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STRENGTHENING COMMUNITY- CLINICAL LINKAGES

A HEALTHY BRAIN INITIATIVE ISSUE MAP

The Healthy Brain Initiative: Road Map for American Indian and Alaska Native Peoples is a guide focused on addressing dementia in American Indian and Alaska Native (AI/AN) communities.

Find the HBI Road Map for AI/AN Peoples and additional tools, resources and data at: alz.org/HBIRoadMapAIAN



**HEALTHYBRAIN
INITIATIVE**
Road Map Series

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PUBLIC HEALTH AND COMMUNITY-CLINICAL LINKAGES

Community-clinical linkages are connections between community and clinical sectors that aim to improve health within a community. They are an effective, evidence-based approach to preventing and managing diseases such as Alzheimer's and other dementias. The public health function of convener, bringing together multiple groups from across communities, has been successfully used for decades to build relationships to address chronic diseases.

Building relationships within and outside of the health and public health sectors — such as faith-based communities, small businesses and schools — can be helpful in many ways. In the context of brain health, these relationships can strengthen efforts to address indigenous and social determinants of health¹ and improve equitable access to healthy and safe neighborhoods and environments. They can also provide access to community resources that encourage socialization, especially for people living alone, with disabilities or in areas with limited transportation options. In addition, these relationships can increase awareness about the indigenous and social determinants of health in the community and the opportunities for integrating cultural practices to improve health.

Partnerships begin by listening and learning. Conversations with a community about dementia should include people living with dementia, their families and caregivers. In some cases, new coalitions or collaborations may need to be created. In others, existing coalitions could broaden their membership or expand their scope to address brain health, dementia and caregiving. Places to start include tribal-led coalitions, Tribal Epidemiology Centers, Area Indian Health Boards, Title VI programs, state Alzheimer's disease coalitions and Building Our Largest Dementia (BOLD) Infrastructure program coalitions. Strong relationships with state and community agencies can improve timely access to programs and provide critical links to valuable

services. Recognizing community-clinical linkages between community-based programs and clinical services, and using them as a bridge for relationship building and connection, can have a pivotal impact.

Compelling Data:

- AI/AN Elders are especially affected by inequities in health care services, housing, economic security and other services needed to grow older with dignity.²
- AI/AN Elders experience limited access to long-term care resources and facilities. When these resources are available, they often do not meet Elders' cultural needs.²
- The Native Urban Elders needs assessment showed the most commonly reported types of health care coverage were Medicare (50.2%) and the Indian Health Service (30.1%). The greatest reported barrier to receiving health care was cost (18.2%).³
- The average total annual health care costs for AI/AN adults with dementia who access services through IHS and tribal health programs was 70% higher than for AI/AN adults without dementia.⁴
- AI/AN adults with dementia have more chronic health conditions than those without dementia, further complicating care.^{4,5,6,7}

Potential Partners to Enhance Community-Clinical Linkages

- Caregivers and people living with dementia
- Government and public safety
- Groups focused on Elders or older adults
- Groups focused on improving health in the community
- Groups focused on youth and intergenerational programs
- Health care professionals
- Media
- Nonprofits supporting the community
- Professional associations
- Tribal colleges and universities

References

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COMMUNITY-CLINICAL LINKAGES

ACTION AGENDA

The *Healthy Brain Initiative: Road Map for American Indian and Alaska Native Peoples* offers actions to improve brain health throughout life. It promotes health equity by using a strength-based approach that honors the diverse AI/AN cultures and incorporates the indigenous determinants of health. Actions within each domain help tribes, nations, pueblos, bands, villages and urban Indian organizations strengthen community-clinical linkages.



E DOMAIN: ENGAGE COMMUNITIES AND SHARE KNOWLEDGE



- E-III Provide information on how to recognize signs of dementia and increase awareness of services, care, and social support for people living with dementia and their caregivers.
- E-IV Ensure caregivers have information about their important roles and how to support their own health and well-being.



W DOMAIN: BUILD A REPRESENTATIVE AND SKILLED WORKFORCE



- W-I Provide ongoing training to health care providers to support culturally centered and appropriate conversations about brain health and dementia.
- W-II Provide training to community health and direct service workers who work in AI/AN communities about brain health and the ways dementia disproportionately impacts those they serve.



M DOMAIN: MEASURE, EVALUATE AND USE DATA



- M-III Put data into action by sharing findings with AI/AN leaders, community members and organizations to help inform awareness efforts, resource needs, programs and policies.



P DOMAIN: STRENGTHEN POLICIES AND RELATIONSHIPS



- P-I Build relationships within and outside of the health and public health sectors to strengthen sustained commitments to brain health and its physical, mental, emotional and spiritual impacts across the life course.
- P-II Engage AI/AN leaders to increase awareness about the indigenous and social determinants of health associated with brain health, dementia and caregiving.

COMMUNITY IN ACTION: PUBLIC HEALTH STRENGTHENING COMMUNITY-CLINICAL LINKAGES

Norton Sound Health Corporation, Alaska

Norton Sound Health Corporation (NSHC), based in Nome, Alaska, serves a vast and remote region just south of the Arctic Circle, encompassing 15 surrounding villages. With a population that is 74% Alaska Native, NSHC is committed to strengthening community-clinical linkages to enhance Elder care, particularly for those living with dementia. Recognizing a lack of assisted living facilities and the importance of their independence, NSHC prioritizes Elders aging at home through in-home support and care coordination.

NSHC has developed a multidisciplinary dementia team that includes physicians, direct service professionals, and social service providers to coordinate early detection, support plans, and home-based support. Physicians will travel from Nome to the villages to conduct home-based assessments, rather than asking homebound Elders to travel by plane to the city.

Their workforce development initiatives, in partnership with the University of Alaska Fairbanks, train Personal Care Attendants from the community to provide essential

services such as assistance with daily tasks, respite care for families, and home safety assessments. They also work closely with community-based organizations and other service providers in the villages for added support.

Beyond clinical care, NSHC actively raises dementia awareness through biannual health fairs in each village, distributing educational materials to every household, and utilizing radio broadcasts.

NSHC has made significant strides in developing a community-clinical linkage model that ensures culturally responsive, high-quality care for Elders. Their holistic approach delays institutional placement, preserves family connections, and supports community-based aging. By integrating medical, social, and cultural support, NSHC ensures that Elders receive dignified, community-based care. Their model serves as an example of how remote regions can bridge healthcare gaps while preserving cultural ties.

Community-clinical linkages are connections between community and clinical sectors that aim to improve health within a community. They are an effective, evidence-based approach to preventing and managing diseases such as Alzheimer's and other dementias.

Public health approach focuses on improving the health of entire populations across the lifespan, including dementia risk reduction, early detection and diagnosis, prevention and management of comorbidities leading to preventable hospitalizations, community-clinical linkages, referral to services and caregiving for persons with dementia. It also includes building coordinated systems that bind together jurisdiction efforts for dementia and caregiving.