Dementia: America’s Home Town, Public Health Crisis
A Call to Action

Families and communities in every city, town, and rural area in the U.S. are feeling the impact of Alzheimer’s disease and other forms of dementia. In Minnesota, 2018 figures1 include:

* Approximately 94,000 Minnesotans age 65+ are living with Alzheimer’s.
* Some 254,000 Minnesotans care for family members with Alzheimer’s disease or other dementias. These caregivers provide 289 million hours of unpaid care, valued at $3.6 billion.

In the United States, 2018 figures1 include:

* One in ten people age 65 and older has Alzheimer's disease.
* About one-third of people age 85 and older have Alzheimer's disease.
* The number of people living with Alzheimer’s is projected to increase from 5.7 million (2018) to nearly 14 million (2050). By 2050, someone in the U. S. will develop Alzheimer’s every 33 seconds.
* Young onset Alzheimer’s, occurring in people under age 65, is also on the rise.
* Almost two-thirds of people with Alzheimer’s disease are women.
* Older African-Americans and Hispanics are more likely than older whites, on a per capita basis, to have Alzheimer's disease and other dementias.
* The estimated direct cost of caring for people with Alzheimer’s and other dementias will total $277 billion in 2018, increasing to $1.1 trillion (in 2018 dollars) by 2050.

Nearly 70 percent of people with Alzheimer’s or other dementias live in the community. Those who live alone are at greater risk for inadequate self-care, malnutrition, untreated medical conditions, falls, wandering and accidental death.[[1]](#footnote-1)

We are fundamentally unprepared to meet the challenges of dementia, which places the vitality and livability of communities at risk and threatens quality of life and care for millions who are living with or touched by the disease. We have knowledge and tools to take action now, community by community. Some of the realities we must consider include:

**People with dementia** face isolation due to lack of awareness, the stigma surrounding the disease, and often, the fear of exploitation. Technology and human supports at home can support daily needs, but if people with dementia lack confidence or can’t easily access day-to-day community life, they will isolate themselves. We know from research that isolation impoverishes health**.**

**Families, friends and neighbors** are a critical part of our fragile support system but they often juggle maintaining their jobs, raising children and caregiving responsibilities. If caregivers don’t get the support they need to carry out their critical role, people with dementia will be less able to remain and participate in community.

**Businesses** must equip employees to understand and better serve people with dementia and their adult care partners, because the population aged 65 and over is projected to be 83.7 million by 2050.[[2]](#footnote-2) Increasingly, one customer loyalty measure will be the ability of businesses to respond appropriately to customers experiencing cognitive decline, as well as their family/friend caregivers. Businesses must also support employees who care for someone with dementia to foster employee continuity and retention. This is a bottom line issue. Nationally, billions of dollars in lost revenue/productivity in the workplace are related to the demands on employees who are caring for someone with dementia.

**Legal, financial and insurance services** have unique ethical and legal responsibilities when serving clients with dementia. Providers of such services are often the first to see signs of cognitive decline and have unique legal and ethical responsibilities to recognize them and respond appropriately. People with dementia will need assistance and support in planning for a future where they may not have decision-making capacity.

**Health care and community services providers** have a critical role in identifying and diagnosing dementia, offering care options, providing education and support, and linking people with dementia and their care partners to community resources. Currently, only about half of the people living with dementia actually receive a dementia diagnosis. As a result, they don’t access needed follow-up care, support and future planning services.

**Faith** **communities** play a vital role in offering safe, supportive, and welcoming environments for people with dementia and their families. Faith communities can benefit by seeking creative ways for meaningful participation to retain and serve their aging members and their adult children and caregivers.

**Local government** can ensure access to community life by being mindful of the cognitive challenges of residents in the same way they are mindful of physical challenges when they plan for housing, transportation, public spaces and services (e.g., parks, libraries, housing stock), and when they plan for emergency, disaster, and law enforcement responses. Such planning not only helps people with dementia, but is inclusive of all generations and community sectors.

Every part of the community plays a role in working together to create a dementia-friendly culture that raises awareness of, and develops respect and inclusion for, people with dementia; has accessible services and resources embedded across the community to promote quality of life; supports and educates people with dementia and their care partners along the care continuum; and promotes meaningful engagement in community life.

1. Alzheimer’s Association, 2018 Alzheimer’s Disease Facts and Figures. Alzheimer’s & Dementia 2018, Volume 14 (3). Visit <https://www.alz.org/facts/overview.asp> for more information. [↑](#footnote-ref-1)
2. 2 Source: U.S. Census Bureau, 2012 Population Estimates and 2012 National Projections. [↑](#footnote-ref-2)