



Washington State
Plan to Address

Alzheimer's Disease and Other Dementias

Executive Summary
2023-2028

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Alzheimer's disease is the 4th leading age-adjusted cause of death in Washington state. In 2020, around 125,000 people were living with Alzheimer's disease or other dementias in Washington. By 2040, that number is expected to be more than 270,000.

The progressive nature of dementia, its long duration, and its effects on memory, self-care and decision-making create challenges for individuals and families. While caring for a family member or friend living with dementia can be rewarding, it can also be difficult and some caregivers experience stress, isolation, depression, health risks and financial strain. Currently, there are more than 213,000 unpaid family care partners of people living with dementia in Washington.

Dementia, including Alzheimer's disease, is one of the costliest chronic conditions. The total value of health care, long-term care, and caregiving for a person living with probable dementia in the last five years of life is significantly higher than care for a person with heart disease or cancer.

There is no cure for Alzheimer's disease and other dementias, though research is revealing ways to reduce risks for dementia, slow the progression and improve the experience of living with dementia. Early detection and diagnosis provide opportunities to address treatable changes in memory and thinking, allow for better management of comorbidities to help avoid unnecessary hospitalizations or emergency room visits, and offer individuals and families time to make legal, financial and advance care plans. Early detection also sets the stage for more treatments as they become available.

While the greatest risk factor is advancing age, many older adults do not develop Alzheimer's disease or dementia. Another risk factor is family history and associated genetic influences, and again many family members with family history will not develop the condition. This makes it important to identify and address modifiable risk factors.

Research points to a host of contributing factors that potentially modify the risk of developing dementia. These factors offer the possibility that targeted actions by individuals and/or communities may help to reduce the risk of developing dementia over the life course. These include:

- Managing chronic conditions
- Avoiding tobacco and excessive alcohol
- Following a healthy diet
- Staying socially engaged
- Exercising the body and mind
- Preventing and treating hearing loss

An increased awareness and stronger evidence-base has also emerged around social determinants of health and how they affect health outcomes and risks, including delays in detection and treatment among racial and ethnic groups. Recent Washington state data confirm that the prevalence of dementia is higher for Blacks/African Americans and American Indian/Alaska Natives as compared to non-Hispanic whites.

What is needed now

The Dementia Action Collaborative (DAC) has been working toward the achievement of seven high level goals and is making progress. The DAC calls upon public health, health care and the long-term services and support systems to work towards early detection and diagnosis, to identify and treat chronic conditions and to work together to address physical activity, obesity, depression, smoking, hearing loss, excessive alcohol consumption and air pollution concerns to work towards the best health for all Washingtonians throughout the life course.

The projected increases in the aging population and particularly the population living with dementia, require us to amplify our efforts to improve access to and the dementia-capability of all our systems of care and support while elevating our focus on health disparities and equity.

Call to Action

The Dementia Action Collaborative invites everyone to be a part of the solution. The goals, strategies and recommendations in the plan cannot be accomplished by the DAC or state agencies alone. In the plan are suggested actions for individuals and care partners, aging network, long-term services and support organizations, health care providers and systems, public health entities and other community organizations.

GOALS

- 1** Increase public awareness, engagement and education.
 - 2** Prepare communities for significant growth in the population living with dementia.
 - 3** Promote well-being and safety of people living with dementia and their family caregivers and care partners.
 - 4** Promote equitable access to comprehensive, culturally relevant support for family caregivers and care partners.
 - 5** Promote risk reduction and evidence-based health care for people at risk of or living with cognitive impairment and dementia.
 - 6** Increase equitable access to culturally relevant, dementia-capable long-term services and supports.
 - 7** Facilitate innovation and research related to risk reduction, causes of and effective interventions for cognitive decline and dementia.
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More on the specific problems, needs, strategies, recommendations and suggested actions for partners are included in the full report at www.dshs.wa.gov/altsa/stakeholders/alzheimers-state-plan.

Vision and Guiding Principles

Vision

The Dementia Action Collaborative (DAC) envisions a future where all Washington health care providers are educated on risk reduction, early detection and diagnosis of dementia; all Washington communities are dementia-friendly; and all Washingtonians are supported within their own communities and cultures to reduce their risks of dementia. We envision a future that supports choice and provides equitable access to whole person care and long-term supports and services for people living with cognitive decline or dementia, and their loved ones.

Guiding Principles

1. *Person- and family-centered*

Develop the plan with the needs and strengths of all people living with dementia, their care partners and family members at the forefront, this includes attentiveness and action to address differing cultural values.

2. *Health equity*

Apply an equity lens throughout the plan development and implementation. Consider that equitable solutions may mean different groups need different things, not a one-size-fits-all approach.

3. *Life course approach*

Recognize that together we can address brain health throughout the life course, incorporating strategies to reduce modifiable risks for dementia.

4. *Build upon other work*

Build upon what's being done nationally (e.g., National Alzheimer's Plan, CDC Healthy Brain Initiative), and on what's working in Washington, other states and nations.

5. *Public-private framework*

This is not intended as a "state government-only" plan, but rather a framework for what both public and private partners in Washington can do collectively.

The Need for a State Plan

How will this plan help?

The needs and impacts related to dementia are seen in a variety of sectors including long-term care, health care, public health, legal assistance, the business community and more. A state plan is mechanism to outline recommended actions that can be taken by various sectors and entities that align with common goals, and in doing so create a more coordinated, consistent and amplified response.

This plan recognizes that long-term services and supports are an important and costly part of dementia care. At the same time, it acknowledges that dementia is a critical public health and health care system issue as well and offers a comprehensive set of strategies to respond as future needs expand. This includes a focus on early detection and diagnosis, reducing modifiable risk factors, addressing health disparities, and closer coordination between medical care, long-term services and supports and local community-based organizations and partners.

This plan identifies opportunities and steps that individuals, state and local governments, tribal health and/or community partners can take to promote healthy aging and brain health, reduce risks for dementia, improve the quality of life for those living with the disease, ease the strain on family caregivers and reduce associated costs in the future.

This plan increases awareness about the prevalence and expanding needs of Washingtonians living with dementia and the services and resources available to them and offers forward-thinking strategies and actions to galvanize public and private stakeholders in preparing Washington state for the significant increases in the number of people living with dementia that lie ahead.

Who is this plan for?

The Washington State Plan to Address Alzheimer's Disease and Other Dementias was developed by the Dementia Action Collaborative (DAC), with input and ideas from individuals and families living with dementia and other stakeholders. The plan is intended to guide the ongoing **collaborative work of the DAC**. Plan contents will also be useful for **policy and decision-makers** beyond this group to understand dementia-related needs in Washington.

While some recommendations are intended for **state agencies**, the plan itself is not aimed solely at state government. The goals, strategies and recommendations in the plan cannot be done by the DAC or state agencies alone. It will require independent actions from **individuals, stakeholders, local governments, municipalities, and community partners** that align with the goals, strategies and recommendations of the plan.

To help partners act, this plan includes a specific component that outlines possible actions for individuals and/or different types of organizations. Each intended audience can select one or more action steps they want to take to support the plan implementation.

The Dementia Action Collaborative invites anyone to join us in taking ACTION – be a part of the solution! See Appendix C.

Background

What is Dementia?

Dementia² is a general term that refers to the loss of memory, language, problem-solving and other thinking ability severe enough to interfere with everyday life. Dementia develops when brain cells are damaged and cannot communicate with each other normally. Though dementia mostly affects older adults, it is not a part of normal aging.

² Alzheimer's Association. (2022a). 2022 Alzheimer's Disease Facts and Figures. Special Report, More Than Normal Aging: Understanding Mild Cognitive Impairment. Retrieved December 6, 2022, from <https://alz-journals.onlinelibrary.wiley.com/doi/10.1002/alz.12638>.

Alzheimer's disease is the most common form of dementia, accounting for 60-80% of cases. Alzheimer's is a progressive disease with worsening symptoms over time.

Other types of dementia include, but are not limited to, Lewy body dementia, vascular dementia, frontotemporal dementia, and more. Different types of dementia are associated with distinct brain changes and symptoms.

The Alzheimer's Association identifies ten early signs and symptoms of dementia:

1. Memory loss that disrupts daily life
2. Challenges in planning or solving problems
3. Difficulty completing familiar tasks at home, at work, or at leisure
4. Confusion with time or place
5. Trouble understanding visual images and spatial relationships
6. New problems with words in speaking or writing
7. Misplacing things and losing the ability to retrace steps
8. Decreased or poor judgment
9. Withdrawal from work or social activities; and
10. Changes in mood and personality.

See Appendix G: Information About Alzheimer's Disease and Dementia for more details.

While the greatest risk factor is advancing age, many older adults who are in their nineties do not have Alzheimer's disease or dementia. Family history and associated genetic influences are important factors, but many family members of those with Alzheimer's will not develop the condition. This makes it important to find and address modifiable risk factors.

The good news is, that even while there is still no way to prevent dementia, research is revealing a host of potentially modifiable risk factors that individuals may be able to change over the life course. These include:

- Heart-brain connection - Some of the strongest evidence links brain health to heart health. This is logical because the brain is nourished by one of the body's richest networks of blood vessels, and the heart handles pumping blood through these blood vessels to the brain. This includes managing chronic conditions, such as hypertension and diabetes.
- Overall healthy aging - These include eating a healthy diet, staying socially active, avoiding tobacco and excess alcohol and exercising both the body and mind.

More on this topic is discussed later in this report.

