

Strategic Plan 2026–2030

Addressing Alzheimer's Disease and Related Dementias in Puerto Rico

KEY FACTS

54,473 registered cases of ADRD as of December 31, 2024.

68.6 % of cases attributed to Alzheimer's Disease.

17 % ADRD prevalence in Puerto Rico vs. 9.6% in the U.S. (NORC, 2021).

53,929 estimated Alzheimer's caregivers in Puerto Rico (2021–2022).

\$64,915 estimated annual cost per person with ADRD.

4TH leading cause of death in Puerto Rico since 2008.

3RD cause of death in women 60+ since 2018.

This Strategic Plan serves as Puerto Rico's official roadmap for addressing Alzheimer's Disease and Related Dementias (ADRD) as a primary public health priority from 2026 to 2030.

Funded by the CDC under the BOLD Infrastructure for Alzheimer's Act, this effort aligns with the Healthy Brain Initiative (HBI) State and Local Roadmap. It represents a unified, multisectoral effort co-created by the Puerto Rico Department of Health and the newly established Alzheimer's and other Dementias Coalition of Puerto Rico (CADPR), integrating expertise from over 40 government agencies, academic institutions, and community organizations to strengthen the island's dementia care infrastructure.

MISSION: Improve the quality of life of individuals affected by ADRD and their caregivers in Puerto Rico.

VISION: Strengthen ADRD infrastructure in Puerto Rico focused on early detection, risk reduction, prevention of avoidable hospitalizations, caregiver support, research, and education.

STRATEGIC CONTEXT

Puerto Rico's ADRD incidence rate (5.4%) exceeds the U.S. national average (4.6%). The age-adjusted mortality rate has risen from 40.8 per 100,000 in 2009 to 44.3 in 2023. While Alzheimer's Disease is the most common type, vascular dementia, Lewy body dementia, Parkinson's related dementia, frontotemporal dementia, and Huntington's disease also represent a significant portion of cases. The most affected regions are Mayagüez-Aguadilla, Caguas, and Bayamón, with the highest case concentrations in the municipalities of San Juan, Bayamón, Mayagüez, Caguas, and Ponce. ADRD also places a heavy burden on families and caregivers, who face high rates of stress, depression, and chronic illness compounded by fragmented services and a shortage of specialized professionals.

Centro para la Coordinación de Servicios a Personas Afectadas
con la Enfermedad de Alzheimer | Puerto Rico Department of Health

Full plan in Spanish, available at: www.salud.pr.gov | cadpr@salud.pr.gov

787-765-2929, ext. 4147 & 4143

Funded by CDC – Grant BOLD NU58DP007536



DEPARTMENT OF

HEALTH

GOVERNMENT OF PUERTO RICO

FOUR AREAS OF ACTION

RISK REDUCTION

Goal: Empower the general population to adopt brain-healthy lifestyles and reduce the risk of developing ADRD.

- Implement 2 public education campaigns on brain health via social media and traditional media.
- Impact 200 people through chronic disease prevention, physical activity & nutrition programs in 2 municipalities.
- Create a repository of 30+ ADRD risk-factor research summaries; disseminate via 3+ channels.
- Analyze existing policies; develop 1 bill or amendment addressing ADRD risk reduction.
- Launch dementia-friendly community pilots in North and West Health Regions.

CAREGIVER SUPPORT

Goal: Improve the quality of life of ADRD caregivers by addressing biopsychosocial needs and promoting safe, sustainable care environments.

- Develop and disseminate a detailed caregiver profile for Puerto Rico, drawing on at least 15 existing studies.
- Map at least 20 public and private entities providing services to ADRD caregivers and identify service gaps.
- Identify and recommend at least 1 evidence-informed strategy addressing caregiver needs and service gaps.
- Develop a training program for ADRD caregiver certification and disseminate via 2 channels.
- Implement 1 national awareness campaign on caregiver roles via social media and traditional media.

EARLY DETECTION & DIAGNOSIS

Goal: Reduce delays in ADRD diagnosis by strengthening clinical capacity and community awareness.

- Train 100 healthcare professionals on ADRD screening tools and updated clinical guidelines.
- Develop an educational plan for primary care physicians on 5 screening instruments used in Puerto Rico.
- Produce 4 educational materials and 1 symptom checklist for the general public.
- Launch a digital directory of 30+ clinical services for people with ADRD and their families.
- Establish a biennial update process for the clinical services directory.

PREVENTION OF AVOIDABLE HOSPITALIZATIONS

Goal: Reduce unnecessary hospitalizations of people with ADRD through improved emergency care protocols and caregiver support.

- Complete 1 situational analysis with at least 3 data sources, 50 caregivers/families, and 50 health professionals.
- Design and validate a standardized admission form for hospital ERs and FQHCs.
- Develop and pilot a standardized ADRD management protocol for ERs and FQHCs in Puerto Rico.
- Train 1 emergency sites on the new protocol and evaluate implementation results.
- Publish a preliminary pilot outcomes report to inform broader rollout.

FQHCs: Federally Qualified Health Centers

ERs: Emergency Rooms

SWOT ANALYSIS HIGHLIGHTS

STRENGTHS

- Multi-sectoral coalition (CADPR) aligning government, academia, and civil society.
- Framework aligned with CDC's Healthy Brain Initiative, grounded in international best practices.

OPPORTUNITIES

- Advances in technology for health data collection and predictive analytics can strengthen surveillance.
- A strategic foundation enables policy advocacy to improve ADRD services and caregiver rights.

WEAKNESSES

- Inconsistent participation among coalition members affects continuity.
- Heavy reliance on external grants threatens long-term program sustainability.

THREATS

- Stigma and misinformation discourage early diagnosis and help-seeking.
- A fragmented health system (public/private, primary/specialty) creates service gaps and navigation barriers.

MONITORING & EVALUATION

Implementation progress will be tracked through defined performance indicators aligned with each action area. The CADPR and PRDH will conduct periodic reviews to assess compliance with objectives, identify barriers, and adjust strategies as needed. All activities are expected to be completed or substantially underway by December 2030. A formal evaluation report will be produced at plan completion.

MILESTONE	2026–2027	2028–2029	2030
Baseline data collection & stakeholder directories	●		
Training programs, protocols & digital directory	●	●	
Situational analyses, pilots & evidence-based recommendations		●	●
Final evaluations, reports & policy proposals			●

LEAD ORGANIZATIONS & KEY PARTNERS

PUERTO RICO GOVERNMENT

- Department of Health
 - Alzheimer's Disease Coordination Center
 - Healthy Aging Section
 - Tobacco Use Control and Prevention Program
 - Diabetes Prevention and Control Unit
- Department of Family (ADFAN)
- Department of Recreation & Sports
- Mental Health & Addiction Administration (ASSMCA)
- Department of Public Safety
- Office of the Attorney General for the Elderly (OPPEA)

PRIVATE AGENCIES

- Hatimedik
- Sistema Integral de la Montaña, Inc.
- Bristol-Myers Squibb Co

COMMUNITY REPRESENTATIVE

- Social Worker
- Nurse
- Pharmaceutic
- Engineer
- Physical therapist
- Caregiver

ACADEMIC & RESEARCH

- Ana G. Méndez University - Carolina Campus
- Central University of the Caribbean
- University of Puerto Rico (UPR) Medical Sciences Campus (UPR-RCM)
 - Audiology Program
 - Geriatrics Program
 - Gerontology Program
 - School of Pharmacy
- UPR - Río Piedras Campus
 - Social Sciences
- UPR - Mayagüez Campus
 - Industrial Engineering Program
- Pontifical Catholic University of Puerto Rico
 - School of Caregivers
- Puerto Rico Science, Technology & Research Trust
- The Puerto Rico Alzheimer's Disease Initiative (PRADI)

NGOS & CIVIL SOCIETY

- Alzheimer's Association of Puerto Rico
- AARP Puerto Rico
- American Red Cross, Puerto Rico Chapter
- De Frente al Alzheimer
- Dementia Friends PR
- Esperanza para la Vejez
- Huntington Foundation of Puerto Rico
- Pan American Health Organization (PAHO)
- Parkinson's Foundation
- Pro-Alzheimer Care Organization (OPAPA)
- Proyecto Plenitud Inc.
- Puerto Rico Association of Health Educators
- Puerto Rico Hospital Association
- Puerto Rico Parkinson's Association
- Puerto Rico Psychology Association
 - Adult and Elderly Affairs Committee
- Psycho-pedagogical Institute of Puerto Rico
- Taller Salud, Inc.

CALL TO ACTION

This plan belongs to all of Puerto Rico. Together, we can build a more compassionate, informed, and prepared society for people living with dementia and their caregivers.

LEARN • SHARE • COLLABORATE • ADVOCATE



Full Plan in Spanish

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