ALABAMA PUBLIC HEALTH

Alabama Department of Senior Services

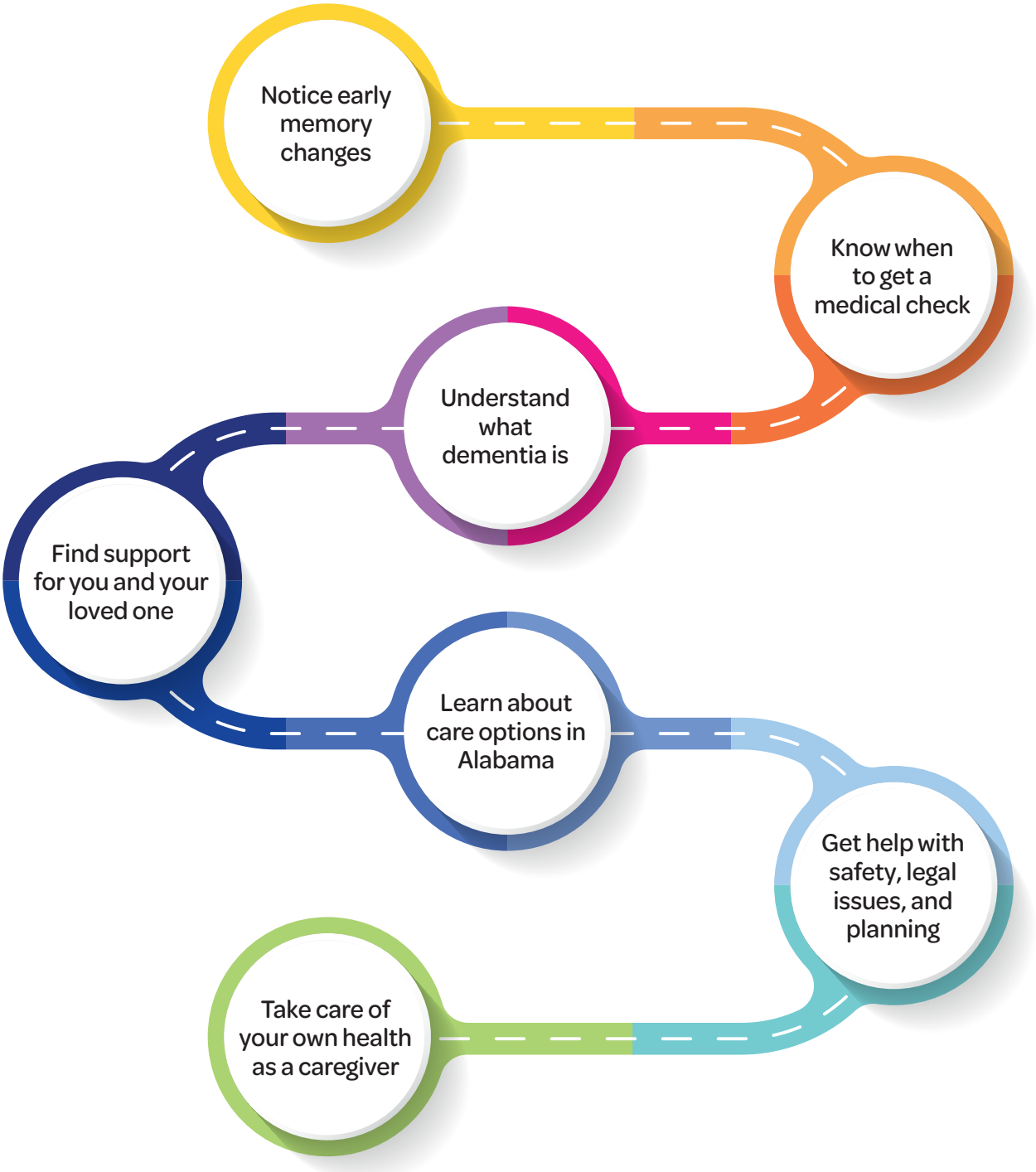
Caring Together:

A Roadmap for Alabama Families Facing Dementia

Caring for Someone with Memory Loss
A Simple Roadmap for Alabama Families

Caring for a loved one with memory problems can feel confusing and stressful. You are not alone. This Roadmap gives you easy steps, clear choices, and trusted resources to help you know what to do next.

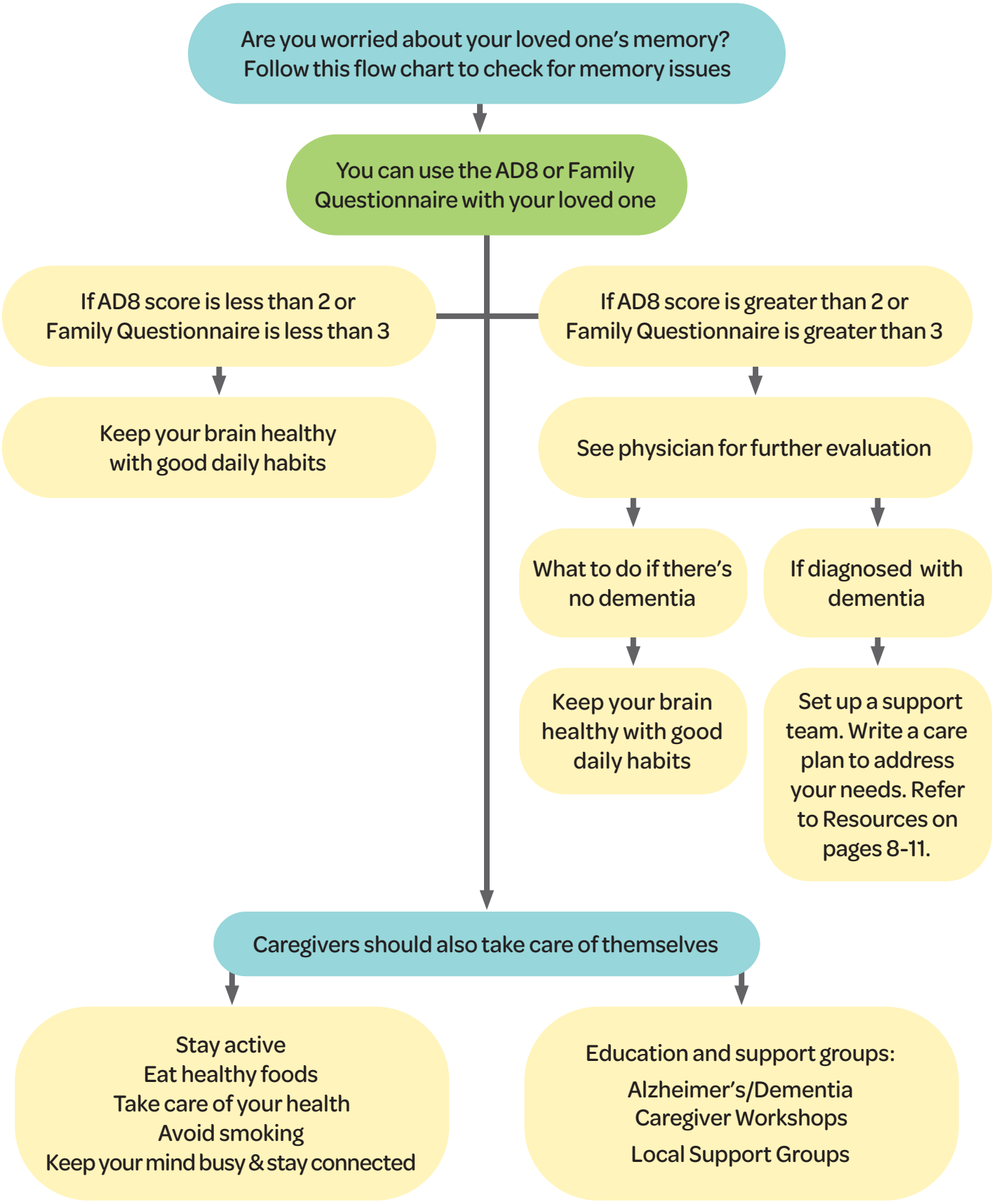
This guide will help you:



You can always call **(800)-AGE-LINE (1-800-243-5463)** for free help, information, and local resources. You can also visit the Alabama Brain Health Program of the Alabama Department of Public Health: alabamapublichealth.gov/brain

This guide is for family members, friends, and caregivers.

Roadmap for Family Caregivers
Cognitive Screening Flow Chart



Roadmap for Family Caregivers
Dementia Screening Tools

This is a short checklist to help you notice changes in memory and thinking. It does not diagnose dementia.

- Answer each question based on changes over the last several years.
- Mark "**Yes, a change"** if you see a new problem.
- Mark **"No, no change"** if they have always been this way.
- Mark **"N/A, Don't know"** if you are not sure.

AD8 Scoring (for caregivers):

- Count the number of **"Yes, a change"** answers.
- **0–1:** Few or no changes noticed.
- **2 or more:** Several changes noticed.
- Follow the **Cognitive Screening Flow Chart** on page 3 to see what to do next

AD8 Dementia Screening Interview

Remember, "Yes, a change" indicates that there has been a change in the last several years caused by cognitive (thinking and memory) problems.	Yes, A change	No, No change	N/A, Don't know
1. Problems with judgment (e.g., problems making decisions, bad financial decisions, problems with thinking)			
2. Less interest in hobbies/activities			
3. Repeats the same things over and over (questions, stories, or statements)			
4. Trouble learning how to use a tool, appliance, or gadget (e.g., VCR, computer, microwave, remote control)			
5. Forgets correct month or year			
6. Trouble handling complicated financial affairs (e.g., balancing checkbook, income taxes, paying bills)			
7. Trouble remembering appointments			
8. **Daily** problems with thinking and/or memory			
Total AD8 Score			

The AD8 Administration and Scoring Guidelines

A person can **correct their answer right away.** This does not count as an error. The questions can be:

- Given on paper for the person to fill out, or
- Read out loud in person or over the phone.

It is best to give the AD8 to a **family member or caregiver (informant)** if one is available.

- If not, the patient can complete it.

If using an **informant,** ask them to answer based on **changes they have noticed in the patient.** If the **patient** is answering, ask them to rate **changes in their own abilities** for each item.

- Do not ask them to explain why the change happened.

If the questions are **read out loud**, the clinician should:

- Read each question exactly as written.
- Emphasize changes due to **thinking or memory problems** (not physical problems).

Pause briefly (about **one second**) between each question. There is **no required time frame** for when the changes started.

Scoring

Add up the number of items marked: **"Yes, A change"**

Scores and Meaning:

- **0–1:** Normal cognition
- **2 or more:** Cognitive impairment is likely

A score in the impaired range means **more assessment is needed.** A score in the normal range means **dementia is unlikely**, but very early changes cannot be ruled out.

- Further evaluation may still be needed if there are other concerns.

Family Questionnaire

This checklist helps you think about your loved one's daily memory and thinking. For each question, circle one answer:

- **Not at all** = 0
- **Sometimes** = 1
- **Frequently** = 2
- **Does not apply** = 0 (do not count)
- Add up the numbers for all questions.
- Total score **0–2**: Fewer memory problems reported.
- Total score **3 or more**: Memory problems may be serious.
- Follow the **Cognitive Screening Flow Chart** on page 3 to see what to do next.

In your opinion does _____ have problems with any of the following?
Please circle the answer.

1. Repeating or asking the same thing over and over?	Not at all	Sometimes	Frequently	Does not apply
2. Remembering appointments, family occasions, holidays?	Not at all	Sometimes	Frequently	Does not apply
3. Writing checks, paying bills, balancing the checkbook?	Not at all	Sometimes	Frequently	Does not apply
4. Deciding what groceries or clothes to buy?	Not at all	Sometimes	Frequently	Does not apply
5. Taking medications according to instructions?	Not at all	Sometimes	Frequently	Does not apply

Relationship to patient _____ (spouse, son, daughter, sister, grandchild, friend, etc.)

Scoring: Not at all=0, Sometimes=1, Frequently=2. Sum to get total score. A score of 3 or more should prompt the consideration of a more detailed evaluation

*Adapted from the Care Management Advisory Group of the Chronic Care Networks for Alzheimer's Disease Initiative. The National Chronic Care Consortium and the Alzheimer's Association's Family Questionnaire is a tool that can be used to obtain the family member's insight on a person's cognitive functioning. The full version from: impactedu.net/adamcp17/files/familyquestionnaire.pdf

Roadmap for Family Caregivers
Hospital Discharge Flow Chart

Is your loved one in the hospital? Follow this flow chart for a smooth transition from the hospital

Before leaving the hospital, ask for a written discharge plan.
Hospital staff should provide:

1. Instructions for care and medication
2. Referral for services in the community
3. Instructions on what to do if a problem occurs
4. Follow up appointments with primary doctor and specialists

If Your Loved One Is Going Back Home:

Call State Health Insurance Assistance Program (SHIP) for help with Medicare questions

SHIP Helpline:
(800) 243-5463

SHIP website:
alabamaageline.gov

Call an Aging and Disability Resource Center (ADRC):
(800) AGE-LINE
(800) 243-5463
For information about aging resources

Work with primary doctor if home health care referral is needed

If Your Loved One is Going to Another Facility for Rehabilitation:

Determine how many days will insurance pay

Apply for Medicaid if needed

Work with Social Worker or Care Coordinator about long-term care options after rehabilitation if needed

Medicaid's Hospital to Home Program
1-855-236-6341 or email at
hospitaltohome@medicaid.alabama.gov

Roadmap for Family Caregivers
Guide to Choosing Care Option

Caring for someone with dementia can be hard. It can feel stressful and overwhelming. Getting extra help can make a big difference. Help can give you a break, lower stress, and make sure your loved one gets the care they need.

Who Can Help:
Finding the right services can be confusing. The Alabama Department of Senior Services can connect you with your local Area Agency on Aging (AAA), which is an Aging and Disability Resource Center (ADRC).

The ADRC is a one-stop place for free information and help. They can answer questions and guide you to services in your community.

Call **(800)-AGE-LINE (1-800-243-5463)** or visit alabamaageline.gov. Staff will listen to your needs and explain the options and resources available in your community.

In-home Care
In-home care helps people stay in their own home or live with family. It can help with daily tasks and give caregivers a break.
Types of in-home care:

- Personal care (help with bathing, dressing, eating)
- Homemaker services (help with meals, cleaning, shopping)
- Skilled care (nurses or therapists for medical needs)

Out-of-home Care
Some programs provide care outside the home. They can be part-time or full-time. Many families use a mix of in-home and out-of-home care.

Common out of home options:

- **Adult Day Services:** Care during the day for those who need extra help.
- **Hospice Care:** Focuses on comfort, not curing illness. Can be in a hospital, nursing home, or special facility.
- **Assisted Living:** Help with daily activities, meals, and personal care in a supportive residential setting.
- **Assisted Living with Memory Support:** Help with daily activities and supervision for people with memory loss.
- **Nursing Homes:** Provide full-time medical care. Usually the most expensive long-term option.
- **Psychiatric Inpatient Care:** For people who need mental health treatment in a hospital.

Tips for Choosing a Dementia-Trained Care Provider

- ✔ Ask if they serve people with memory loss or dementia.
  - Do they care for people in later stages or with behaviors like wandering or aggression?
  - Do staff have dementia-specific training?
- ✔ Ask about safety.
  - How do they prevent wandering?
  - What is their plan if someone leaves the building?
- ✔ Ask about caregiver fit.
  - Can you request a different caregiver if needed?
  - Do they consider personality or temperament when assigning staff to residents?

Roadmap for Family Caregivers
Dementia Resources

Visit One Door Alabama, the Aging and Disability Resource Center (ADRC) for additional resources and information.
Note: Each Area Agency on Aging (AAA) is an ADRC you can call or visit.

Help with Diagnosis and Behavior Management

Refer to Specialist as Needed

- Neurologist (A brain doctor) helps diagnose dementia & treat brain-related symptoms.
- Geriatrician (A doctor who specializes in care for older adults)
- Psychiatrist (A mental health doctor) can help with mood, behavior, & dementia medications.

Information on stages & behaviors, bit.ly/alz-fact-sheet. Copy this URL and paste it in your browser to be taken to the web page.

Counseling, Education, Support & Planning

Link to Caregivers Support Groups

- Alzheimer's Association Support Group, (800) 272-3900, alz.org/al/support
- Alabama Department of Senior Services (800) AGE-LINE (800-243-5463) or alabamaageline.gov

Other Helpful Resources

- Alabama Department of Mental Health, mh.alabama.gov (800) 367-0955
- Eldercare Locator (800) 677-1116 or eldercare.acl.gov
- Family Caregiver Alliance (800) 445-8106 or caregiver.org
- Alabama CARES, (800) 243-5463 or alabamaageline.gov
- VA caregiver support, caregiver.va.gov Montgomery, (334) 272- 4670, Birmingham (205) 933 -8101, Tuscaloosa, (205) 554-2000
- Long-term Care Ombudsman (877) 425-2243, alabamaageline.gov

Link to Community Resources

- Alzheimer's Association – Alabama Chapter 24/7 Helpline at (800) 272-3900 or alz.org/al
- Alzheimer's Foundation of America, alzfdn.org or (866) 232-8484
- Alzheimer's of Central Alabama (ACA), alzca.org (866) 806-7255
- TrialMatch®, trialmatch.alz.org
- Life After Diagnosis, alz.org/alzheimers_disease_life_after_diagnosis.asp
- Taking Action Workbook, at actonalz.org/pdf/Taking-Action.pdf
- NIH Caring for a Person with Alzheimer's Disease, nia.nih.gov/alzheimers
- Alabama Department of Insurance, aldoi.gov or (800) 433-3966
- Caregiving at caregiving.com
- Respite for All Foundation, respiteforall.org/locations or (334) 300-3841
- Project Lifesaver, projectlifesaver.org or (877) 580-5433
- Medicare, medicare.gov or (800) 633-4227
- Alabama Medicaid, medicaid.alabama.gov or (800) 362-1501
- Medicaid Waiver Programs, alabamaageline.gov/medicaid-waiver-programs or (800) 243-5463
- Alabama CARES Program, alabamaageline.gov/alabama-cares or (800) 243-5463

Link to Education Resources

- Online Education Programs, Alzheimer's Association, alz.org/al or (800) 272-3900
- Alzheimer's Association Living with Alzheimer's Taking Action Workbook, bit.ly/taking-action-workbook. (Type the web address into your browser to access the PDF).

Roadmap for Family Caregivers
Dementia Resources - continued

Stimulation/ Activity/ Maximizing Function

- Alabama Lifespan Respite, alabamarespite.org or 1 (866) 737-8252
- Alabama Department of Rehabilitation Services, rehab.alabama.gov or (334) 292-7500
- Seniors Eye Care Program, aao.org/eyecare-america/patients
- UAB Eyecare's Gift of Sight Program (205) 934-3036
- The Miracle Ear Foundation, miracle-ear.com/miracle-ear-foundation or (877) 919-2697
- Hearing the Call Rocket City, hearingthecall.org/us/rocketcity or Madison (256) 319-4327, Huntsville (256) 489-0903
- Alabama's Assistive Technology Resource (APTAT/STAR) program, head to the main rehab.alabama.gov page, scroll down to Special Services - Assistive Technology link.

Medication Therapy and Management

- Use a tool from National Institute on Aging – Talk With Your Doctor, nia.nih.gov/health/talking-with-doctor-worksheets
- Medicare Part D, medicare.gov/drug-coverage-part-d
- Medicare and insurance counseling, alabamaageline.gov/ship or (800) 243-5463
- UAB Brain Aging & Memory Clinic, uab.edu/medicine/alzheimers/patient-care/memory-disorders-clinic or (205) 996-3679
- BC/BS Medication Therapy Management (MTM) Program, bcbsalmedicare.com/sales/web/medicare/medication-therapy-management
- UAB Geriatric Services, uabmedicine.org/specialties/geriatric-services or (205) 801-8986

Cultural Resources & Language Services

- Screening and diagnosing diverse populations, 2024. actonalz.org/screening-diverse-populations
- For materials in different languages, go to Alzheimer's Association (alz.org), scroll down to the bottom of the page and "Select Language."
- Free communication assistance, Alabama Department of Public Health alabamapublichealth.gov/about/assistance.html

Ask your doctor/local AAA/ADRC if they have materials in your language or if someone can explain things in your first language.

Roadmap for Family Caregivers
Dementia Resources - continued

Safety

Note: Individuals with dementia are vulnerable adults and may be at a higher risk for elder abuse and exploitation.

Driving

- Understanding dementia and driving, thehartford.com/resources/mature-market-excellence/dementia-driving
- At the Crossroads, Family conversations about Alzheimer's disease, dementia & driving, assets.thehartford.com/image/upload/cmme_crossroads.pdf
- Dementia and Driving Resource Center, nhtsa.gov/sites/nhtsa.gov/files/10900a-drivewell-handout-alzheimers.pdf
- Fitness to drive screening tool, ftds.phhp.ufl.edu/us

Fall Prevention

- Alabama Department of Senior Services: Ageline Portal URL: alabamaageline.gov or (800) 243-5463
- Refer to an occupational therapist and/or physical therapist to address fall risk, sensory/mobility aids, and home modifications
- National Council on Aging (NCOA) Fall Free Check Up, ncoa.org/tools/falls-free-checkup

Wandering

- Alzheimer's Foundation of America, Dementia and Wandering, alzfdn.org/wandering-and-demenita or (866) 232-8484
- Project Life Saver, projectlifesaver.org or (800) 580-5433

Legal/Financial

- Alabama Department of Senior Services, alabamaageline.gov/legal-assistance or (800) 243-5463
- Managing Someone Else's Money in Alabama, bit.ly/managing-money-alabama or (334) 954-5000
- Alabama Family Trust, alabamafamilytrust.com or (833) 881-8333

Preventing Elder Abuse, Neglect and Fraud

- Adult Protective Services, dhr.alabama.gov/adult-protective-services or (800) 458-7214
- Elder Justice Center of Alabama, elderjusticeal.org or (205) 490-8448
- Alabama Securities Commission (ASC) asc.alabama.gov or (800) 222-1253
- Information about Medicare/Medicaid Fraud (SMP), alabamaageline.gov/smp or (800) 243-5784
- Federal Medicare, Medicaid, or health care fraud, oig.hhs.gov/about-oig/contact-us or (800) 447-8477
- Care Home Complaints, Home Health/Hospice/Home Care, Alabama Department of Public Health, alabamapublichealth.gov/providerstandards/complaints.html or (800) 356-9596
- Hospital and Nursing Home Complaints, Alabama Department of Public Health, alabamapublichealth.gov/providerstandards/complaints.html or (800) 356-9596
- Long-term Care Ombudsman, alabamaageline.gov/ombudsman or (800) 243-5463, for complaints by or on behalf of residents in long- term care facilities

Roadmap for Family Caregivers
Dementia Resources - continued

Advance Care Planning

- Alabama Hospital Association, alaha.org/advance-directives or (800) 489-2542
- Alabama Department of Senior Services, for seniors 60+, advance directives, healthcare, or financial power of attorney, living wills, and more, alabamaageline.gov/legal-assistance or (800) 243-5463
- Alabama State Bar provides guidance on healthcare planning, alabar.org/assets/2014/08/Advance-Healthcareplanning_01162012.pdf
- AARP offers outreach about wills, advance directives, and powers of attorney, aarp.org/states/alabama
- Legal Services Alabama, legalservicesalabama.org or (866) 456-4995

Other Dementia Resources

- Alzheimer's Association-Alabama Chapter offers free education, planning for care and 24/7 Helpline: (800)272-3900 or alz.org/al/support
- Alabama Department of Senior Services & Local Area Agencies on Aging, (800) 243-5463
- Alzheimer's of Central Alabama, alzca.org or (866) 806-7255
- Alabama Department of Senior Services, alabamaageline.gov or (800) 243-5463
- Alabama Disabilities Advocacy Program, sites.ua.edu/adap or (800) 826-1675
- Alabama Medicaid, medicaid.alabama.gov or (800) 362-1504
- Alzheimer's Education Resources & Services (AERS), alzheimersers.org or (334) 233-2139
- Alzheimer's Foundation of America, alzfdn.org or (866) 232-8484
- Assisted Living Association of Alabama, alaaweb.org or (334) 262-5523
- Dementia Careblazers, careblazers.com
- Dementia Friendly Alabama, dementiafriendlyal.org or (334) 240-4680
- Eldercare locator, eldercare.acl.gov/home or (800) 677-1116
- UAB Alzheimer's Disease Center, uab.edu/medicine/alzheimers or (205) 801-8986
- U.S. Centers for Disease Control & Prevention; Alzheimer's Disease and Dementia, cdc.gov/alzheimers-dementia/about/alzheimers.html or (800) 232-4636
- Working Interdisciplinary Networks of Guardianship Stakeholders (WINGS) provides legal resources, alabamawings.alacourt.gov

Roadmap for Family Caregivers
Helpful Tips

What's Normal Aging	What's Not Normal Aging
Making a bad decision once in a while	Making poor judgments and decisions a lot of the time
Missing a monthly payment	Problems taking care of monthly bills
Forgetting which day it is but remembering it later	Losing track of the date or time of the year
Sometimes forgetting which word to use	Trouble having a conversation
Misplacing things from time to time and retracing steps to find them	Misplacing things and losing the ability to retrace steps

NIH National Institute on Aging (nia.nih.gov/health/do-memory-problems-always-mean-alzheimers-disease)

Communication do's and don'ts talking with a person with dementia

Do	Don't
• Do use their first name to get their attention • Do speak in a normal tone of voice at a normal volume • Do your best to eliminate any distractions such a TV or radio • Do give short, one sentence explanations • Speak slowly and clearly • Allow plenty of time for comprehension • Agree with them or distract them to a different subject or activity • Accept the blame when something's wrong (even if it's a fantasy) • Do encourage reminiscing if it is enjoyable to the person • Respond to the feelings rather than the words • Be patient, cheerful, and reassuring • Go with the flow	• Don't interrupt • Don't reason • Don't argue • Don't confront • Don't question recent memory • Don't insist, try again later • Don't criticize or correct • Don't take it personally

Roadmap for Family Caregivers
MCI & Stages of Alzheimer's Disease

Alzheimer's affects people in different ways. The information below gives a simple overview of how abilities may change over time. Not everyone will have the same symptoms or move through the stages at the same speed. For more details about the stages of Alzheimer's, visit: order.nia.nih.gov/sites/default/files/2024-07/nia-alzheimers-fact-sheet.pdf.

**IADLs (Instrumental Activities of Daily Living) are activities that allow people to live independently such as shopping, preparing food, housekeeping, managing finances*
**ADLs (Activities of Daily Living) are activities for self-care such as feeding, toileting, dressing, bathing*

Mild Cognitive Impairment (MCI)
bit.ly/mayo-mci

- Mild forgetfulness
- Increasingly overwhelmed by making decisions, planning steps to accomplish a task or interpreting instructions
- Mild difficulty finding way in unfamiliar environments
- Mild impulsivity and/or difficulty with judgment
- Family and friends notice some or all of these symptoms
- *IADLs only mildly compromised; *ADLs are intact

Alzheimer's Disease Early Stage
2-4 years in duration

- Increased short-term memory loss
- Difficulty keeping track of appointments
- Trouble with time/sequence relationships
- More mental energy needed to process information
- Trouble multi-tasking
- May write reminders, but lose them
- Mild mood and/or personality changes
- Increased preference for familiar things
- IADLs more clearly impaired; ADLs slightly impaired

Alzheimer's Disease Middle Stage
2-10 years in duration

- Significant short-term memory loss: long-term memory begins to decline
- Fluctuating disorientation
- Diminished insight
- Changes in appearance
- Learning new things becomes very difficult
- Restricted interest in activities
- Declining recognition of acquaintances, relatives
- Mood and behavioral changes
- Alterations in sleep and appetite
- Wandering
- Loss of bladder control
- IADLs and ADLs broadly impaired

Alzheimer's Disease Late Stage
1-3 years in duration

- Severe disorientation to time and place
- No short-term memory
- Long-term memory fragments
- Loss of speech
- Difficulty walking
- Loss of bladder/bowel control
- No longer recognizes family members
- Inability to survive without total care

Roadmap for Family Caregivers
Mind Diet

Mediterranean-Dietary Approaches to Stop Hypertension (DASH) Intervention for Neurodegenerative Delay (MIND) diet - The MIND diet is a combination of the Mediterranean and DASH diets. It aims to reduce the risk of developing dementia and improve brain health. Please consult with your physician first.

The MIND Diet – Foods to Eat		
Food	**Quantity & Servings**	**Examples & Tips**
Green Leafy Vegetables	At least 1 serving/day *One serving = 1 cup raw or ½ cup	Spinach, kale, collards, Swiss chard, mustard greens, turnip greens, dandelion greens, arugula, endive, grape leaves, Romaine lettuce
Most Other Vegetables	At least 1 serving/day *One serving = 1 cup raw or ½ cup	Asparagus, broccoli, brussels sprouts, cabbage, carrots, cauliflower, eggplant, green beans, mushrooms, onions, okra, snow peas, squash, bell peppers, sweet potatoes, tomatoes/tomato sauce
Berries	At least 2 to 5 servings/week *One serving = ½ cup	Blueberries, strawberries, raspberries, blackberries
Beans/Legumes	At lease 3 servings/week *One serving = ½ cup	Black, pinto, cannellini, garbanzo, kidney, lima, red/white, navy, lentils, tofu, edamame, hummus, soy yogurt
Whole Grains	At least 3 servings/day *One serving = ½ cup or 1 slice	Dark or whole grain bread, brown rice, whole grain pasta, wild rice, quinoa, barley, bulgur, farro, oats, whole grain cereal
Fish	At least 1 serving/week *One serving = 3 to 5 ounces (oz)	*Not fried Salmon, tuna, tilapia, halibut, mackerel, catfish, sardines
Poultry	At least 2 servings/week *One serving = 3 to 5 oz	*White meat & skinless Chicken or turkey breast
Extra Virgin Olive Oil (EVOO)	2 Tablespoons (T)/day	Use EVOO as primary oil Look for Unrefined EVOO

The MIND Diet – Foods to Limit		
Food	**Quantity & Servings**	**Examples & Tips**
Red Meat & Processed Meat	No more than 4 servings/week *One serving = 3 to 5 oz	Beef, lamb, pork, ham, burger, hot dogs, sausages, bacon, roast beef, salami
Butter & Stick Margarine	Less than 1 teaspoon (tsp) or a pat/day	Plant based butter with coconut or palm oil, stick butter, and margarine
Regular Cheese	No more than 2oz/week	Full fat American cheese, cream cheese, Swiss cheese, cheddar cheese
Pastries & Other Sweets	No more than 4 treats/week	Biscuit/roll, Pop-Tarts, cake, snack cakes/Twinkies, danish/ sweet rolls/pastry, donuts, cookies, brownies, pie, candy bars, other candy, ice cream, pudding, milkshakes
Fried Foods & Fast Foods	No more than 1 meal/week	Fried foods including fried potato chips, french fries, fried chicken, onion rings, cheese sticks

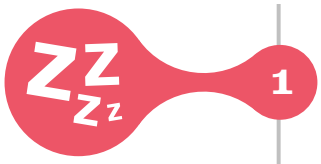
Adapted: Morris, MC et al. MIND diet associated with reduced incidence of Alzheimer's disease. Alzheimer's & Dementia; 2015. Lindseth, G. et al., Neurobehavioral Effects of Consuming Dietary Fatty Acids. Biol Res Nurs 2016 Jul 13.

Roadmap for Family Caregivers
Love Your Brain

10 Ways to Love Your Brain

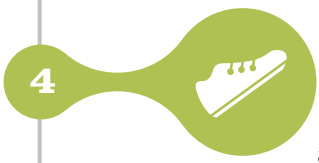
START NOW. It's never too late or too early to incorporate healthy habits. Growing evidence indicates that people can reduce their risk of cognitive decline by adopting key lifestyle habits. When possible, combine these habits to achieve maximum benefit for the brain and body.

Catch Some ZZZ's: Not getting enough sleep may result in problems with memory and thinking.



Fuel Up Right: Eat a balanced diet that is higher in vegetables and fruit to help reduce the risk of cognitive decline.

Hit the Books: Formal education will help reduce risk of cognitive decline and dementia. Take a class at a local college, community center or online.

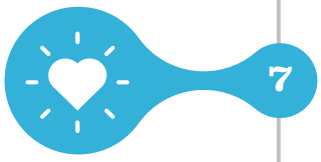


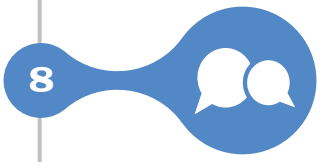
Break a Sweat: Engage in regular cardiovascular exercise that elevates heart rate and increases blood flow. Studies have found that physical activity reduces risk of cognitive decline.

Butt Out: Smoking increases risk of cognitive decline. Quitting smoking can reduce risk to levels comparable to those who have not smoked.

Take Care of Your Mental Health: Some studies link depression with cognitive decline, so seek treatment if you have depression, anxiety or stress.

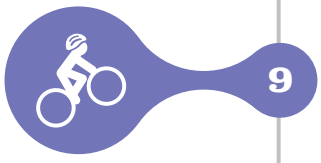
Follow Your Heart: Risk factors for cardiovascular disease and stroke – obesity, high blood pressure and diabetes – negatively impact your cognitive health.

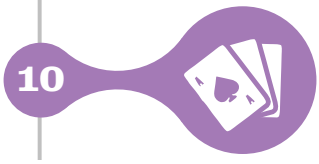




Buddy Up: Staying socially engaged may support brain health. Find ways to be part of your local community or share activities with friends and family.

Heads Up: Brain injury can raise risk of cognitive decline and dementia. Wear a seat belt and use a helmet when playing contact sports or riding a bike.





Stump Yourself: Challenge your mind. Build a piece of furniture. Play games of strategy, like bridge.

This publication provides general information and advice. It is not a substitute for guidance from a qualified professional. Content is accurate to the best of our knowledge at the time of publication, but information may change.

Funding Acknowledgment

This publication is a collaborative project of the Alabama Department of Senior Services and the Alabama Brain Health Program, Chronic Disease Branch, Alabama Department of Public Health. The information provided in this publication was supported in part by Grant/Cooperative Agreement Number 5NU58DP007526-03-00 from the Centers for Disease Control and Prevention (CDC), entitled BOLD Public Health Programs to Address Alzheimer's Disease and Related Dementias. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by CDC/HHS, or the U.S. Government.