

Alameda County Public Health Department Healthy Brain Initiative | Program Evaluation July 1, 2023 – June 30, 2025

Executive Summary

Overview and Background: The Alameda County Healthy Brain Initiative (HBI) takes a public health approach to Alzheimer’s Disease and Related Dementias (ADRD). In alignment with the Alameda County Public Health Department’s (ACPHD) mission, HBI centers equity in its community consensus-driven approach. HBI also aligns with the [Healthy Brain Initiative State and Local Road Map for Public Health, 2023-2027](#), developed by the Centers for Disease Control and Prevention and the Alzheimer’s Association, which prioritizes increased integration with other chronic disease efforts and “advances equity by fully integrating brain health and caregiving into state and local public health practice and addressing social determinants of health that impact brain health across the life course” (4).

Focus Areas: HBI was launched with a two-year grant (July 1, 2023 – June 30, 2025) from the California Department of Public Health (CDPH) that included objectives in these focus areas:

- 1. Community Advisory Coalition:** The [Alameda County Age-Friendly Council’s Embracing Aging \(EA\) Workgroup](#) serves as HBI’s Community Advisory Coalition. Representing community-based organizations and County agencies, members bring deep experience to the work.
- 2. Community Needs Assessment and Strategic Plan:** The HBI Community Needs Assessment (CNA) and Strategic Plan were developed in partnership with the Age-Friendly Council, its EA Workgroup, and ACPHD’s Community Assessment, Planning and Evaluation (CAPE) Unit. Together, they gathered quantitative and qualitative data on the need for a better coordinated system of care. Among Alameda County residents aged 65 and older in 2020, there was a 12.1% prevalence of Alzheimer’s Disease overall; and in 2021, ADRD was the third leading cause of death in that age group. There are significant disparities by race and ethnicity, particularly for the African American/Black, Pacific Islander, and American Indian/Alaska Native populations. There are also disparities in low-income areas of the county, where ADRD-related hospitalizations and Emergency Department (ED) visits are disproportionate to the prevalence of ADRD. To develop the Strategic Plan, HBI staff collected qualitative data from key informant interviews and listening sessions that included a total of 98 people. Themes included the need to fill service gaps, improve health systems access and quality of care, expand partnerships to include organizations that may not be focused on older adults, and the development of a Dementia-Friendly Community in Alameda County.

3. ADRD Trainings: To expand systems' capacity to work with people with ADRD, HBI offered trainings to a wide variety of health and social service providers, as well to family caregivers. HBI partnered with six organizations: ACPHD Care Partners, the Alzheimer's Association, Grimsich Consulting, Roots Community Health, Sage Dementia Consulting, and the University of California, San Francisco (UCSF), Division of Geriatrics. Topics included Dementia Essentials, Behaviors as Communication, Self-care for Caregivers, and many others.

By June 30, 2025, HBI had provided 63 ADRD training sessions to over 1,000 people across Alameda County, more than triple the goal in the CDPH-funded project plan to provide 20 trainings before that date. Of the 1,013 training participants, 39% (400) submitted training evaluations. Trainings were well received across the board, with nearly 90% of respondents rating the trainings as "Excellent" or "Very Good."

Trainings reached a wide range of participants by age and race/ethnicity. Nearly two-thirds of training participants (59%) who completed the evaluation survey were older adults age 55 and over. Among training participants who completed evaluations, 30% identified as Black or African American. This is significant, as that population has among the highest ADRD prevalence, hospitalizations and death rates in Alameda County. However, the Pacific Islander and American Indian/Alaska Native populations were underrepresented. Efforts to reach those communities are continuing, as they also suffer disproportionate impacts from ADRD.

Although CDPH statewide funding for HBI programs ended on June 30, 2025, HBI is continuing its efforts. HBI contractors will provide up to 40 additional trainings through December 31, 2025.

4. Emergency Planning and Preparedness: Including the needs of those with cognitive impairments within broader discussions of Access and Functional Needs (AFN) is the best way to ensure that emergency plans are prepared to meet the needs of people living with dementia and their caregivers. During fall 2024, HBI developed and launched the Alameda County Access and Functional Needs (AFN) Advisory Committee, in partnership with ACPHD staff from the Alameda County Developmental Disabilities Council, Alameda County Functional Assessment and Service Team (FAST), and the Age-Friendly Council. The AFN Advisory Committee currently includes 55 people from 35 community-based organizations, cities and county agencies. Participants are very engaged in the quarterly meetings.

The committee has prioritized three objectives:

- 1) Review existing city and county EOPs for AFN integration;
- 2) Develop and implement an AFN review tool or ADA checklist;
- 3) Participate in action-oriented projects such as tabletop and full-scale exercises to test recommendations.