

Measuring and Assessing Progress on Goal 6

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Rationale for Goal 6

- Growing research evidence about risk factors for dementia
 - Strongest evidence for effective management of hypertension (e.g., SPRINT MIND Study)
 - Encouraging evidence for physical activity and cognitive training.
 - Emerging evidence on other dementia risk factors - inadequate sleep, poor nutrition, hearing difficulties, depression, substance use disorders, oral health.
- Recommended by the Advisory Council on Alzheimer's Research, Care, and Services in July 2021.
- Key Considerations:
 - Prioritizes healthy aging
 - Build the infrastructure to translate research into new interventions quickly
 - Address inequities through a public health and community-oriented approach

National Plan to Address Alzheimer's Disease: 2021 Update


Goal 1: Prevent and Effectively Treat Alzheimer's Disease and Related Dementias by 2025 

Goal 2: Enhance Care Quality and Efficiency 

Goal 3: Expand Supports for Individuals and their Caregivers 

Goal 4: Enhance Public Awareness and Engagement 

Goal 5: Improve Data to Track Progress 

New Goal 6: Accelerate Action to Promote Healthy Aging and Reduce Risk Factors for ADRD 



<https://www.nia.nih.gov/health/what-are-signs-alzheimers-disease>



Goal 6 Strategies

- **Strategy 6.A:** Identify **Research** Priorities and Expand Research on Risk Factors for Alzheimer's Disease and Related Dementias
- **Strategy 6.B:** Facilitate Translation of Risk Reduction Research Findings into **Clinical Practice**
- **Strategy 6.C:** Accelerate **Public Health Action** to Address the Risk Factors for Alzheimer's Disease and Related Dementias
- **Strategy 6.D:** Expand Interventions to Reduce Risk Factors, Manage Chronic Conditions, and Improve Well-Being through the **Aging Network**
- **Strategy 6.E:** Address **Inequities** in Risk Factors for Alzheimer's Disease and Related Dementias Among Marginalized Populations
- **Strategy 6.F:** **Engage the Public** about Ways to Reduce Risks for Alzheimer's Disease and Related Dementias



Sample Action Steps Under Goal 6

Action 6.B.1: Educate the health care workforce about risk reduction

Action 6.D.2: Expand the delivery of health and wellness programs to older adults in every community

Action 6.F.3: Enhance the reach and effectiveness of public health messaging on blood pressure control

E.g. CDC's Million Hearts[®], NIH's "The Heart Truth" and "Mind Your Risks"



Current Progress and Data Tracking

- Current data tracking efforts focus primarily on outputs, not outcomes
- Additionally track population of people with ADRD through:
 - Public Health Surveillance:
 - Behavioral Risk Factor Surveillance System (BRFSS) Cognitive Decline and Caregiving Modules
 - National Health and Nutrition Examination Survey (NHANES) new Cognitive Performance and Subjective Cognitive Decline measures
 - Longitudinal Studies of Aging
 - Health and Retirement Study (HRS) Harmonized Cognitive Assessment Protocol (HRS-HCAP)
 - National Health and Aging Trends Study (NHATS) measures of executive functioning and disability
 - Medicare and Medicaid Claims Data

Measuring and Tracking Progress on Goal 6



- How do we define success for Goal 6?
- Do we focus on our federal efforts, or think broader?
 - Increased number and scope of federal risk reduction activities?
 - Increased federal investments in risk reduction?
- How do we know whether our federal activities are making a positive difference to promote brain health and healthy aging?

Measuring and Tracking Progress on Goal 6



- Some challenges with tracking progress based on the prevalence of risk factors (e.g. hypertension):
 - Data quality is key!
 - Accuracy (administrative versus self-report versus measured)
 - E.g., depending on the data source, HTN may be underdetected
 - Timeliness
 - Improving awareness & identification could increase the measured prevalence of HTN (in short run)

Measuring and Tracking Progress on Goal 6



- Underdetection also has implications for how we measure disparities and whether Goal 6 is narrowing inequities in the burden of risk factors.
- How to measure the relative impact of Goal 6 vs. other efforts?



Rahul Aggarwal. Hypertension. Racial/Ethnic Disparities in Hypertension Prevalence, Awareness, Treatment, and Control in the United States, 2013 to 2018, Volume: 78, Issue: 6, Pages: 1719-1726, DOI: (10.1161/HYPERTENSIONAHA.121.17570)

Possible Intermediate Measures



- Integration of risk reduction into clinical activities
- Integration of brain health into public health campaigns
- Provider education and awareness
- Patient education and awareness



Other Considerations

- How does the strength of the research evidence guide where we focus our measurement efforts?
- Measuring disparities – are we reaching all communities and narrowing disparities?
- Do we need broader NAPA data infrastructure to measure progress?



Charge to the Risk Reduction Subcommittee

- Make recommendations to HHS: What do we define as success, and how should we measure progress on this goal?
- Develop a framework to:
 - Identify measures
 - Improve measurement
 - Track disparities among disproportionately affected populations
 - Identify needed enhancements in our data infrastructure
 - Determine how to review progress and update measurement plan