

Alzheimer's Disease Support Services Program

BACKGROUND

Congress created the Alzheimer's Disease Supportive Services Program (ADSSP) in 1992 to encourage States to:

- Develop models of assistance for persons with Alzheimer's Disease and Related Dementias (ADRD) and their family caregivers.
- Encourage close coordination and incorporation of ADRD services into the broader home and community-based care system.

In 1998, Congress transferred the administration of the program to the Administration on Aging (AoA) in an effort to ensure coordination with other programs for older Americans.

There is no cure for ADRD; however, there are effective strategies to help maintain cognitive function, reduce behavioral symptoms, prevent acute care crises and excess disability, and delay functional decline as well as nursing home placement. ADRD exists on a continuum that begins before diagnosis and lasts through cognitive and functional decline to eventual total disability and death.

Although not a normal part of aging, 1 in 7 persons over 65 and nearly half of those over 85 may have ADRD. At least 10 million baby boomers will develop Alzheimer's disease in their lifetimes—twice as many people as the number estimated to have the disease today. An additional 4 million baby boomers will develop a related dementia. Although ADRD eventually results in death, the disease can progress for years. A person with ADRD lives an average of 5 years, but can live as many as 20 years or more from the onset of symptoms.

PROGRAM MISSION

The mission of the ADSSP is to expand the availability of diagnostic and support services for persons with ADRD, their families, and their caregivers, as well as to improve the responsiveness of the home and communitybased care system to persons with dementia. The program focuses on serving hard-to-reach and underserved persons with ADRD and their family caregivers using proven and innovative models.

EVIDENCE-BASED MODELS

AoA's evidence-based ADRD programs closely replicate specific interventions that have been tested through randomized-controlled clinical trials with the results published in peerreviewed journals.

As a result of rigorous research and clinical trials, there are evidence-based programs that improve the health and wellbeing of persons with ADRD and/or their caregivers. Interventions currently being translated through the ADSSP include: Resources for Enhancing Alzheimer's Caregiver Health (REACH) II, Savvy Caregiver, STAR-Caregiver, Reducing Disability in Alzheimer's Disease (RDAD), the New York University Caregiver Intervention (NYUCI), Coping with Caregiving, and the Cleveland Managed Care Demonstration. Information about these and other evidencebased interventions can be found in the ADSSP Resource Compendium, available online at: http://www.aoa.gov/AoARoot/AoA_Programs/ HPW/Alz_Grants/compendium.aspx

SYSTEMS INTEGRATION PROGRAMS

AoA's Systems Integration programs focus on integration of a statewide set of programs that includes a Single Entry Point/No Wrong Door access for individuals. These programs also promote access to a comprehensive, sustainable set of high quality services relevant to the population residing in the state's service area, with an emphasis on incorporating dementia capability into these services.

INNOVATIVE PRACTICES

AoA's innovative Alzheimer's programs use a variety of unique approaches to improving the delivery of supportive services at the community-level to people with ADRD and their family caregivers. These programs aim to: 1) enable individuals with ADRD to remain living in the community longer; 2) provide services for those in the early stages of ADRD; and 3) reform state systems so that they are better equipped to serve persons with dementia and their caregivers in efficient and cost effective ways. ADSSP projects across the nation. These awards continue to advance the ADSSP mission by supporting the development of coordinated supportive services for persons with ADRD and their family caregivers.

TECHNICAL ASSISTANCE

The AoA funds a National Resource Center to provide technical assistance to ADSSP grantees. This assistance includes national meetings, monthly conference calls, and individual consultation.

ADDITIONAL INFORMATION

For additional information and for current ADSSP funding opportunities, please visit <u>http://www.aoa.gov</u> or contact Erin Long at <u>erin.long@acl.hhs.gov</u>

For more information about ACL

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AOA GRANT PROGRAM

Between 2008 and 2011, AoA funded 80







