

2.1 HEALTHY BRAIN COMMUNITY ASSESSMENT

Why Complete This Assessment?

Brain health is the ability to think, learn, remember, communicate, and make decisions throughout life. Many factors influence brain health, including physical activity, nutrition, sleep, social connection, management of chronic conditions, and access to healthcare and community resources. Promoting brain health and increasing dementia awareness can help communities support healthy aging, improve quality of life, and better meet the needs of individuals living with dementia and their caregivers.

This assessment is designed to help communities understand their current knowledge, resources, partnerships, and readiness to support brain health and dementia-friendly initiatives. The information gathered will help identify strengths, gaps, opportunities, and priorities for future planning and action.

There are no right or wrong answers. The goal is to establish a baseline understanding of your community's current capacity and identify opportunities to strengthen brain health and dementia support efforts.

Community Name: _____

Survey Date: ____ / ____ / ____

Conducted By: _____

SECTION 1: DEMOGRAPHICS

1. Age:
 - ☐ 18-34
 - ☐ 35-49
 - ☐ 50-64
 - ☐ 65+
2. Gender:
 - ☐ Male
 - ☐ Female
 - ☐ Prefer not to say
3. Role in community: (check all that apply)
 - ☐ Community Member
 - ☐ Professional (Any)
 - ☐ Volunteer
 - ☐ Retired
 - ☐ Other: _____
4. Caregiver Status:
 - ☐ Formal Caregiver – Professional (long-term care/home health)
 - ☐ Informal Caregiver – Family Member/Friend/Community Member (unpaid)
 - ☐ Not a Caregiver

SECTION 2: KNOWLEDGE ABOUT BRAIN HEALTH

1. How familiar are you with the concept of brain health? (1=Not familiar, 5=Very familiar)
1 ☐
2 ☐
3 ☐
4 ☐
5 ☐
2. How confident are you in your knowledge of dementia? (1=Not confident, 5=Very confident)
1 ☐
2 ☐
3 ☐
4 ☐
5 ☐
3. Do you know where to access brain health or dementia resources in your community? 1=Not confident, 5=Very confident)
1 ☐
2 ☐
3 ☐
4 ☐
5 ☐
4. Have you completed any Brain Health Education Programs in the past 5 years?
☐ YES
☐ NO

If you answered "Yes," please indicate the type of training and/or education completed.

SECTION 3: ATTITUDES TOWARD BRAIN HEALTH AND DEMENTIA

1. How important do you believe it is to focus on brain health for all ages?
☐ Not important
☐ Somewhat important
☐ Important
☐ Very important
2. Do you feel comfortable talking about memory changes or dementia in your community?
☐ Yes
☐ No
☐ Unsure
3. Would you participate in community brain health programs?
☐ Yes
☐ No
☐ Maybe

SECTION 4: COMMUNITY RESOURCES AND ENGAGEMENT

1. Are there organizations in your community offering brain health or dementia support?

☐ Yes

☐ No

☐ Unsure

If yes, please list: _____

2. What types of community programs, activities, or services would you like to see that support individuals living with dementia and their caregivers? (Check all that apply)

☐ Caregiver education

☐ Respite services

☐ Memory Cafés

☐ Caregiver support groups

☐ Transportation services

☐ Resource navigation assistance

☐ Adult day services

☐ Other: _____

3. What types of community programs, activities, or services that promote brain health would you like to see in your community? (Check all that apply)

☐ Educational workshops

☐ Social engagement activities

☐ Physical activity programs

☐ Nutrition education

☐ Screening events

☐ Other: _____

4. Are you interested in joining your Healthy Brain Community Steering Committee?

☐ Yes

☐ No

If you answered "YES" please provide

Name: _____

Email: _____

Phone: _____

5. How can community organizations better support brain health?

SECTION 5: LIVED EXPERIENCE & COMMUNITY PERSPECTIVES

1. What are the greatest rural or frontier challenges facing older adults in this community?
 - ☐ Living alone / social isolation
 - ☐ Transportation barriers
 - ☐ Limited access to healthcare / medications
 - ☐ Cost of services
 - ☐ Lack of dementia-specific education
 - ☐ Limited caregiver support or respite options
 - ☐ Food insecurity
 - ☐ Chronic health conditions
 - ☐ Other: _____
2. If you are a caregiver, what support would make the biggest difference for you?
 - ☐ Dementia education and training
 - ☐ Caregiver support groups
 - ☐ Respite care
 - ☐ Help navigating local services
 - ☐ Emotional support resources
 - ☐ Financial assistance resources
 - ☐ Not applicable
 - ☐ Other: _____
3. What has been the most difficult part of caregiving for someone with memory changes or dementia?
(Select one or more, or describe below)
 - ☐ Managing memory loss and repeated questions
 - ☐ Changes in behavior, mood, or personality
 - ☐ Safety concerns (wandering, falls, driving, cooking)
 - ☐ Communication difficulties
 - ☐ Making medical or legal decisions
 - ☐ Understanding disease progression and what to expect
 - ☐ Managing daily routines (bathing, dressing, eating)
 - ☐ Sleep disruptions
 - ☐ Emotional stress, grief, or burnout
 - ☐ Feeling isolated or unsupported

- ☐ Navigating dementia-specific services and resources
- ☐ Financial strain related to care needs
- ☐ Family disagreements about care decisions
- ☐ Other: _____

SECTION 6: ADDITIONAL COMMENTS
