Cultural considerations in dementia care

Blythe S. Winchester, MD, MPH, CMD, AGSF

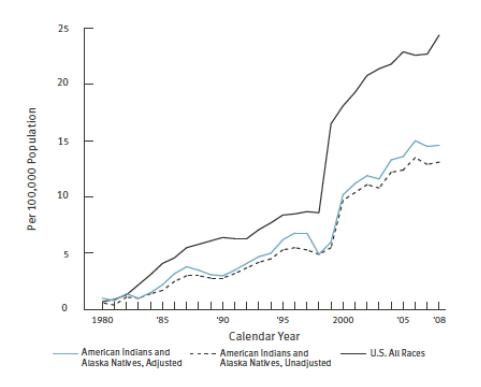
Scope

- Between 2014–2060, the number of Al/ANs aged 65 and older living with dementia is projected to grow over five times
- In 2015–2017, one in six AI/ANs aged 45 and older reported subjective cognitive decline (SCD) — that is, self-reported difficulties in memory or thinking
- Nearly two-thirds of those with SCD had to give up some day-to-day activities because of these cognitive problems

Matthews K, Xu W, Gaglioti A, Holt J, Croft J, Mack D, McGuire L. (2019). Racial and ethnic estimates of Alzheimer's disease and related dementias in the United States (2015-2060) in adults aged ≥65 years.

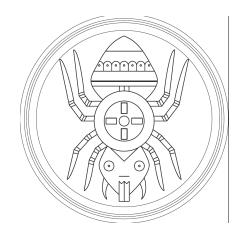
Alzheimer's Dement. 15(1),17-24.

Centers for Disease Control and Prevention. (2018). Healthy aging data portal, National Center for Chronic Disease Prevention and Health Promotion, Division of Population Health.

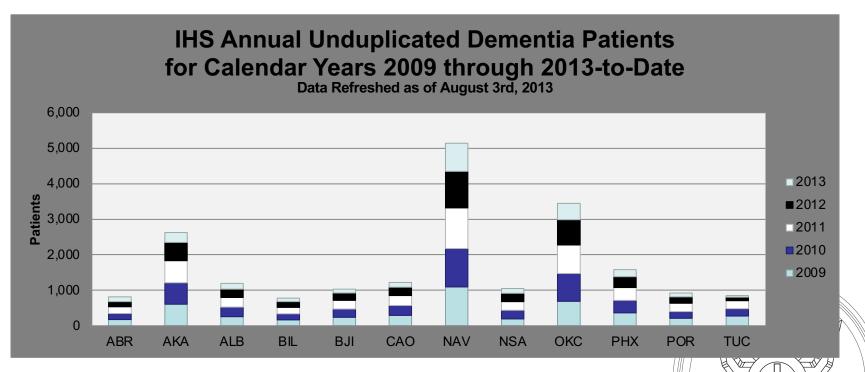


https://www.ihs.gov/dps/publications/trends2014/

Trends in Indian Health 2014



In every region of IHS there are persons with dementia diagnoses.

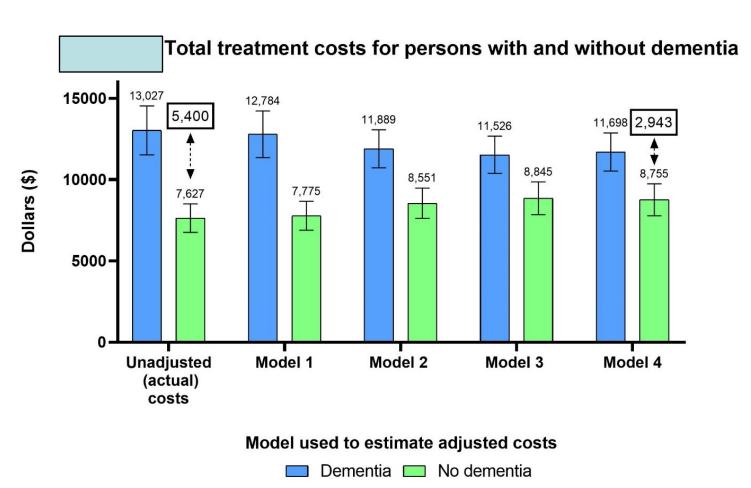


IHS/Tribal Total Treatment Costs among AI/AN Adults aged 65+ years with and without Dementia

The difference in IHS/Tribal total treatment costs between adults with and without dementia was \$5,400 in 2013.

When differences between the 2 populations were adjusted for, the difference was ~ \$3,000.

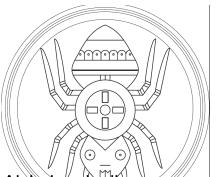
Hospitalization costs accounted for nearly all of this difference.



Source: Alzheimer's & Dementia, 2022: DOI: 10.1002/alz.12603

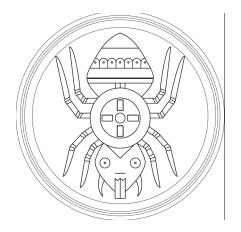
Risk factors

- Estimate- 1/3 late life dementias attributable to seven modifiable risk factors
 - Low education
 - Mid-life hypertension
 - Mid-life obesity
 - Diabetes
 - Physical inactivity
 - Smoking
 - depression



Risk factors

 Reduction in prevalence of these risk factors by 10-20% per decade could reduce worldwide prevalence of Alzheimer's Disease by 8-50%



Vascular dementia

Increasing age

History of heart attack, strokes or mini strokes/the leading cause of death in AI/AN is Heart disease. Stroke is the 6th

Atherosclerosis

High cholesterol

High blood pressure

Diabetes/Likelihood of AIAN to have DM compared to non-Hispanic white= 2.2

Smoking/29.2 percent of AI/AN currently smoke, compared to 18.2 percent of Whites

Obesity

Atrial fibrillation

http://www.cdc.gov/dhdsp/data statistics/fact sheets/fs aian.htm

The Wisdom of Bad Butch

thought and still do believe that we are blessed with the capability of learning, and I'm still learning even into my 60s.

You were talking about learning and expressing yourself and still being able to think, so those are things that are most important to you.

I should put in there too that, like the quality of sleep, I have also learned that one can amplify the

qualities of other things like food and exercise. I have learned that I can shoot better golf now than when I was younger. Because even though when I was younger I could drive the ball a lot further, I think psychologically that was a powerful thing for me to be involved in the thoughts of actually knocking a golf ball as far as I could or hitting a tennis ball as hard as I could. The sound of the racket or a driver hitting a golf ball was pleasant and you can't control a ball that

is hit hard as well as you can one that is hit not as hard and you have more control over it.

I have learned that has a context that goes deeper than just with golf. It applies to just about everything care unii. Ajier ne was inere, wnai ao you remember most about him being there?

That he really didn't like it. Like most elders faced with the same situation (especially those with Alzheimer's), that is extremely painful not just for the individual but for the family members. I'm just speaking personally. I know it happens quite frequently because, from the professional standpoint, I've dealt with it for a long time. Even when I retired

I couldn't get away from it. People constantly asked me questions and I felt that due to my part of the community, i.e., being an elder, to go ahead and respond truthfully about my experiences.

And it was really difficult because, like I said, my father has always been active and energetic, and has gone all over the place, and has friends all over. Everywhere I have ever gone I have run into people that have known himwhich is really neat in a way.

And watching him go through this mental deterioration was extremely painful for me. I had been through the same experience with numerous patients of other associated friends or other members of the

I guess my number one priority is to be able to think, express

able to think, express

has always beenergetic, and over the place all over. Ever gone I

General concepts



- Speaking without interruption
- Humor importance
- Language issues
- Traumatic experience
- Spiritual beliefs
- Traditional healing
- HIS/clinic experience
- Family structure

What historical events, traditions, customs of cultures may affect care?



Tribal Identity

- An individual's ethnic and cultural identity is defined by their beliefs and traditional practices that are community based, whether or not they physically remain in the Native community.
- However, to judge how traditional a person is requires information about whether they participate in traditional practices (sweats, pow-wows, healing ceremonies) or speak their Native language.

Tribal Identity and Dementia

- You may not always know who is "Native"
- Someone may be desperately trying to reconnect with tribal ways
- You do not know how "traditional" someone is until you ask
- Taking a spiritual history also helps
 - Do you culturally identify with a tribe?
 - ❖Do you follow traditional customs of that tribe?
 - ❖Do you know your tribe's creation story?

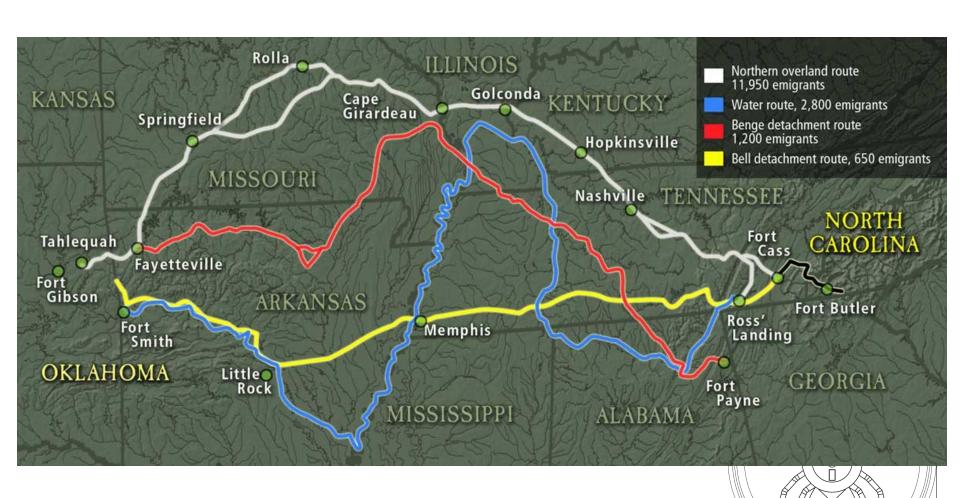
Historical experiences of elders

1900-1920	1920-1940	1940-1960	1960-1980	1980-Present
Reservations	Citizenship	World War II Service	Vietnam War	Education of Professionals
"Vanishing America"	Adoption of Indian Children by Whites	Relocation by BIA to Urban Areas	Indian Activism	Litigation
Forced Boarding Schools	Loss of Land by Allotment System	Forced Assimilation	Urbanization for Education & Jobs	Urban Pan- Indianism
Law Banned Spiritual Practices	Boarding Schools			Reservation Gaming

...tell our friends that we are on the journey west, arising from the acts of wicked men and from our unfortunate fate.

Elijah Hicks, October 24th, 1838

The Trail where they cried



Effect of Boarding Schools

- The number of Native American children in the boarding schools reached a peak in the 1970s, with an estimated enrollment of 60,000 in 1973
- "My brothers and sisters were there, but I couldn't speak Cherokee to them. There was one matron that spoke Cherokee that would pull me aside and help me when she could. The oak trees beside Unity we called Weeping trees because that's where we used to go and cry because we hated being there." Lilian Crowe

Dementia and Boarding School Experience

- Differing effects later in life
- Trauma when dealing with nursing staff/strangers
- Language use
- Sometimes improved with routine
- Question resistance to facilities
- Mood disorders, substance abuse, socialissues at home

Foreman, Richard, and James W. Mahoney. *The Cherokee Physician: Or, Indian Guide to Health...* Chi-ga-u, 1975

- "The Aborigines of our country found the means of mitigating and curing their diseases, in the uncultivated wilds which gave them birth,--they knew nothing of foreign drugs, but with roots, herbs, and plants found in their own country, they mitigated and cured the diseases most common to that country. That their knowledge of the medical properties of the roots and herbs common in the American forest, is superior to that possessed by the whites will hardly be denied. Neither will be denied by those acquainted with their success, in treating disease, that they have, in many instances, performed cures, by means of roots, herbs and plants, after the usual remedies prescribed by white physicians have failed." Richard Foreman and Jas.W. Mahoney 1849
- "The time is not far distant, when most; if not all the diseases, of our country, will be healed without the use of calomel and mercurial preparations, and when foreign drugs will be disused by administering physicians."

Veterans





Veterans

- In 2015, the largest living cohort of Veterans was the Vietnam Era. Over one-third of Veterans served during this period. A higher percentage of AIAN Veterans served in the Pre-9/11 period (19.9%), compared with Veterans of all other races (13.3%)
- AIAN Veterans showed the lowest personal incomes among Veterans of other races/ethnicity.
- AIAN Veterans' unemployment rate was higher than Veterans of other races (5.4% vs. 2.3%, respectively)
- Coordination with VA on services related to PTSD, depression, suicide, traditional healing, storytelling as healing https://www.ihs.gov/suicideprevention/populations/veterans/

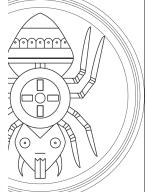
Traditional Indian Medicine

Comparison of Traditional Indian medicine (TIM) and Modern Western Medicine (MWM)

TIM	MWM			
Mind, body, spirit approach	Reductionist			
Incorporates patient's beliefs of health and wellness to make diagnoses	Biochemical, physiological, anatomic data used, social and spiritual discounted			
Patient taught to heal himself/herself	MD responsible for healing			
Ceremonies used to teach patient wellness	Patient dependent on medical system in role of the "sick person"			
Healing and harmony emphasized	Disease state emphasized			
Honors the patient for restoring wellness	Honors the physician for "curing"			
Hx, physical and family assessment	Hx, physical and laboratory			
Herbal medicine from nature used	Pharmaceuticals			

Name				A	ge
s the patient alert?		Level of educ	ation	65	20
/1 1. What da	y of the week is it?				
_/1 1 2. What is	the year?				
_/1 1 3. What st	ate are we in?				
4. Please r	emember these five ble Pen	objects. I will Tie	ask you what the	ey are l Car	
1 How m	e \$100 and you go t ich did you spend? ich do you have lef		d buy a dozen aj	pples for	r \$3 and a tricycle for \$20.
	ame as many anim animals 1 5	als as you can -9 animals	in one minute. 2 10-14 anin	nals	3 15+ animals
_/5 7. What w	ere the five objects	I asked you to	remember? 1 p	oint for	each one correct.
backwar _/2 9. This is a	ng to give you a ser ds. For example, if	I say 42, you 48 108 108 108	would say 24. 3537	El l	
_/4 2 Hour ma	ntes to eleven o'cloorkers okay rect place an X in the tr				
_/2 1 Which o	f the above figures	is largest?			
you son Jill wa met Ja in Chi teenag What w	ne questions about s a very successful s ck, a devastatingly	it. stockbroker. Sh handsome mar bed work and st to work. She at ne?	ne made a lot of many and the married his tayed at home to land Jack lived hap	noney or m and h bring up ppily eve What w	erwards, I'm going to ask the stock market. She then ad three children. They lived her children. When they were er after. ork did she do? ate did she live in?
TOTAL SO	CORE				

	SCORING	
HIGH SCHOOL EDUCATION	Less	THAN HIGH SCHOOL EDUCATION
27-30	Normal	25-30
21-26 Mild 1	NEUROCOGNITIVE DISORDER	20-24
1-20	DEMENTIA	1-19



Story Recall- Native style

I am going to tell you a story. Please listen carefully because afterwards, I'm going to ask you some questions.

"Bill grew up learning to carve. He carved a lot of famous stone wolves that made it into the museum. He married Jean, had three children, and they live across the river up in Big Cove. One time, Bill traveled out to Tahlequah for Homecoming to see his cousin Shelby. She died a couple of years ago from lung cancer. Bill and Jean now have ten grand-children and like to go on Senior trips."

- What kind of carvings did Bill do?
- What is Bill's wife's name?
- What state did Bill go to for Homecoming?
- How did Bill's cousin die?

