

The Chilean National Dementia Plan: Update And Lessons For Latin America

P3-014

Daniel A. Jiménez^{1,2}, María S. Martínez¹, Javiera Erazo¹, Francisco Cubillos¹, Rodrigo Zárata¹, Milena Pereira³, Felipe Salinas⁴.

¹División de Prevención y Control de Enfermedades, Subsecretaría de Salud Pública,Ministerio de Salud, Santiago, Chile, ²Hospital del Salvador, Santiago, Chile, ³División deAtención Primaria, Subsecretaría de Redes Asistenciales, Ministerio de Salud, Santiago, Chile, ⁴División de Gestión de la Red Asistencial, Subsecretaría de Redes Asistenciales, Ministerio deSalud, Santiago, Chile.

Chile is the only country in Latin America with a National Dementia Plan (NDP) classified as Stage 5A by Alzheimer's Disease International (ADI). After eight years of implementation, the country conducted a comprehensive evaluation of the plan before updating it for the next decade. This systematic evaluation of a national dementia plan represents an unprecedented experience in Latin America.

BACKGROUND	METHODS	RESULTS	CONCLUSIONS	REFERENCES								
❖ Chile leads the region with an aging index of 84.6 and nearly 20% of its population over age 60. ❖ An estimated 200,000 people are currently living with dementia in Chile, and this number is projected to triple by 2050. ❖ Modifiable risk factors constitute 62 percent of the total risk factors for dementia, compared to 40 percent worldwide. ❖ The first dementia plan was launched in 2017. After eight years of implementation, the Ministry of Health conducted a comprehensive review of the plan to support its relaunch in 2026. ❖ Here, we describe the methodology designed to evaluate and update the plan for a new implementation period (2026-2035).	❖ A multi-step participatory evaluation combining qualitative and quantitative methods was conducted (Figure 1). ❖ Outputs from each phase were reviewed by a Ministry of Health technical committee. ❖ The draft NDP and Action Plan (2026–2035) underwent final stakeholder and public consultation before its release. <table><tr><th>PHASE</th><th>ACTIONS</th></tr><tr><td> 1 Consolidation of Qualitative and Quantitative Evaluation </td><td> Analysis of diagnosis and treatment rates in primary and specialty care. Follow-up and technical evaluation of actions from 2017–2024. Recommendations from Dementia Advisory Board (2023–2024). </td></tr><tr><td> 2 Participatory Dialogues and International Seminar </td><td> 27 regional dialogues with 897 participants including civil society representatives, experts by training and by lived experience, and professionals from the social and health care systems. International seminar with expert recommendations Contributed expert input to inform the evaluation and update process. </td></tr><tr><td> 3 National Dementia Plan Update </td><td> Final analysis to update the National Dementia Plan and develop the Action Plan (2026–2035). Consultation with the Dementia Advisory Board, civil society, and public consultation. </td></tr></table> Figure 1. Phases and Actions of the Multi-Step Participatory Evaluation Process	PHASE	ACTIONS	1 Consolidation of Qualitative and Quantitative Evaluation	Analysis of diagnosis and treatment rates in primary and specialty care. Follow-up and technical evaluation of actions from 2017–2024. Recommendations from Dementia Advisory Board (2023–2024).	2 Participatory Dialogues and International Seminar	27 regional dialogues with 897 participants including civil society representatives, experts by training and by lived experience, and professionals from the social and health care systems. International seminar with expert recommendations Contributed expert input to inform the evaluation and update process.	3 National Dementia Plan Update	Final analysis to update the National Dementia Plan and develop the Action Plan (2026–2035). Consultation with the Dementia Advisory Board, civil society, and public consultation.	❖ We identified key achievements, persistent gaps, and priorities for updating the NDP (Fig.2) ❖ Advances included improved services, workforce training, and public awareness; challenges remain in intersectoral collaboration and implementation monitoring. ❖ Based on these findings, the plan was updated and restructured into five strategic pillars, from which objectives and specific actions were defined for the next decade (Fig.3). 0%20%40%60%80%100% Transfer of technical knowledge Evaluation and monitoring system Service Provision and Human Resources Regulatory document Advisory body establishment Intersectoral coordination Social communication actions LIMITED PROGRESS MODERATE PROGRESS SUBSTANTIAL PROGRESS COMPLETE NOT STARTED Figure 2. Implementation progress by strategic area	❖ The evaluation and updating of Chile’s National Dementia Plan reinforce the country’s regional leadership in Latin America in promoting an organized and sustainable response to dementia. ❖ This experience highlights the value of collaboration, participation, and evidence-based planning in shaping dementia policy and establishes a benchmark for improving outcomes for people with dementia and their caregivers. Monitoring and Evaluation Intersectoral Collaboration Public Awareness and Engagement Diagnosis and Treatment Dementia Prevention Figure 3. Strategic pillars for the updated National Dementia Plan 2026-2035	1. Alzheimer’s Disease International (2025) <i>From plan to impact VIII: Time to deliver</i>. London: Alzheimer’s Disease International 2. Paradelo RS et al. Population attributable fractions for risk factors for dementia in seven Latin American countries: an analysis using cross-sectional survey data. <i>Lancet Glob Health</i>. 2024;12(10):e1600-e1610. 3. World Health Organization. <i>Towards a dementia plan: a WHO guide</i>. Ginebra: OMS; 2018. 4. Instituto Nacional de Estadísticas. (2025). <i>Resultados Censo de Población y Vivienda 2024</i>. https://censo2024.ine.gob.cl/ 5. Ministerio de Salud. (2017). <i>Plan Nacional de Demencia</i>. Gobierno de Chile. https://www.alzint.org/u/Chile-PLAN-DE-DEMENCIA.pdf MORE INFORMATION Scan the QR code to download the full Chilean National Dementia Plan 2026–2035. djimenezf@uchile.cl ALZHEIMER’S ASSOCIATION AAIC>26
PHASE	ACTIONS											
1 Consolidation of Qualitative and Quantitative Evaluation	Analysis of diagnosis and treatment rates in primary and specialty care. Follow-up and technical evaluation of actions from 2017–2024. Recommendations from Dementia Advisory Board (2023–2024).											
2 Participatory Dialogues and International Seminar	27 regional dialogues with 897 participants including civil society representatives, experts by training and by lived experience, and professionals from the social and health care systems. International seminar with expert recommendations Contributed expert input to inform the evaluation and update process.											
3 National Dementia Plan Update	Final analysis to update the National Dementia Plan and develop the Action Plan (2026–2035). Consultation with the Dementia Advisory Board, civil society, and public consultation.											