Reducing the Impact of Dementia in America

A NASEM Decadal Survey of the Behavioral and Social Sciences

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Presentation Outline

- What is the Decadal Survey?
- Decadal Survey Research Priorities and Detailed Research Needs
- Current NIA AD/ADRD Behavioral and Social Science Activities
- Informing Future Activities

National Institute on Aging



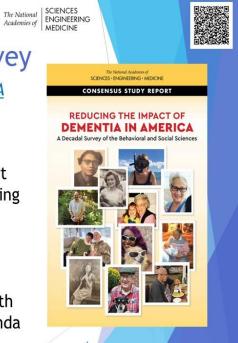
What is the Decadal Survey?



NASEM AD/ADRD Decadal Survey

Reducing the Impact of Dementia in America: A Decadal Survey of the Behavioral and Social Sciences released August 4, 2021

- NIA spearheaded support for this major effort and was joined by several co-funders, including NIH OBSSR, VA, ASPE, AARP, Alzheimer's Association, American Psychological Association, JPB Foundation, and John A. Hartford Foundation
- ➤ An ad hoc expert committee was charged with developing a 10-year AD/ADRD research agenda in behavioral and social sciences



Decadal Survey Activities and Process

Visit the <u>NASEM AD</u> <u>Decadal Website</u> for more information.

- ▶ Who:
 - Expert ad hoc committee
 - Advisory panel to the committee comprised of persons living with dementia (PLWD) and care partners
- Process: (1) Information gathering and (2)
 Committee deliberation and report development
- Information gathering:
 - ► Four public workshops
 - ► Six commissioned papers
 - ► Multiple opportunities for public comment
 - ► Advisory panel input

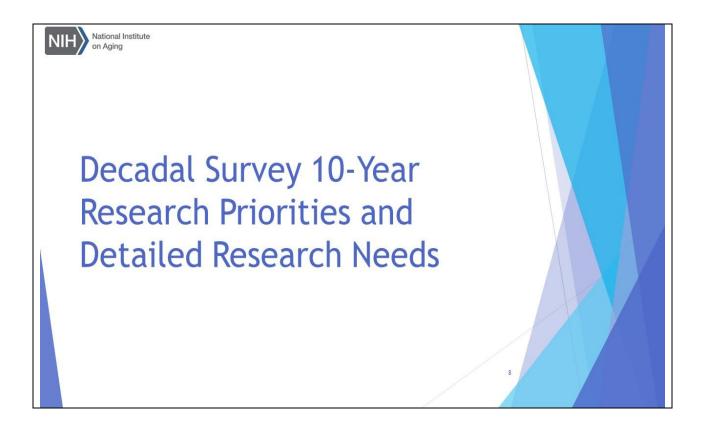




Advisory Panel to the Committee: Input Themes

- ► Theme 1: Difficulty in obtaining accurate and timely dementia diagnosis
- ▶ Theme 2: Problems in obtaining supports and services
- ▶ Theme 3: Communication challenges with doctors and other health care professionals
- ▶ Theme 4: Fear and loss





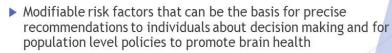


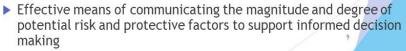


Chapter 2: Prevention and Protective Factors



- Understand modifiable factors that can prevent AD/ADRD or reduce or delay their symptoms
 - Causal effects of social factors
 - Effects of health-related behaviors and their management over lifecourse
 - ▶ Modifiable drivers of racial/ethnic inequality in dementia incidence
 - ▶ Mechanisms through which SES factors influence brain health













Chapter 3: PLWD Outcomes and Lived Experience



- Substantively improve experience of PLWD by supporting their dignity and well-being, including balancing safety and autonomy
 - Improved screening and diagnosis, including guidance for clinicians that also addresses issues related to disclosure



- Guidance to support ethical and responsible decision making by and for PLWD
- Outcome measures that reflect perspectives and values of PLWD, their care partners, and communities



▶ Improved design and evaluation of nonpharmacological interventions to slow or prevent cognitive and functional decline, reduce behavioral and psychological symptoms, improve comfort and well-being, and adequately and equitably serve diverse populations

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Chapter 4: Family Care Partners

 Substantively improve experience of family care partners/caregivers





- Identify highest-priority needs for resources and support for family caregivers and how needs vary by subgroup
- Identify assets family caregivers bring to their work and needs for supplement skills and training
- Innovations to address practical and logistical challenges of family caregiving, including use of technology
- Continued progress in data collection and research methods

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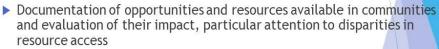


Chapter 5: Role of Community

Facilitate development of communities that support PLWD and care partners, allow for PLWD to live independently, maintain social connections, and mitigate negative effects of past and current SES and environmental stressors



 Characteristics of communities that influence risk of developing dementia and experience of living with disease



- Analysis of characteristics of dementia-friendly communities
- Evaluation of innovative approaches to adapting housing, services, and supports to keep PLWD in community and out of institutional care

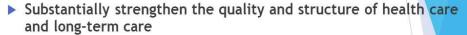
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Chapter 6: Health Care, Long-term Care, End-of-Life Care





- Documentation of diagnosis and care management for PLWD and care partners
- ▶ Clarification of disease trajectories to help health systems plan care
- Identification of effective methods for providing services throughout disease trajectory
- Development and evaluation of standardized systems of coordinated care for PLWD with multiple chronic conditions
- ► Effective approaches for integrating and coordinating care services across health care systems and community-based organizations

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Chapter 6 (cont.): Care Payment Models



 Substantially strengthen the arrangements through which most dementia care is funded - traditional Medicare, Medicare Advantage, alternative payment models, and Medicaid

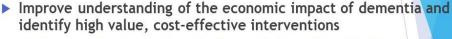
- Comparison of effects of different financing structures on quality of care and clinical outcomes
- Examination of ways to modify incentives in reimbursement models to optimize care and reduce unnecessary hospitalizations
- Development and testing of approaches to integrated financing of medical and social services

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Chapter 7: Economic Costs







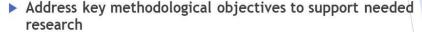


- Estimate of value to PLWD, families, and society of innovations in prevention, diagnostics, and treatment, including pharmacologic treatments
- Assessment and quantification of total economic impact of dementia for PLWD and families including current and future national costs

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Chapter 8: Data Collection and Research Methodology





- ▶ Expansion of data infrastructure and improved data collection
- Improved measurement of exposures and outcomes
- Adoption of more rigorous study designs, particularly in realm of implementation science, so research findings can be successfully integrated into clinical and community practices
- Development of systematic approaches for integrating evidence from disparate studies
- Improved inclusion and representation of diverse individuals among research participants and researchers

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Current NIA Behavioral and Social Research Activities

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