



Alzheimer's Association and Alzheimer's Impact Movement Statement for the Record

United States Senate Special Committee on Aging Hearing on "Breaking the Cycle of Senior Loneliness: Strengthening Family and Community Support"

March 12, 2025

The Alzheimer's Association and Alzheimer's Impact Movement (AIM) thank the Committee for its continued leadership on issues crucial to individuals living with Alzheimer's and other dementias. We appreciate the opportunity to submit this statement for the record for the Senate Special Committee on Aging hearing on "**Breaking the Cycle of Senior Loneliness: Strengthening Family and Community Support.**" This statement highlights the profound impact of senior loneliness and social isolation on our nation's aging population, particularly those at risk of developing or who are living with Alzheimer's or another dementia.

Founded in 1980, the Alzheimer's Association is the world's leading voluntary health organization in Alzheimer's care, support, and research. Our mission is to eliminate Alzheimer's disease and other dementias through the advancement of research, to provide and enhance care and support for all affected, and to reduce the risk of dementia through the promotion of brain health. AIM is the Association's advocacy affiliate, working in a strategic partnership to make Alzheimer's a national priority. Together, the Alzheimer's Association and AIM advocate for policies to fight Alzheimer's disease, including increased investment in research, improved care and support, and the development of approaches to reduce the risk of developing dementia.

The Critical Role of Family Caregivers

People living with Alzheimer's disease may experience changes in the ability to hold or follow a conversation. As a result, they may withdraw from hobbies, social activities, or other engagements. Caregivers of individuals living with Alzheimer's or another dementia play an essential role in combating this, maintaining the quality of life for their loved ones, and helping them live independently in their homes and communities for as long as possible. They are the backbone of our nation's health care system. However, the immense physical, emotional, and financial toll of caregiving often leaves them socially isolated themselves. In fact, 41 percent of dementia caregivers report having no additional unpaid assistance, highlighting the urgent need for stronger support systems. In 2023 alone, more than 11 million caregivers provided 18.4 billion hours of unpaid care - valued at nearly \$350 billion - underscoring their indispensable role in our health care system.

There are several types of caregiver interventions designed to assist caregivers of individuals with Alzheimer's or another dementia, such as support groups, which provide caregivers the opportunity to share personal feelings and concerns to overcome feelings of isolation in a community-based setting.

It is evident that Alzheimer's takes a devastating toll on caregivers, from facing social isolation to battling the financial strain associated with caregiving. Amid these challenges, there is an urgent need to alleviate the overwhelming costs faced by caregivers. We strongly support the bipartisan Credit for Caring Act (S. 925/H.R. 2036), which would create a new, nonrefundable federal tax credit of up to \$5,000 for eligible working family caregivers of individuals, regardless of age, with certain functional or cognitive limitations. The tax credit would help alleviate some of the financial strain on these selfless caregivers nationwide and could be used to offset some of the costs of caregiving, including the costs of respite care, transportation, lost wages, and more. We look forward to working with Congress and members of the Committee to advance the bipartisan Credit for Caring Act and other legislation to support caregivers, as they enhance the longevity and quality of life for our aging population.

Expanding Capacity for Health Outcomes (Project ECHO)

Technology-enabled learning models, such as Project ECHO, are also transforming the way health care providers support individuals with Alzheimer's—especially in rural areas. These education models, often referred to as Project ECHO, can improve the capacity of providers, especially those in rural and underserved areas, on how to best meet the needs of people living with Alzheimer's. Project ECHO helps primary care physicians in real-time understand how to use validated assessment tools appropriate for virtual use to make early and accurate diagnoses, educate families about the diagnosis and home management strategies, and help caregivers understand the behavioral changes associated with Alzheimer's, which can be heightened during isolation. We ask that Congress continues to support provisions expanding the use of technology-enabled collaborative learning models. Expanding these programs will not only improve dementia care but also strengthen the support networks that help individuals with Alzheimer's and their caregivers feel less alone.

Social Isolation as a Dementia Risk Factor

As of 2024, nearly 7 million Americans are living with Alzheimer's, a number expected to rise to nearly 13 million by 2050. Some researchers have surmised that factors such as social isolation from COVID-19 lockdowns, for example, no-visitor policies in long-term care facilities, and increased intensive hospitalizations may increase dementia risk at the population level, but research in coming years will be necessary to confirm this and examine whether the impact is time-limited or long term. With many more at risk of developing the disease or another form of dementia, the need for effective dementia risk reduction strategies that help all communities increases by the day. Two-thirds of Americans have at least one major potential risk factor for dementia. As the prevalence of dementia continues to rise, addressing modifiable risk factors - such as staying mentally and socially active and physical activity - is essential not only to reduce the number of new cases but also to prevent current projections from worsening.

Population-based and epidemiologic studies show that certain modifiable risk factors can increase the risk of cognitive decline and possibly dementia. A growing body of evidence shows that healthy behaviors can protect and promote brain health. Given the growing evidence that lifestyle factors play a significant role in cognitive health, larger studies are essential to further understand how we can effectively reduce the risk of cognitive decline and help individuals live

longer, happier lives. The Alzheimer's Association [U.S. Study to Protect Brain Health Through Lifestyle Intervention to Reduce Risk](#) (U.S. POINTER) is a two-year clinical trial to evaluate whether lifestyle interventions that simultaneously target many risk factors protect cognitive function in older adults with an increased risk for cognitive decline. U.S. POINTER is the first such study conducted on a large group of Americans across the United States. Approximately 2,000 volunteer older adults who are at increased risk for dementia have been enrolled and will be followed for two years. Two lifestyle interventions will be compared, which vary in intensity and format. Eligible volunteers are randomly assigned to these interventions to evaluate whether cognitive benefits from a structured program differ from a self-guided program. Lifestyle interventions combining multiple behavior components show promise as a therapeutic strategy to protect brain health. We look forward to sharing the results of this groundbreaking study soon.

Conclusion

By prioritizing policies supporting caregivers and combating social isolation and senior loneliness, we can help the aging population live longer, healthier lives. The Alzheimer's Association and AIM deeply appreciate the Committee's continued commitment to advancing issues vital to the millions of families affected by Alzheimer's disease and other dementias. We look forward to working with the Committee in a bipartisan way to combat senior loneliness and improve quality of life for those impacted by dementia.