

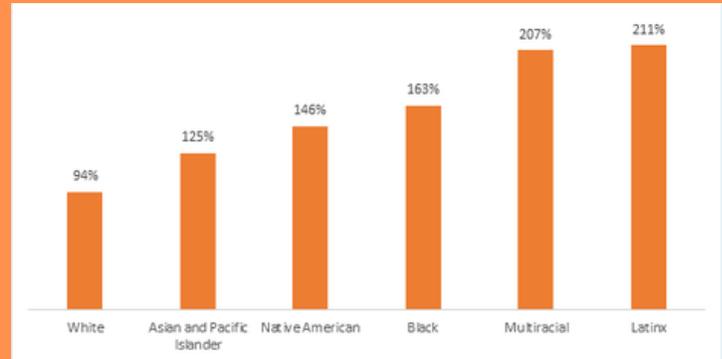
2021 ALZHEIMER'S FACT SHEET

Top Findings

- By 2040, the prevalence of Alzheimer's disease is expected to increase significantly, by 127%.
- Even greater increases are expected among communities of color, who will make up nearly half of all people living with Alzheimer's disease in 2040.
 - The prevalence of Alzheimer's disease is expected to increase by 211% among Latinx Californians.
 - By then, Latinx Californians will make up 1 in 4 people living with Alzheimer's.
- As prevalence increases, so will demand for community-based and institutional services to support those living with Alzheimer's.

Read the Full Report [Here](#).

Estimated Percent Increase in Individuals 55+ Living with Alzheimer's, 2019-2040



Background

- In 2018, Governor Jerry Brown signed SB 1292, authored by Senator Ben Hueso and co-sponsored by the Latino Coalition for a Healthy California, which tasked the Center for Health Communities to expand their research to include Alzheimer's disease prevalence among Black, Latinx, and Asian Pacific Islander populations, and among women.
- Dementia is an overall term for a group of symptoms that have several causes, but its characteristics are often pervasive, affecting a person's ability to perform everyday activities because of impairments with memory, language, problem-solving, and other cognitive skills.
- The updated report, released January 2021, shows the stark disparities among these underserved populations.
- Racial, ethnic, and gender disparities are due to entrenched, but preventable, inequities ranging from education, housing, health, and income disparities.
- California will also face a shortage of caregivers, doctors, nurses, and more in the health workforce, with a particular shortage of workers who reflect the diversity of California and our aging population.



CPEHN
California Pan-Ethnic
Health Network

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Racial/Ethnic Disparities Among Communities of Color

- Between 2019 and 2040, the estimated number of Californians living with AD who identify as who identify as Latino/Latina/Latinx (Latino/a/x) American, will more than triple, from 138,725 to 431,982.
- The number of people living with AD nearly triple for Californians who identify as Black/African American, growing to 91,071 people; and more than double for Californians who identify as Asian American/Pacific Islander, growing to 241,106 people.
- The life expectancy of people who identify as Latino/a/x American is projected to increase to age 87 by 2050, surpassing all other ethnic groups in the U.S. (Alzheimer's Association, 2004). Because age is the most significant risk factor for developing dementia, the gains in life expectancy among Californians who are Latino/a/x American will likely contribute to the growing number and proportion of those with dementia as well.
- AD death rates for California residents over the past eighteen years have increased from 13 deaths per 100,000 in 2000 to 42 deaths in 2018, an increase of 223%. All population groups showed increases in rates over this time period. However, the Asian American/Pacific Islander population had the largest increase in death rates (746%), followed by the Latino/a/x American population (600%), the Black/African American population (321%), and the White/Caucasian American, non-Latino/a/x population (214%).

Future Policy Considerations

- People of color and immigrants are more likely to live in multigenerational households and often prefer home and community-based services, over nursing homes. Investing in infrastructure that is culturally responsive and competent for this aging population will be necessary to meet the needs of these communities and to provide quality care and services. This includes providing training, services, and information in-language and in-culture.
- As the Alzheimer's rates increase in our state, people of color, especially women of color, are likely to be part of the caregiver workforce. This workforce is often underpaid, works long hours, and face discrimination with little protections. The state needs to provide linguistically and culturally relevant outreach strategies to connect them to equitable work opportunities that set a competent pay scale and allow caregivers to provide quality and consistent care.