of the concepts covered in this module.
  - **Discussion Questions:** Provides questions to be used before and after participants complete the module.
  - **Learning Activities:** Provides interactive, application-based activities participants can use to apply and integrate knowledge from the module into their life.
  - **Sample Test Questions:** Provides multiple choice and true/false questions that can be used to assess knowledge based on the content in the module.
  - **Video Resources:** Links to select videos that are used throughout the module. Additional discussion questions for each video are also provided.
  - **Graphic Resources:** Provides copies of select graphics that are used in the module. Additional discussion questions and activities for each graphic are also provided.
  - **Additional Readings and Resources:** Provides a list of additional resources that could be used for supplementary activities or reading by participants.
- **Appendix A - Sample Test Questions:** Provides a copy of the sample test questions without correct answers included for ease of printing.

HOW TO USE THE MATERIALS

- This module is part of a larger curriculum where each module is designed for use either as part of a complete set or as a stand-alone module.
- Participants can use the module at their own independent pace, without any supplementary work or guidance from an instructor, presenter, or trainer. The module can also be used as a base for training, assignments, group projects or class discussion. In addition to the module content, this guide has supplementary materials to support activities used in a class setting.
- This document is a flexible guide that instructors can adapt to fit their needs.
- The module itself will take approximately 60 minutes to complete. If including the supplementary materials, time will vary depending on participant engagement, instructor style and the activities included.
- Discussion questions, learning activities, sample test questions, video resources with questions, graphic resources and additional reading and resources are also included in this guide. These may be modified or removed at the discretion of the instructor.
- Questions may also be used for other activities such as small group discussion or individual writing assignments. Many of the questions will directly reference specific sections in the module, so participants may benefit from having discussion questions or learning activities prior to beginning the module.
- Module content can be downloaded as a PDF from the module to be used as a reference.
- All materials are 508 compliant. (Note: if changes are made to the supplementary materials, it is recommended that changes continue to follow 508 compliance guidelines. For more information on 508 compliance, visit the Department of Health and Human Services website: https://www.hhs.gov/web/section-508/index.html)

ABOUT THE PUBLIC HEALTH AND EARLY DETECTION OF DEMENTIA MODULE

This 60-minute course, *Public Health and Early Detection of Dementia*, is designed for public health students, educators, and professionals. This module is part of the larger curriculum, A Public Health Approach to Dementia. Those new to this topic are encouraged to take two modules: Public Health and Dementia – Part 1: Understanding the Public Health Impact of Dementia and Health Equity in Dementia — Using a Public Health Lens to Advance Health Equity in Alzheimer's and Other Dementias, before returning to this module. This module was developed by the Alzheimer's Association® and the Emory Centers for Public Health Training and Technical Assistance with support from the Centers for Disease Control and Prevention (CDC) and the BOLD Public Health Center of Excellence on Dementia Risk Reduction.

Please refer to the Alzheimer's Association Education Center and website for more detailed information on dementia and Alzheimer's.

This module discusses the importance of and opportunities for public health action in early detection of dementia. Public health examples and interactive experiences are used to support and assess understanding. This guide contains supplementary materials to support any additional activities that might be done in addition to the module itself. The module contains the following seven sections with 13 subsections and addresses three learning objectives.

Topics:

1. **Module Introduction**
    a. Module Instructions
    b. Introduction
    c. Learning Objectives
2. **Why Early Detection Matters**
    a. Prevalence, SCD, and MCI
3. **The Foundation of Public Health Action**
    a. Defining Early Detection
    b. The Importance of Early Detection for Public Health
    c. Personal Resources
    d. Detection vs Diagnosis
4. **Public Health's Role and the Social Ecological Model (SEM)**
    a. Introduction to the Social Ecological Model
    b. Early Detection in Action: Case Studies
5. **Equitable Access and Community Impact**
    a. Integrating Early Detection and Diagnosis into Public Health
    b. Addressing Barriers and Promoting Equity

6. **Implementing Public Health Strategies**
   a. Implementation and Sustainment Decision Tree
7. **Conclusion**
   a. Next Steps
   b. Resources
   c. References

Learning Objectives:

After completing this module, participants will be able to:

1. Explain how early detection of dementia benefits communities.
2. Analyze public health strategies that drive early detection and equitable access to diagnostic tools and services.
3. Propose or develop evidence-informed public health interventions that integrate early detection practices into public health initiatives, community partnerships, and community resources.

COMPETENCIES

The Public Health and Early Detection of Dementia module promotes basic learning that supports the development of certain competencies and aligns with public health accreditation standards.

Academy for Gerontology in Higher Education (AGHE, through GSA):

- I.2.1: Distinguish normal biological aging changes from pathology including genetic factors.
- I.3.3: Demonstrate knowledge of signs, symptoms and impact of common cognitive and mental health problems in late life (e.g., dementia, depression, grief, anxiety).
- I.4.2: Assess the impact of inequality on individual and group life opportunities throughout the lifespan/course impacting late-life outcomes.
- II.1.3: Assess and reflect on one's work in order to continuously learn and improve outcomes for older persons.
- II.3.3: Advocate for and develop effective programs to promote the well-being of older persons.
- II.3.9: Develop and disseminate educational materials to increase accurate information regarding older persons and older person services.
- II.4.2: Respect and integrate knowledge from disciplines needed to provide comprehensive care to older persons and their families.
- II.4.5: Provide the following groups information and education in order to build a collaborative aging network:
  - Key persons in the community (e.g., police officers, firefighters, mail carriers, local service providers and others).
  - Aging workforce professionals and personnel (e.g., paid and unpaid; full- and part-time) in the field of aging.
- III.1.2: Screen and provide referrals to evidence-based programs and interventions.
  - Health promotion, disease prevention, assessment and treatment programs
- III.2.5: Provide strategies for strengthening informal supports.
- III.8.3: Investigate problems through collecting and evaluating data to continuously improve outcomes and develop creative and practical solutions to problems relating to older persons.

Council on Education for Public Health (CEPH) Foundational Competencies:

- 6: Discuss the means by which structural bias, social inequities and racism undermine health and create challenges to achieving health equity at organizational, community, and systemic levels.
- 7: Assess population needs, assets and capacities that affect communities' health.
- 13: Propose strategies to identify relevant communities and individuals and build coalitions and partnerships for influencing public health outcomes.
- 18: Select communication strategies for different audiences and sectors.
- 19: Communicate audience-appropriate public health content, both in writing and through oral presentation to a nonacademic, non-peer audience with attention to factors such as literacy and health literacy.
- 22: Apply a systems thinking tool to visually represent a public health issue in a format other than a standard narrative.

Council on Linkages Between Academia and Public Health Practice (supported by ASPPH):

- 1.1: Describes factors that affect the health of a community.
- 3.1: Determines communication strategies.
- 4.3: Recognizes the diversity of individuals and populations.
- 4.6: Contributes to achieving and sustaining a diverse, inclusive, and competent public health workforce.
- 5.4: Collaborates with community members and organizations.
- 5.5: Shares power and ownership with community members and others.
- 8.1: Creates opportunities to achieve cross-sector alignment.

Certified Health Education Specialists (CHES) Areas of Responsibility:

- 1.3.3: Identify the social, cultural, economic, political, and environmental factors that impact the health and/or learning processes of the priority populations(s).
- 1.3.5: Determine the capacity (available resources, policies, programs, practices, and interventions) to improve and/or maintain health.
- 6.3.3: Tailor message(s) for the audience(s).
- 6.4.2: Select communication channels and current and emerging technologies that are most appropriate for the audience(s) and message(s).

PARTICIPANT ENGAGEMENT OPTIONS

These supplementary resources are designed to increase participant engagement and enhance understanding of the concepts covered in this module. These include discussion questions, learning activities, graphics, additional readings and a list of video resources. It is recommended that the instructor review these resources to determine which of these additional materials would be useful in illustrating the concepts covered in the module.

DISCUSSION QUESTIONS

The following discussion questions may be useful for engaging learners before and/or after module completion:

- Before completing the module:
  - Why is dementia not a normal part of aging?
  - What are some of the earliest warning signs of dementia, and why is it important to recognize them early?
  - In your own words, define early detection of dementia.
  - What role does public health play in promoting the early detection of dementia?

- After completing the module:
  - How has your understanding of dementia and its early detection changed after completing the module?
  - How can early detection prevent crises related to dementia?
  - What is the difference between the detection and diagnosis of dementia?
  - How can the Social Ecological Model be applied to improve early detection of dementia?
  - What do you need to learn about your community's strengths or challenges to better address dementia? Where can you obtain the data required to inform decisions?
  - How can you include the voices of the groups disproportionately affected by dementia?
  - How can public health professionals engage cross-program partners to promote early detection?

LEARNING ACTIVITIES

The following activities may be used or adapted to enhance learning:

- Research and brainstorm a list of partners in your local community needed to advance early detection initiatives. Guide learners to use the Decision Tree on Implementing and Sustaining Change to Advance Early Detection of Dementia for Communities. Example partners may include health care providers, community organizations, people affected by dementia, and faith communities.
- Learner Reflection: Reflect on the ethical considerations involved in early detection of dementia. How can public health professionals balance the need for early detection with respect for individuals' autonomy and privacy?
- Consider Partnerships: Brainstorm who you could engage in conversations to increase access to diagnostic services for early detection.
- Explore the Dementia Friends Room Experience website. Click on the images to learn about challenges with dementia in common scenarios, such as at home in the kitchen or driving.
  - Does anything surprise you about the tips provided in the rooms above?
  - How do these scenarios show the 10 Early Signs and Symptoms of Alzheimer's and Dementia?
- Social Ecological Model (SEM) Mapping Exercise (Group Activity or Individual Assignment)
  - Activity: Use the Social Ecological Model to map out factors influencing early detection of dementia at different levels (individual, interpersonal, organizational, community, policy). The goal is for learners to visualize and understand the multi-level approach to public health interventions.
  - Example Interventions:
    - Refer to the Healthy Brain Initiative: State and Local Road Map for Public Health, 2023-2027 (HBI Road Map) (page 45) for Georgia's "Building Community Partnerships to Expand Reach and Foster Sustainability."
    - Refer to the HBI Road Map (page 47) for Minnesota's "Engaging Community Health Workers Around the Importance of Brain Health at Every Age."
    - Additional examples for California (page 44), Mississippi (page 48), and Washington State (page 53) can also be found in the HBI Road Map.
- Community Outreach Plan (Group Activity or Individual Assignment)
  - Activity: Create a plan for a community outreach campaign to raise awareness about early detection of dementia, focusing on equitable access for all community members.

- Tasks:
  - Each group/learner should select a specific community to focus on. Consider factors such as demographics, cultural background, and existing resources.
  - Define clear measurable goals for the outreach plan. Ask: What do you hope to achieve?
  - Create culturally tailored messages and methods that resonate with the target community.
  - Outline events, activities and key community members.

- Review the 10 Early Signs and Symptoms of Alzheimer's and Dementia. Read through the items on the left and fill in the column on the right, identifying each item as either a **Possible Sign of Alzheimer's and Dementia** OR a **Typical Age-Related Change**. (In the table below, the correct answer is listed in the right column. In a classroom setting, provide the learner with a blank right column.)

Poor judgment and decision-making	*Possible Sign of Alzheimer's and Dementia*
Occasionally needing help to use microwave settings or to record a TV show	*Typical Age-Related Changes*
Memory loss that disrupts daily life	*Possible Sign of Alzheimer's and Dementia*
Losing track of the season	*Possible Sign of Alzheimer's and Dementia*
Making a bad decision once in a while	*Typical Age-Related Changes*
Forgetting which day it is and remembering it later	*Typical Age-Related Changes*
Difficulty having a conversation	*Possible Sign of Alzheimer's and Dementia*
Sometimes forgetting which word to use	*Typical Age-Related Changes*
Misplacing things and being unable to retrace steps to find them	*Possible Sign of Alzheimer's and Dementia*
Losing things from time-to-time	*Typical Age-Related Changes*

SAMPLE TEST QUESTIONS

Below are sample test questions that can be used to supplement the learning module. The correct answer and explanation are included below each question. Sample test questions without correct answers are provided in Appendix A for ease of printing.

1. True or False: Dementia is a normal part of aging.

The correct answer is False. Dementia is not a normal part of aging and most people do not develop dementia.

2. What does the term "subjective cognitive decline" (SCD) refer to?
   A. Cognitive decline observed by a health care professional
   B. Cognitive decline is a normal part of aging
   C. A person's own experience of difficulties in thinking or memory
   D. Cognitive decline that is diagnosed through brain imaging

The correct answer is C. Subjective Cognitive Decline or SCD refers to a person's own experience of difficulties in thinking or memory that they describe as happening more often or getting worse.

3. True or False: Everyone with Mild Cognitive Impairment (MCI) goes on to develop dementia.

The correct answer is False. Not everyone with MCI will develop dementia. An estimated 15% of individuals with MCI develop dementia after two years, and about one-third of people with MCI develop dementia due to Alzheimer's disease within five years.

4. What is the goal of early detection of dementia?
   A. Predict workforce shortages in coming years
   B. Identify diseases in the earliest stages, before the onset of more severe symptoms or a crisis
   C. Understand why family relationships change as people age

The correct answer is B. Early detection aims to identify dementia in the earliest stages, before the onset of more severe symptoms and ideally before a crisis occurs.

5. What are the benefits of early detection of dementia? (Select all that apply.)
   A. Reducing health care costs
   B. Improving personal and financial planning
   C. Increasing the number of medications prescribed
   D. Delaying the onset of dementia

The correct answers are A and B. Early detection allows individuals and their caregivers to make informed decisions about their future, manage the disease proactively, and access therapies that may be more effective in the early stages, and as a result, reduces health care costs.

6. Identify whether the following is detecting or diagnosing dementia:

   Janice is beginning to experience occasional memory lapses and difficulty finding words. Her family is concerned and they discuss what they have been noticing with Janice. Janice and her family then work together to make a plan to raise this in her next visit with her general practitioner.

The correct answer is Detection. This is an example of the beginning of the detection process. The family and Janice have noticed changes in her memory and thinking and decided to consult with her doctor. A diagnosis has not yet been made.

7. Identify whether the following is detecting or diagnosing dementia:

   Jim was referred by his primary care doctor for evaluation by a neurologist, who interviewed Jim and his son and performed a series of assessments, including brain imaging. After the evaluation, the neurologist met with Jim and his son to give him a diagnosis of Alzheimer's and set up a care plan and next steps.

The correct answer is Diagnosis. The neurologist performed a variety of cognitive assessments to provide Jim with a diagnosis.

8. In promoting early detection, public health professionals could consider: (Select all that apply.)
   - A. Running public awareness campaigns about the importance of discussing memory and thinking issues with providers at the earliest sign of a problem.
   - B. Increasing awareness about dementia for people at risk for dementia.
   - C. Improving community-clinical linkages to connect community members to appropriate care professionals who can diagnose dementia and connect them to ongoing care
   - D. Educate the public about how the new developments in diagnosis, care and treatment apply across all stages of the dementia continuum.

The correct answers are A, B, C, and D. All of the above activities are actions public health professionals could consider to promote early detection of dementia.

9. How can the collaboration between health care teams and cognitive health providers improve patient outcomes?
   - A. By reducing the need for specialized training and education for health care providers.
   - B. By ensuring that all patients receive the same treatment regardless of their specific needs.
   - C. By integrating cognitive health conversations into routine care, it can lead to earlier detection and intervention for cognitive decline.

The correct answer is C. By integrating cognitive health conversations into routine health care, it allows for more comprehensive and coordinated care, leading to more efficient and effective health care delivery.

SAMPLE TEST QUESTIONS [CONTINUED]

10. True or False: Cultural attitudes toward aging can influence how dementia symptoms are perceived and addressed.

The correct answer is True. Cultures view aging and dementia differently, affecting how the individual, caregivers, family members, and friends may take action if they notice memory changes.

VIDEO RESOURCES

Included below are videos used throughout the *Public Health and Early Detection of Dementia* module, with some additional videos for further learning and discussion. Consider playing them in your learning environment and using them for discussion or reflection among the learners. Suggested discussion questions are included below each video title/link.

Videos from the module

1. **Alzheimer's Association 2025 Alzheimer's Disease Facts and Figures**
   a. What did you learn from this video?
   b. How does this video inform public health work on early detection of dementia?
2. **NAS Tennessee Department of Health Alzheimers in the Dark Public Service Announcement**
   a. What makes this video an effective campaign for the early detection of dementia?
   b. What are ways this video could be used to support public health action to address dementia?
3. **Why Getting a Diagnosis is Important: Alzheimer's Association National Early-Stage Advisory Group**
   a. What did you learn from this video?
   b. How does this video inform public health work on early detection of dementia?
4. **The Diagnosis Journey: Alzheimer's Association National Early-Stage Advisory Group**
   a. What did you learn from this video?
   b. What are ways this video could be used to support public health action to address dementia?

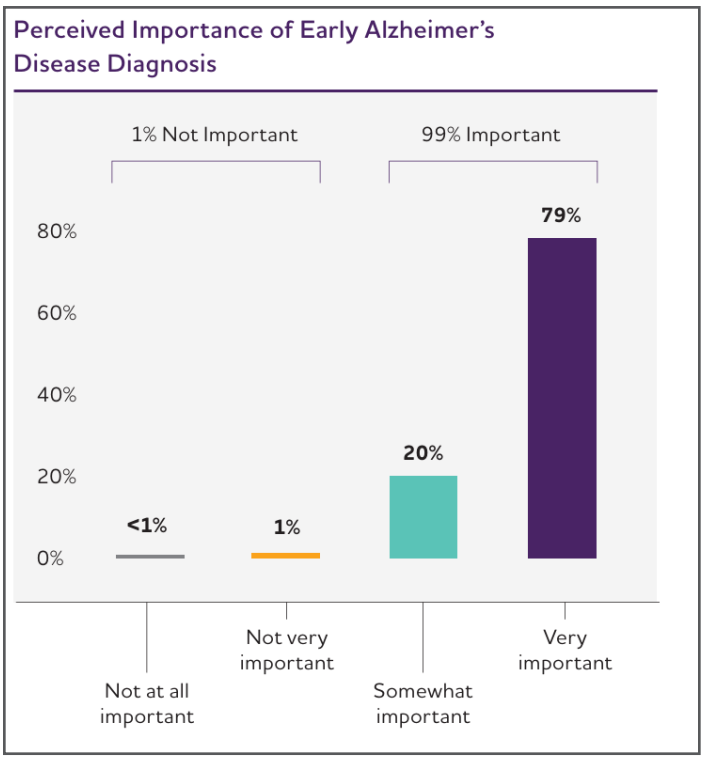
VIDEO RESOURCES [CONTINUED]

Additional videos for learning

1. **Great Lakes Inter Tribal Council: A day in the life; A Tribal Dementia Story**
   a. What does this video tell you about culture and dementia?
   b. How does culture affect how public health can influence early detection of dementia?
2. **Comprendiendo la Pérdida de Memoria / Understanding Memory Loss**
   a. What makes this video an effective campaign for the early detection of dementia?
   b. What are ways this video could be used to support public health action to address dementia?

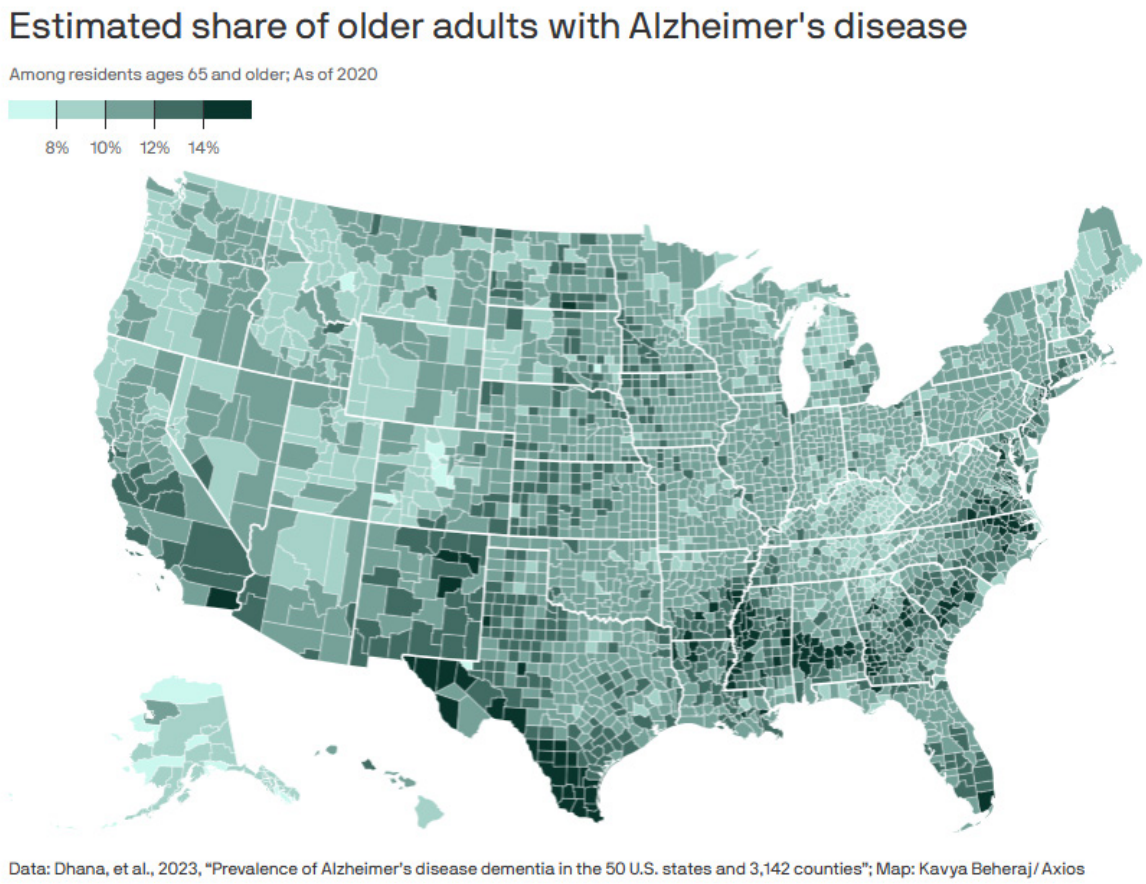
GRAPHIC RESOURCES

Included below are graphics used in the module. They can be used as a basis for discussion or activities in your learning environment. Possible answers are shown in italics, where appropriate, but answers are not exhaustive or comprehensive. Graphics may be copied and inserted into a PowerPoint.



Questions:

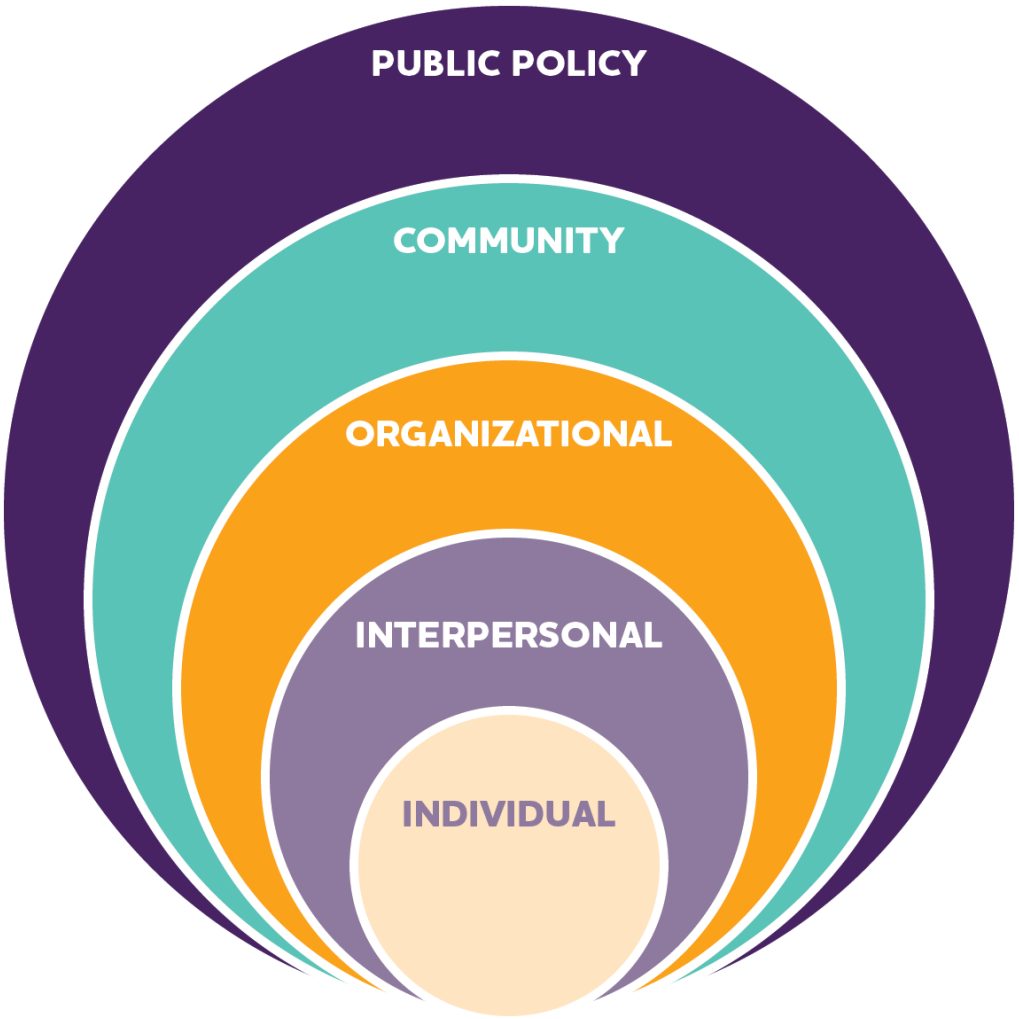
1. Summarize the meaning of this graphic in a few sentences.
   a. *Americans in this survey overwhelmingly viewed early diagnosis of Alzheimer's disease as important (99%), with 4 in 5 (79%) indicating that early diagnosis of Alzheimer's disease is very important.*
2. Why is this graphic important for public health professionals addressing dementia?
   a. *Evidence demonstrates that diagnosis is important to Americans, furthering the importance of early diagnosis awareness and initiatives.*



Use the image above, or have learners explore the interactive version, [Alzheimer's prevalence, mapped](#).

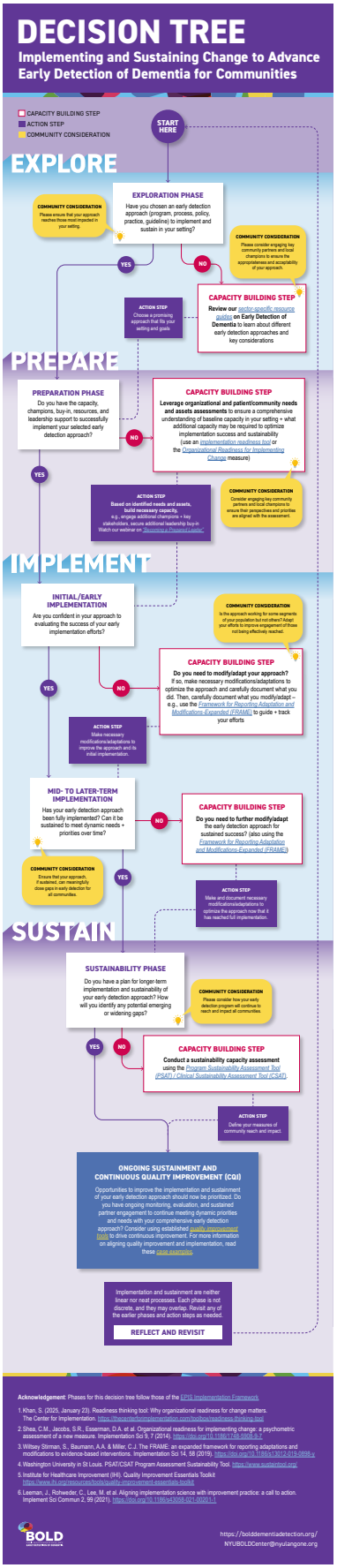
Questions:

1. What patterns do you see in this map?
   a. *The darker colors show higher estimates of Alzheimer's disease rates. Some counties in the Midwest, southern Texas, and throughout the southern states such as Mississippi, Alabama, and Florida have higher estimates.*
2. How can this data be used to inform public health action?
   a. *Alzheimer's disease statistics at the county and state levels can help public health professionals understand the scope of the problem and the areas of greatest need.*



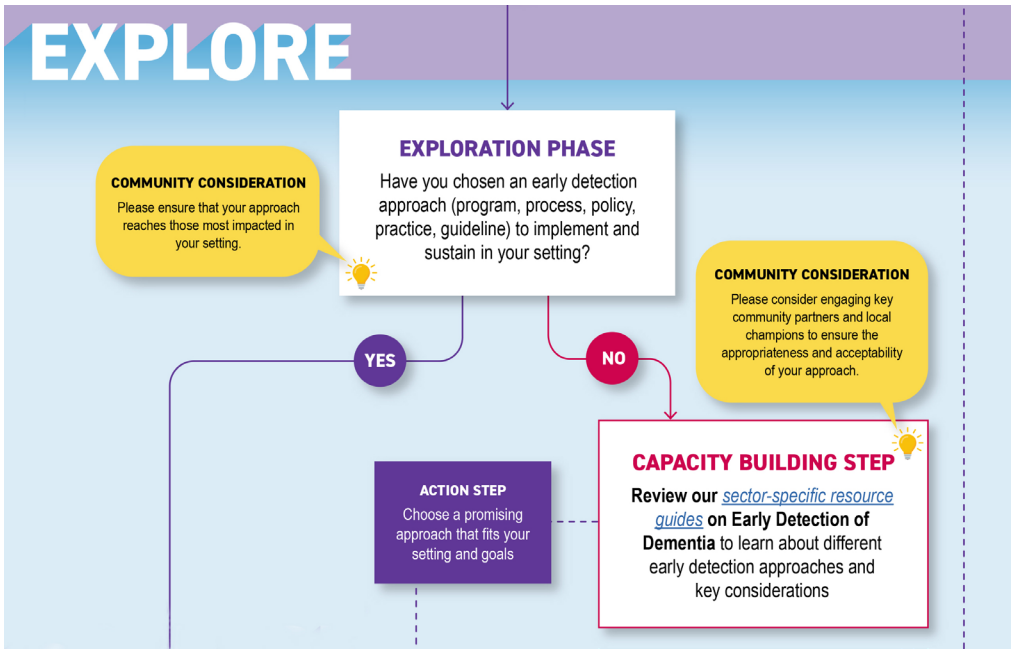
Questions:

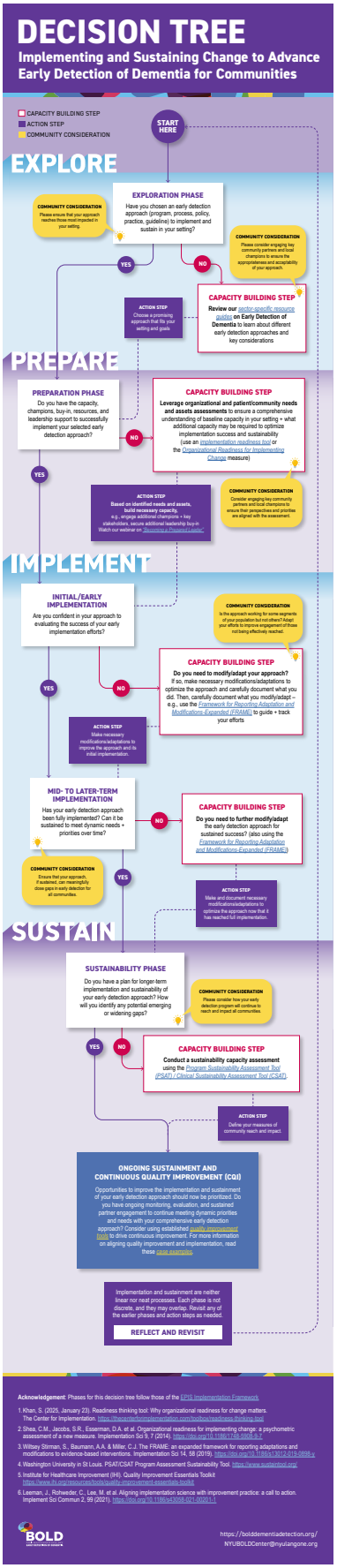
1. For each level in the Social Ecological Model, provide at least one way public health can help support early detection of dementia.
   a. *Individual: Provide brochures at a doctor's office about having conversations about memory concerns with their doctor.*
   b. *Interpersonal: Provide resources for family members who are concerned about thinking changes in their grandmother.*
   c. *Organizational: Training for health care providers on recognizing the early signs of dementia.*
   d. *Community: An ad campaign to increase understanding of dementia as a disease and not a normal part of aging, tailored to a specific audience.*
   e. *Public Policy: Policies that promote insurance coverage of regular cognitive assessment.*



Questions:

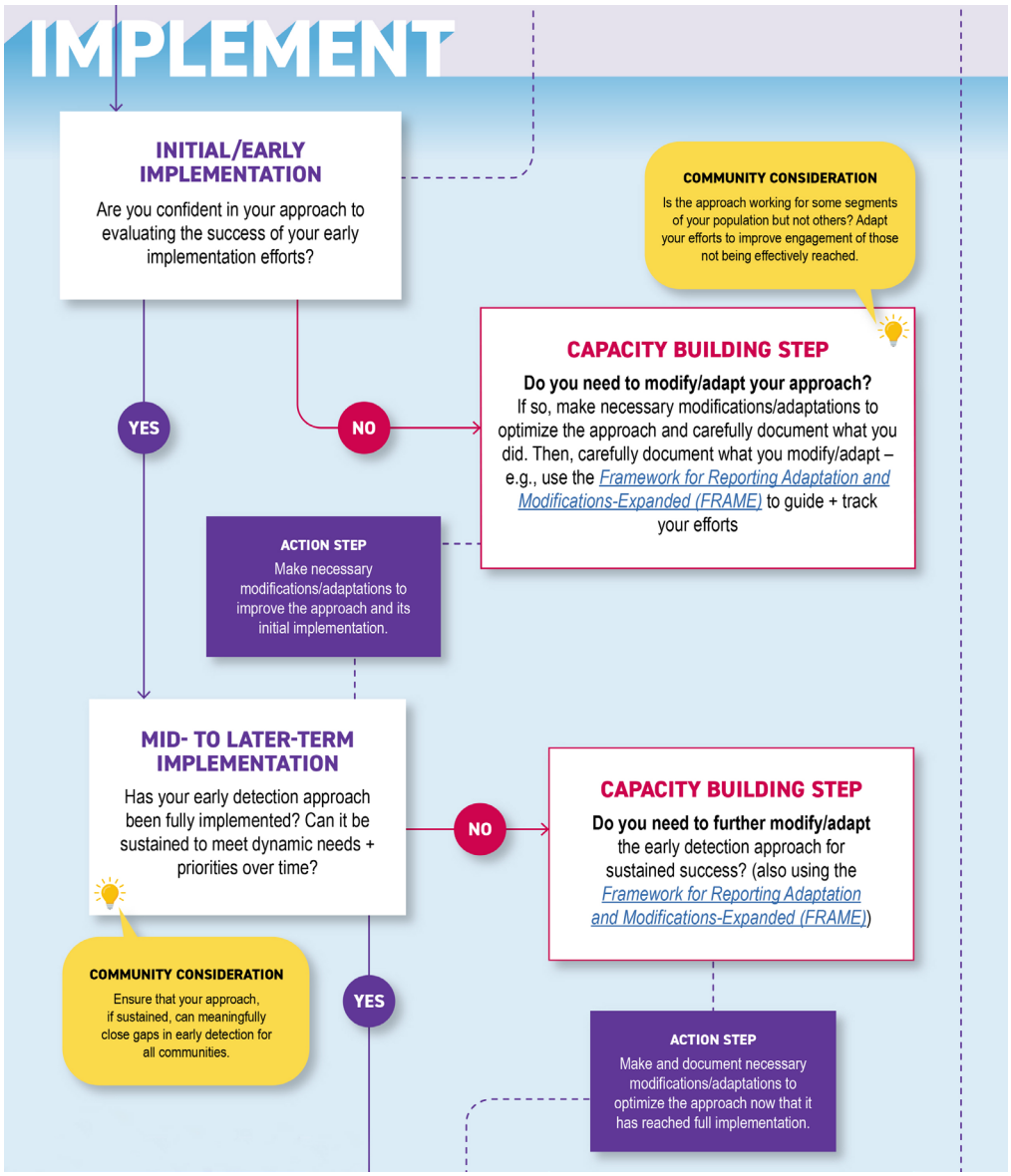
1. In the first phase (Explore), what factors should you consider to ensure the appropriateness and acceptability of an approach?
   a. *Factors to consider include the community's specific needs, existing resources, cultural appropriateness, potential partners, etc.*

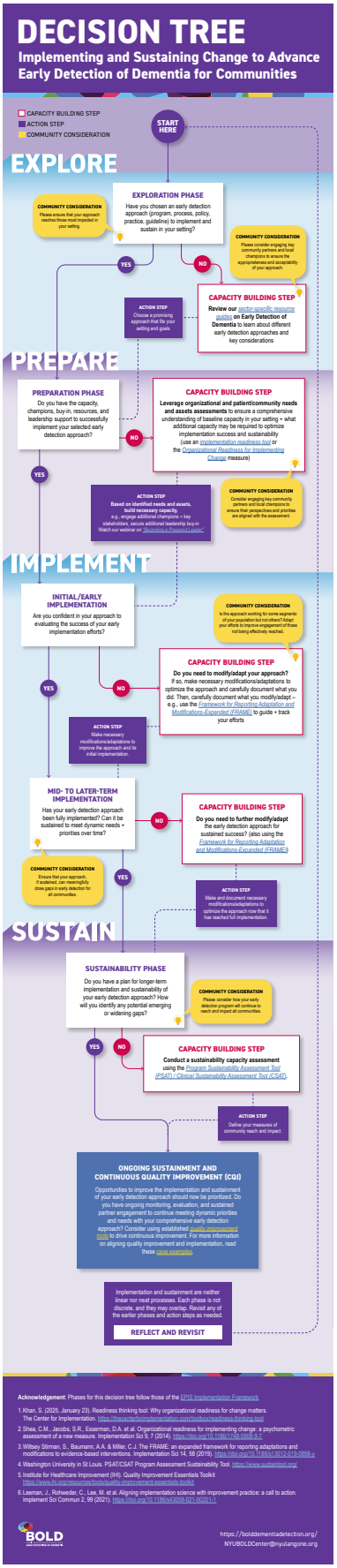




2. In third phase (Implement), what measures could you use to assess community reach and impact?

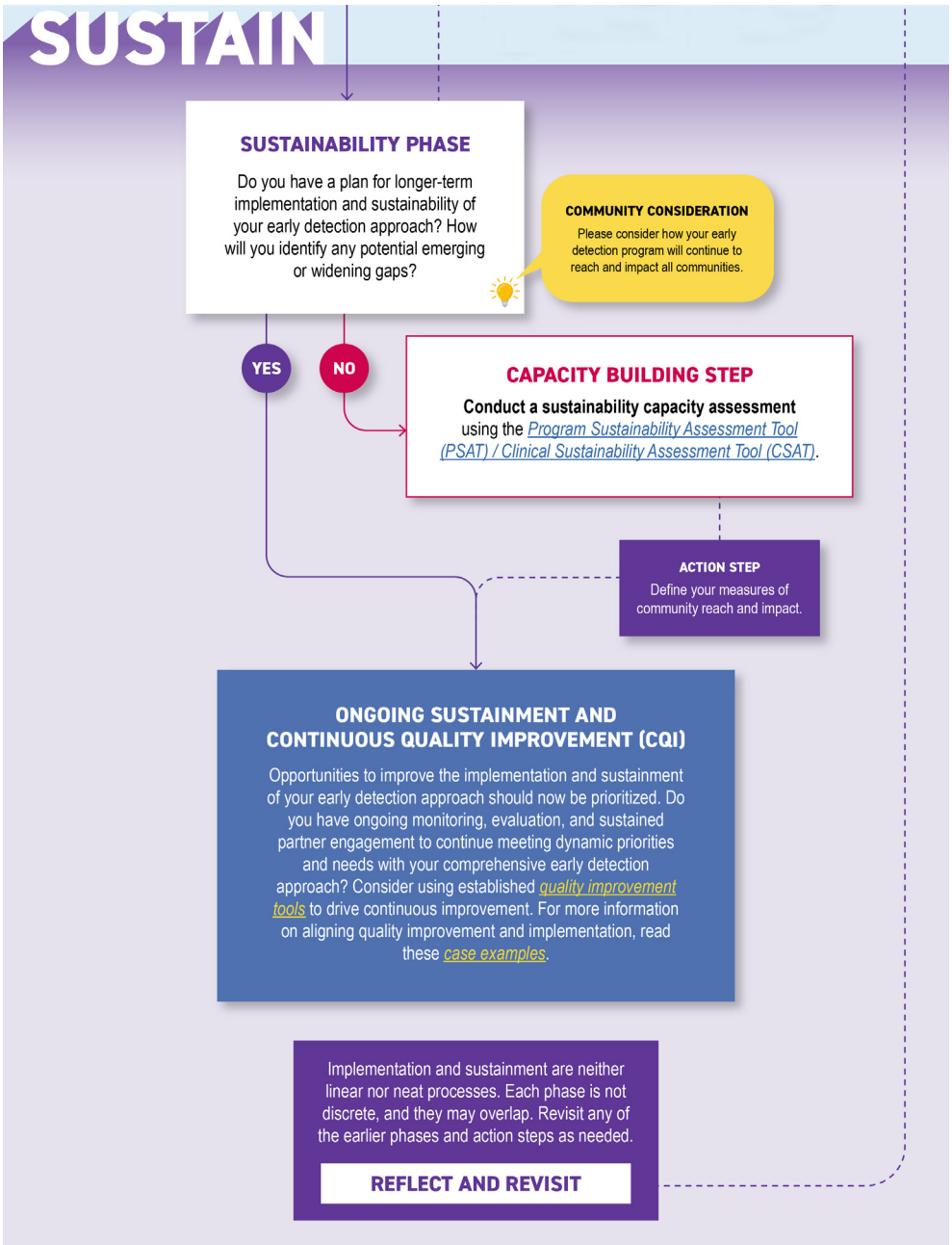
   a. *Measures to assess community reach and impact include tracking the number of individuals reached, feedback from participants, and changes in early detection rates.*





3. Why is ongoing sustainment and quality improvement important?

   a. *Being able to adapt to a community's changing needs and climate is vital to the success of public health initiatives. This helps ensure that the approach remains relevant and effective over time.*



ADDITIONAL READING AND RESOURCES

If you are interested in learning more about the role of public health in early detection and diagnosis of dementia, some great ways to get started in your community include:

- Learn about dementia diagnostic processes in the local health systems in your community.
- Read the Early Detection of Dementia Toolkit - Health Systems.
- Connect with your local Alzheimer's Association chapter to hear from and support people with lived experience.

If you would like to learn more about specific public health topics in dementia, consider completing the other modules in this curriculum:

- Public Health and Dementia — Part 1: Understanding the Public Health Impact of Dementia
- Public Health and Dementia — Part 2: Implementing Public Health Strategies for Dementia
- Health Equity in Dementia — Using a Public Health Lens to Advance Health Equity in Alzheimer's and Other Dementia
- Public Health and Dementia Risk Reduction
- Public Health and Dementia Caregiving

If you would like experience in aging or dementia research, practice, or policy, consider contacting local entities for practicum and thesis opportunities. Many local health departments and organizations have established internship/practicum opportunities. Contributing to their work on aging or dementia focused initiatives may be a great opportunity for you and the organization.

For starters, you might check out these organizations:

- Advocacy organizations such as AARP or Justice in Aging
- Aging Services
- Alzheimer's Disease Research Center (ADRC)
- Diverse Elders Coalition
- Health department (who may have relevant BOLD, HBI, or state-funded programs)
- Local Alzheimer's Association Chapter
- National Council on Aging

Additional resources include:

- 10 Early Signs and Symptoms of Alzheimer's and Dementia
- 10 Steps to Approach Memory Concerns in Others
- Decision Tree on Implementing and Sustaining Change to Advance Early Detection of Dementia for Communities
- Early Detection of Dementia Toolkits
  - Health Department
  - Health Systems
- HBI State and Local Road Map, 2023-2027
  - HBI State and Local Road Map Implementation Guide
  - HBI State and Local Issue Map: Ensuring Early Detection and Diagnosis
- HBI Road Map for American Indian and Alaska Native Peoples
  - HBI Road Map for AI/AN Peoples Implementation Guide
  - HBI Road Map for AI/AN Peoples Issue Map: Advancing Early Detection and Diagnosis
- IA2's Dementia Friends Room Experience
- Washington State Department of Health Community Dementia Education Resources

Funding Statement

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APPENDIX A: SAMPLE TEST QUESTIONS

1. True or False: Dementia is a normal part of aging.

2. What does the term "subjective cognitive decline" (SCD) refer to?
   A. Cognitive decline observed by a health care professional
   B. Cognitive decline is a normal part of aging
   C. A person's own experience of difficulties in thinking or memory
   D. Cognitive decline that is diagnosed through brain imaging

3. True or False: Everyone with Mild Cognitive Impairment (MCI) goes on to develop dementia.

4. What is the goal of early detection of dementia?
   A. Predict workforce shortages in coming years
   B. Identify diseases in the earliest stages, before the onset of more severe symptoms or a crisis
   C. Understand why family relationships change as people age

5. What are the benefits of early detection of dementia? (Select all that apply.)
   A. Reducing health care costs
   B. Improving personal and financial planning
   C. Increasing the number of medications prescribed
   D. Delaying the onset of dementia

6. Identify whether the following is detecting or diagnosing dementia:

   Janice is beginning to experience occasional memory lapses and difficulty finding words. Her family is concerned and they discuss what they have been noticing with Janice. Janice and her family then work together to make a plan to raise this in her next visit with her general practitioner.

7. Identify whether the following is detecting or diagnosing dementia:

   Jim was referred by his primary care doctor for evaluation by a neurologist, who interviewed Jim and his son and performed a series of assessments, including brain imaging. After the evaluation, the neurologist met with Jim and his son to give him a diagnosis of Alzheimer's and set up a care plan and next steps.

8. In promoting early detection, public health professionals could consider: (Select all that apply.)
   A. Running public awareness campaigns about the importance of discussing memory and thinking issues with providers at the earliest sign of a problem.
   B. Increasing awareness about dementia for people at risk for dementia.
   C. Improving community-clinical linkages to connect community members to appropriate care professionals who can diagnose dementia and connect them to ongoing care
   D. Educate the public about how the new developments in diagnosis, care and treatment apply across all stages of the dementia continuum.

9. How can the collaboration between health care teams and cognitive health providers improve patient outcomes?
   A. By reducing the need for specialized training and education for health care providers.
   B. By ensuring that all patients receive the same treatment regardless of their specific needs.
   C. By integrating cognitive health conversations into routine care, it can lead to earlier detection and intervention for cognitive decline.

10. True or False: Cultural attitudes toward aging can influence how dementia symptoms are perceived and addressed.