



LOCAL HEALTH DEPARTMENTS

BEST PRACTICES

DATA DRIVES ENGAGEMENT: USING LOCAL DATA to ADDRESS ALZHEIMER'S

BACKGROUND

More and more local health departments are advancing healthy aging in their communities, and a few are specifically addressing dementia, cognitive health, and caregiving concerns. With the number of Americans living with Alzheimer's projected to nearly triple by 2050, local public health agencies are at the forefront of this trajectory. In order to fully address these issues, local public health officials can embrace, utilize, and codify data usage.

ASSESSING COMMUNITIES

Few community health assessments (CHAs) include older adult health, cognitive health, dementia, or caregiving issues. And so the resulting community health improvement plans (CHIPs) frequently do not include attention to these priority areas. Increasing attention to these issues during the CHA process can better equip local health departments to address healthy aging and older adult health in their communities.

While existing data sources may not be accessible in all jurisdictions (see section below), many CHAs include focus groups or targeted surveys to better understand the current needs of the community and offer an opportunity to assess these issues. With more and more local health departments focusing on health across the lifespan, understanding the needs of older adults will be essential to the success of this work.

Assessing Community Needs

Mobilizing for Action through Planning and Partnerships (MAPP) is a community-driven strategic planning tool from the National Association of County and City Health Officials (NACCHO). The MAPP process convenes a variety of community organizations, groups, and leaders to develop a comprehensive community-based health improvement plan. MAPP stresses community ownership so that not a single government agency is responsible for the plan's implementation. It stresses community involvement and seeks to develop long-term strategies for aspects affecting multiple components of health.

REDUCING DISPARITIES

Local public health attention on cognitive health can be aligned to existing health equity efforts. Alzheimer's, dementia, and cognitive impairment disproportionately affect some populations more than others including Black, Hispanic, and female adults. Public health practitioners must assess the impact of cognitive decline on these populations and identify their unique needs and burden. Data on these populations, however, may be incomplete or difficult to obtain. In response, local health departments may need to transform or expand how they collect these data in order to adequately survey these populations. Community partners may be able to help supplement collection.

EXISTING SOURCES of DATA

Data help inform public health officials and decision makers about the scope, extent, location, and burden of health issues in their communities. Access to existing sources of data varies widely by local health department, and public health practitioners can take stock of which sources are currently or may become readily available. Sources that may include data on cognitive health and dementia include:

- » Hospital and local provider records
- » Community surveys and focus groups
- » State-based registries on dementia or registries that include older adult measures
- » Records and information maintained by community partners
- » Area Agency on Aging assessments
- » Long-term care community reporting
- » Death certificate reporting

Local health departments with a health statistics division or department epidemiologist may be able to further explore existing sources for data related to these issues.

QUALITY IMPROVEMENT and EVALUATION

With accreditation and directives from leadership, many local health departments have an increased focus on quality improvement (QI) and evaluation. While QI measures can be very broad or very specific, local health departments focusing on cognitive health, older adult health, dementia, and caregiving may incorporate these issues into existing QI or evaluation efforts. Public health can consider:

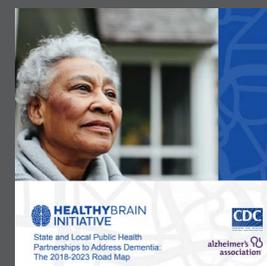
- » **Access metrics:** how are older adults' needs currently being met or not met? Are there enough providers trained in cognitive health to adequately assess cognitive impairment?

HBI Road Map

Alzheimer's and dementia are leading causes of death in many communities. Robust, population-level action is needed to curb the trajectory of Alzheimer's. The Healthy Brain Initiative's *State and Local Public Health Partnerships to Address Dementia: The 2018-2023*

Road Map is an expert-developed guidebook for public health agencies to meet this rising need.

Learn more at alz.org/publichealth



- » **Population metrics:** are “older adults” a priority population? Within underserved populations (including racial and ethnic groups), how are cognitive concerns evaluated?
- » **Chronic condition burden metrics:** how many adults with hypertension are assessed for cognitive decline? With diabetes? With heart disease? How many adults with chronic conditions are asked if they provide care to another person?

If local health departments do prioritize cognitive health, older adult health, dementia, and caregiving, leadership should ensure there is a continuous process in place that improves quality and best meets the needs of the community. This process then helps demonstrate the need of this work and the success of these efforts. Strong evaluation processes help make the case decision-makers, funders, and the public for addressing these issues.

This best practice guide was developed as part of a collaboration between the County of San Diego Health and Human Services Agency ([Aging & Independence Services](#)), the Boston Public Health Commission ([Healthy Homes and Community Supports](#)), and the Alzheimer's Association ([Public Health Department](#)).



For more information on the public health response to Alzheimer's, visit alz.org/publichealth