





Reducing the risk of dementia in our South Asian communities



What is the focus of the research?

Investigating the prevalence of modifiable risk factors for dementia in Australia's South Asian migrant population.



Why is it important?

Dementia is the leading cause of disability and dependency among older people. It's also the second-leading cause of death in Australia.

It is well-known that our population is ageing, which means our overseas-born Australians are ageing too. South Asian migrants account for half of this demographic and, unfortunately, they have a disproportionally higher risk of dementia. They are also less likely to access health services that can reduce this risk.

Forty per cent of dementia diagnoses could be prevented or delayed by targeting modifiable risk factors, such as hypertension, obesity, excessive alcohol intake, acquired hearing loss, traumatic brain injury, smoking, depression, social isolation, physical inactivity, diabetes and air pollution.

Poor health literacy around these risk factors is partly responsible for our South Asian migrants' increased rate of dementia. Additionally, we



This study will help us better understand which risk factors to target in migrant populations ***

— Dr Mohammad Shoaib Hamrah

still do not know if there are other modifiable risk factors specific to race and ethnicity at play. Compounding that is the difficulty these communities experience accessing health services, due to language and cultural barriers, discrimination, financial burden, and unfamiliar administrative processes and health systems.

In this unique project, Dr Hamrah is aiming to create a modifiable dementia risk profile of people from India, Bhutan, Nepal and Afghanistan who are living in Tasmania. He hopes the results will lead to culturally appropriate education and behaviour change interventions that reduce the prevalence of dementia and other chronic conditions in our South Asian communities, and alleviate the burden on public health systems.



? Why Tasmania?

Tasmania has the oldest population in Australia and an ageing multicultural population. One in five older Tasmanians were born in a country other than Australia and almost 20 per cent of people are aged over 65.



How will this happen?

Stage 1: establish advisory groups from Indian, Nepalese, Afghani and Bhutanese communities in Tasmania. Invite their input into research approach, developing culturally sensitive interviews and to recruit 200 participants aged 50 and over.

Stage 2: conduct one-on-one interviews with participants in their native languages. Participants to then complete the Dementia Risk Profile questionnaire.

Stage 3: researchers to perform statistical analysis to create risk categories and determine modifiable risk factors for dementia specific to South Asian migrants.



What will it mean for **South Asian migrants?**

- Increased health literacy around modifiable risk factors for dementia.
- Culturally appropriate interventions to reduce that risk.
- Greater access to healthcare services.
- Reduced risk of dementia and other chronic diseases.



Who's undertaking the research?

Dr Mohammad Shoaib Hamrah, University of Tasmania

Dr Hamrah is a clinical doctor and academic with 25 years' experience in various medical and research positions worldwide. In his role as research fellow for the ISLAND project at the Wicking Dementia Research and Education Centre, he investigates modifiable risk factors for dementia. Dr Hamrah has worked with researchers around the world and brings this

international expertise to the ISLAND project. His research focuses on modifiable risk factors for non-communicable diseases.

The title of Dr Hamrah's project is Prevalence and correlates of modifiable risk factors for dementia among South Asian migrants.

Dr Hamrah's research is funded by Dementia Australia Research Foundation and the Dr Maree Farrow Memorial Project Grant.