

Summary report on the
**Regional workshop on the
implementation of the
global action plan on the
public health response to
dementia (2017–2025)**

Doha, Qatar
18–19 September 2024



**World Health
Organization**

Eastern Mediterranean Region

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1. Introduction

Currently, 55 million people are living with dementia globally, and it is expected that this number will increase to 78 million by 2030. In the WHO Eastern Mediterranean Region, dementia is the 14th leading cause of death, with a reported 2.3 million people living with dementia. Most people with dementia (61%) live in low- and middle-income countries. Due to the anticipated population ageing and resulting demographic change, especially in low- and middle-income countries, the proportion of people with dementia living in low-resource settings is expected to rise to over 70% by 2050, which underlines the need for the continued commitment of regional governments towards this public health issue.

To support Member States in developing national responses and to help improve the lives of people with dementia, their families and caregivers, the Seventieth World Health Assembly adopted the [*Global action plan on the public health response to dementia 2017–2025*](#) in 2017. The global action plan comprises seven action areas: dementia as a public health priority; dementia awareness and friendliness; dementia risk reduction; dementia diagnosis, treatment, care and support; support for dementia carers; information systems for dementia; and dementia research and innovation.

Since 2022, the WHO has convened annual regional and interregional workshops in collaboration with the WHO Collaboration Centre for Healthy Ageing and Dementia at the Hamad Medical Corporation in Doha, Qatar, to enhance the prevention, diagnosis, treatment and care of dementia by fostering cross-country exchange and mutual learning. Building on this momentum, WHO, in collaboration with the Qatari Ministry of Public Health and the WHO Collaboration Centre for Healthy Ageing and Dementia, held a two-day regional workshop in Doha, Qatar, on 18 and 19 September 2024.

The workshop was informed by the latest round of Global Dementia Observatory (GDO) data collection, while also taking into consideration the unique needs and circumstances of the different groups of countries in the Region. It aimed to strengthen collaboration and inter-country exchange of good practices in four priority areas:

- dementia as a public health priority;
- dementia awareness and friendliness;
- dementia risk reduction; and
- dementia diagnosis, treatment, care and support.

Over two days, more than 50 representatives from ministries of health, national chapters of Alzheimer's Disease International (ADI) and experts and practitioners, exchanged experiences and insights into recent advances and the available technical products, tools, resources and evidence on dementia.

The workshop concluded with recommendations to help countries implement actions on dementia in the areas of promotion, prevention, diagnosis, management, rehabilitation, end-of-life care and support for the carers of people living with dementia.

Member States emphasized the need to create a network of experts on dementia care to follow-up on the workshop's discussions and promote knowledge exchange between the countries of the Region, while taking account of the diversity of resource levels.

2. Summary of discussions

Situation analysis

Although adopted in 2017, countries are still far from achieving the global targets of the global action plan on dementia for 2025. For instance, only 50 WHO Member States of 146 globally have a dementia policy or plan, whether stand-alone or integrated (34% compared with a global target of 75% Member States having national plans).

In the Eastern Mediterranean Region, 57% of countries participated in the second round of GDO data collection in 2024 compared to 38% in 2018–2020. The Region's progress towards the targets is as follows based on the 2024 GDO data collection:

- 38% of countries have a national dementia plan (global target: 75%);
- 33% have awareness raising campaigns (global target: 100%);
- 33% have dementia-friendly initiatives (global target: at least 50%);
- 23.8% have risk reduction campaigns (global target: achieving targets for prevention and control of noncommunicable diseases);
- 28.6% have reached a diagnostic rate of at least 50% (global target: 50%);
- 38% provide carer training and support (global target: 75%);
- 19% collect and report on key dementia information (global target: 50%);
- 28.6% have a dementia research plan (global target: research output is doubled).

It is important to focus on the areas where countries can make progress, even with minimal resources, through proper planning and integration supported by effective laws, policies and resource allocation. This includes dementia risk reduction, financing, awareness and friendliness and diagnosis and treatment.

In many countries, it is an opportune time to integrate some of the dementia interventions with the best evidence into universal health coverage basic benefit packages to ensure the sustainable financing of dementia programmes.

Dementia as a public health priority

Health technology assessment tools can be useful to measure the effectiveness, feasibility and implementation of dementia interventions. Cost-effectiveness studies should aim to identify the interventions to be integrated in basic benefit packages, while addressing cultural considerations. Specifically, countries are advised to consider value-based pricing as disease-modifying therapies seek market approval and evidence on the cost-effectiveness of identification (e.g. biomarkers) and non-pharmacological strategies.

During group discussion, countries agreed that the lack of nationally-available data, limited financial resources, competition with other health priorities and political instability in the Region are among the major challenges for prioritizing dementia within health plans. It was felt that more investment should be directed towards dementia prevention, early identification and support provided through anonymous helplines. It was suggested that showcasing dementia champions would help to raise awareness and reduce stigma regarding people living with dementia and their caregivers.

Dementia awareness and friendliness

Investing in a dementia-friendly society requires a whole-of-society-approach, utilizing enabling technology that ensures synergies across different sectors, such as increasing the availability of transportation systems, enabling housing designs/modifications, supporting

caregivers and providing legal protection and provisions for strengthening the civic and sociocultural participation of people with dementia and their caregivers.

Dementia risk reduction

According to the [2024 report of the Lancet Commission on Dementia Prevention, Intervention and Care](#), around 45% of cases of dementia are potentially preventable by addressing 14 modifiable risk factors at different stages during the life course. [WHO guidelines on risk reduction of cognitive decline and dementia](#) provide 14 recommendations for nine risk factors, which include lifestyle/behavioural interventions, interventions for health conditions and cognitive training. WHO provides diverse tools to promote the integration of dementia risk reduction into the relevant programmes and sectors outlined in the [WHO brain health position paper](#).

During group discussion, countries highlighted that efforts are needed to build on the existing models of care, while ensuring integration of dementia risk reduction activities across all levels of care at primary, secondary and tertiary levels and leveraging the connection between public and private sectors and programmes across health and social care sectors. Countries also agreed on the need to build on existing structures, such as the Health Promoting Schools and Healthy Cities initiatives and mental health helplines established during the COVID-19 pandemic, to expand their scope to include dementia. In addition, integration into other programmes, such as child and maternal health, road safety, vaccination, HIV and tuberculosis (TB), would provide potential entry points for an integrated model of care across the life course, rather than developing a new vertical programme, thereby overcoming resource constraints. Similarly, it was noted that WHO had successfully designed and delivered communication health messages

during the COVID-19 pandemic that could be utilized to promote brain health and risk reduction as part of humanitarian and emergency responses. Participants also emphasized the need to include more credit hours on dementia and geriatric care within health professional and medical school curricula.

3. Recommendations

To Member States


1. Ensure the integration of dementia plans into policies, strategies, programmes and services for mental health and noncommunicable diseases, as well as existing initiatives such as Healthy Cities and Health Promoting Schools, and child and maternal health, road safety, vaccination, HIV and TB programmes.
2. Conduct cost-effectiveness analyses of intervention strategies for dementia, based on the best available evidence, to provide data on the return on investment, with the goal of developing investment cases to help persuade policy-makers and investors to prioritize dementia on health agendas.
3. Develop and implement programmes to raise awareness on dementia and address the related stigma and misconceptions.

To WHO and the WHO Collaborating Centre on Healthy Ageing and Dementia

4. Organize bi-annual meetings on dementia, including a face-to-face meeting to be hosted by the WHO Collaborating Centre on Healthy Ageing and Dementia in September and a virtual meeting in March/April.
5. Support the development of an expert group that works with technical leads from ministries of health and national chapters of ADI to support countries in implementing the action areas of the

global action plan on the public health response to dementia. To facilitate the building of a regional network of leaders in brain health, the Global Brain Health Institute welcomes applications for support (www.gbhi.org).

6. Support the setting up of fellowship programmes for geriatric, psychiatric and dementia care and webinars to enhance knowledge on dementia care and support countries with limited resources.



World Health Organization
Regional Office for the Eastern Mediterranean
Monazamet El Seha El Alamia Street,
Extension of Abdel Razak El Sanhoury Street
P.O. Box 7608, Nasr City
Cairo 11371, Egypt
www.emro.who.int