

St. Kitts and Nevis

Research conducted in

Saint Kitts and Nevis has an active dementia-focused civil society sector, with the Alzheimer's Association of St. Kitts and Nevis providing caregiver support, education, respite grants, and community activities that complement the public health system. The forthcoming National Policy on Ageing and new regulations for residential care facilities may strengthen services for older adults, although they are not dementia-specific. Key challenges remain limited specialist capacity and access to advanced diagnostics and treatments, with complex cases often requiring overseas referral.

Highlights

Health system **Universal, Mixed funding (Mixed provision)**

ADI member association(s): **Alzheimer's Association of St Kitts and Nevis**

National dementia plan:

Dementia plan funding: **No plan**

Dementia prevalence rate: **472**

Dementia incidence rate: **83**

Population: **47003**

Median age: **37**

Health expenditure (% of GDP): **6**

Diagnosis

Limited specialist capacity shapes dementia diagnosis in St. Kitts and Nevis, where assessment usually starts in primary care and may progress to hospital, psychiatric, neurological, or overseas services. No national referral pathway, validated screening instrument, dedicated memory clinic, or standardised assessment cost has been identified, and waiting times remain unclear. Expanding CT and MRI provision may strengthen local diagnostics, but specialised Alzheimer's imaging, genetic testing, and biomarkers are generally unavailable. Private and overseas care can create significant expenses, while proposed National Health Insurance reforms have not yet been implemented.

Diagnosis pathway

No national dementia referral pathway or dedicated public memory clinic has been identified in St. Kitts and Nevis. Assessment generally begins with community-based or private primary-care providers, with referrals to hospital, psychiatric, neurological, or internal medicine services as needed. Limited permanent neurological capacity means complex assessments, specialised imaging, biomarker testing, and subspecialist care may require overseas referral.

There is no published national dementia referral pathway. In practice, assessment is likely to begin at one of the community health centres, with a general practitioner, district medical officer or private physician. Family members may seek help after observing memory loss, confusion, behavioural changes, wandering, difficulty managing finances or deterioration in everyday functioning.

Primary-care clinicians can undertake an initial history, physical examination, medication review and basic laboratory assessment. Suspected cases may then be referred to internal medicine, psychiatry, neurology or hospital services at Joseph N. France General Hospital or Alexandra Hospital.

The government has previously identified neurology as an area requiring specialist recruitment and announced plans to bring a neurologist into the country. This indicates that neurological expertise has not always been continuously available as a permanent, full-time national service.

Cases requiring detailed neuropsychological assessment, specialized imaging, complex biomarker testing or subspecialist dementia evaluation may be referred overseas, commonly to larger Caribbean centres, the United States or other regional providers. No dedicated public memory clinic was identified.

References

- <https://www.bestheartsurgery.com/blog/a-comprehensive-guide-to-hospitals-in-the-saint-kitts-and-nevis-myhospitalnow/>
- <https://www.sknis.gov.kn/2023/03/15/government-of-st-kitts-and-nevis-committed-to-delivering-improved-healthcare-services-to-all>

Wait times

Status: Long wait time

Access to dementia assessment in St. Kitts and Nevis may be inconsistent, as no official waiting-time figures are

available. Delays can reflect specialist and diagnostic capacity, referral authorisation, travel between islands or overseas, and the intermittent presence of visiting specialists.

No official waiting-time data were identified for primary-care cognitive assessment, specialist neurology or psychiatry consultations, CT or MRI imaging, overseas referrals, or completion of a dementia diagnosis. Waiting times are likely to vary depending on specialist availability, diagnostic capacity, referral authorization, and whether patients require travel between Saint Kitts and Nevis or overseas for assessment. The reliance on visiting specialists for some services also suggests that access may be intermittent rather than continuously available.

Diagnosis cost

Status: Partially covered

Financial access to dementia assessment in St. Kitts and Nevis remains difficult to quantify because no standardised price or dementia-specific coverage package exists. Government-funded services reduce some costs, but private consultations, advanced testing, and overseas referrals can generate substantial out-of-pocket expenses, particularly when travel is necessary. Proposed NHIS reforms may strengthen financial protection through structured co-payments and referral mechanisms, although these measures had not yet been implemented.

There is no standardized published price for a dementia assessment in Saint Kitts and Nevis. Although public primary care and hospital services are substantially government funded, and older adults have historically benefited from free access to many public healthcare services, patients may still incur costs for private specialist consultations, advanced imaging, specialized laboratory investigations, and overseas referrals. Potential out-of-pocket expenses include GP or specialist consultations, blood tests, CT or MRI scans, cognitive or neuropsychological assessment, genetic testing, cerebrospinal fluid analysis, repeat specialist visits, and caregiver travel.

The financial burden can increase considerably when patients require services unavailable locally, particularly overseas specialist consultations, advanced biomarker testing, or complex diagnostic investigations that involve travel and accommodation expenses. The relatively high level of out-of-pocket health expenditure (38.85% of current health expenditure in 2021) indicates that financial barriers remain significant despite the public health system.

Planned National Health Insurance Scheme (NHIS) proposals indicate that future coverage would include graduated co-payments depending on the provider, with higher reimbursement for public services than for private or overseas care. The Green Paper on Universal Health Care from 2018 also proposes a gatekeeper referral system, pre-authorization for specialized overseas services, case management for follow-up care, and lifetime benefit limits, all of which would influence the cost of complex dementia investigations. Although these reforms could improve financial protection and coordination of care, they had not yet been implemented, and no dementia-specific diagnostic benefits package has been announced.

References

- https://ais.paho.org/hia_cp/en/2007/Saint%20Kitts%20and%20Nevis%20English.pdf
- <https://hia.paho.org/en/country-profiles/saint-kitts-and-nevis>
- <https://www.sknis.gov.kn/wp-content/uploads/2020/09/Green-Paper-on-Universal-Health-Care-SKN.pdf>

Cognitive tests

Status: Available

No national guideline specifies which cognitive screening tools should be used for dementia assessment in Saint Kitts and Nevis. Clinicians may use internationally recognized instruments such as the Mini-Mental State Examination (MMSE), Montreal Cognitive Assessment (MoCA), Mini-Cog, Clock Drawing Test, verbal fluency tests, or informant-based questionnaires, but no local source confirms the routine nationwide use of any specific tool. Dedicated public neuropsychological testing services were not identified, and cognitive assessment may be influenced by educational, cultural, and language factors. No locally validated cognitive screening instrument for Saint Kitts and Nevis was identified.

Imaging tests

Status: Commonly used

CT scanning is the primary structural imaging modality currently available in Saint Kitts and Nevis for evaluating causes of cognitive impairment such as stroke, tumour, hydrocephalus, or head injury. In 2024, the government announced the procurement of a 128-slice CT scanner for the Joseph N. France General Hospital, intended to expand diagnostic capabilities, including advanced cardiac imaging. The government has also invested in a dedicated MRI facility at the hospital, with installation of the country's new MRI system planned for early 2025, representing a significant enhancement of local diagnostic capacity.

Despite these investments, publicly available information does not confirm routine access to dementia-protocol MRI, FDG-PET, amyloid PET, tau PET, or other functional neuroimaging specifically used in Alzheimer's disease diagnosis. Likewise, the availability of dementia-specific neuroradiology interpretation has not been documented. Patients requiring advanced molecular imaging, including amyloid or tau PET, would therefore likely need referral to overseas specialist centres.

References

- <https://www.sknis.gov.kn/2024/10/09/ministry-of-health-in-st-kitts-moving-closer-to-offering-mri-and-ct-scan-services-at-the-jnf-general-hospital/>
- <https://www.facebook.com/reel/1184164717134279> <https://hia.paho.org/en/node/187>

Genetic tests

No national dementia-genetics service was identified. Testing for rare familial Alzheimer genes such as APP, PSEN1 and PSEN2, frontotemporal-dementia genes or APOE genotype does not appear to form part of routine public dementia assessment.

Biomarker tests

Status: Rarely used

No evidence was found that Alzheimer's disease biomarkers are routinely processed locally in Saint Kitts and Nevis, including cerebrospinal fluid (CSF) amyloid-beta, total tau, phosphorylated tau, plasma phosphorylated tau, amyloid-beta blood ratios, or neurofilament light (NfL). Although lumbar puncture may be technically available in

hospital settings, samples requiring specialized dementia biomarker analysis would likely need to be sent to overseas laboratories. As a result, while the country has general laboratory infrastructure, a publicly documented pathway for Alzheimer's biomarker testing has not been identified.

Treatment & care

A fragmented network of hospitals, primary care, mental-health services, residential facilities, and community organisations underpins dementia care in St. Kitts and Nevis. Joseph N. France General Hospital is the main referral centre, with Alexandra Hospital serving Nevis, while expanding CT and MRI capacity may strengthen local diagnostics. Specialist and dementia-specific services remain limited, leaving families to shoulder much of the cost and practical responsibility for home care, supervision, residential care, and overseas treatment. The Alzheimer's Association provides education, training, peer support, and respite grants, but no comprehensive public caregiver-support system exists. Proposed NHIS reforms could improve financial protection if implemented.

Specialized facilities and services

Dementia-related care in St. Kitts and Nevis is delivered through a dispersed network rather than a dedicated specialist centre. Joseph N. France General Hospital is the principal referral facility, with Alexandra Hospital providing comparable access for Nevis residents and referring complex cases when necessary. Community health centres support recognition, chronic disease management, and onward referral, while mental-health services may manage BPSD. Residential care is available through public, charitable, and private providers, with emerging government regulation intended to strengthen standards, safeguarding, and quality for older adults.

Joseph N. France General Hospital in Basseterre is the Federation's principal public referral hospital and the main centre for specialist diagnostic services. Although it is not a dedicated dementia centre and no multidisciplinary memory clinic has been identified, the hospital provides many of the services involved in dementia assessment and management, including internal medicine, emergency care, mental health services, diagnostic imaging, laboratory medicine, and visiting specialist clinics. Recent government investment has further strengthened diagnostic capacity through the installation of a 128-slice CT scanner and construction of a dedicated MRI facility, improving local access to neuroimaging for patients with cognitive impairment.

Alexandra Hospital is the main public hospital serving Nevis and provides inpatient care, emergency services, laboratory diagnostics, and general medical care for the island's population. It represents the primary point of access for older adults with suspected dementia living on Nevis. Patients requiring more complex investigations or specialist neurological assessment may be referred to Joseph N. France General Hospital or overseas when services are unavailable locally.

Saint Kitts and Nevis operates a network of approximately 17 community health centres and health posts, which form the foundation of the country's primary healthcare system. Although these facilities do not provide specialist dementia services, they play an important role in early recognition of cognitive decline, chronic disease management, medication monitoring, caregiver education, home visits, and referral to secondary care. Effective management of vascular risk factors such as hypertension and diabetes through primary care may also contribute to reducing dementia risk and supporting patients after diagnosis.

The Dr. Arthur W. L. Lake Mental Health Day Treatment Centre provides community-based psychiatric rehabilitation and supports the transition from inpatient treatment to community living. While it is not a dementia-specific service,

its multidisciplinary mental health team may become involved in the management of dementia patients experiencing depression, anxiety, psychosis, agitation, or other behavioural and psychological symptoms of dementia (BPSD).

Residential care for older adults is provided through a combination of public, charitable, and private facilities, although a comprehensive national network of dementia-specific residential services has not been identified. Recognizing the need to strengthen quality assurance, the Government of Saint Kitts and Nevis has begun developing regulatory standards for institutions providing elder care in collaboration with Windsor University School of Medicine. These reforms are intended to improve oversight, safeguarding, and standards of care for older adults, including those living with dementia.

Approved medication

Generic Name	Trade Name	Used for
Donepezil	Aricept, Aricept ODT, Adlarity, Eranz, Memac, Alzepil, Davia, Donecept, Donep, Donepex, Donesyn, Dopezil, Yasnal, Memorit, Pezale, Redumas, Zolpezil, Namzaric*	Donepezil is indicated for the symptomatic treatment of mild to moderately severe Alzheimer's dementia. Official UK medicine details (MHRA SPC) link
Rivastigmine	Exelon, Exelon Patch, Prometax, Rivastach, Nimvastid	Symptomatic treatment of mild to moderately severe Alzheimer's dementia. Symptomatic treatment of mild to moderately severe dementia in patients with idiopathic Parkinson's disease. Official UK medicine details (MHRA SPC) link
Galantamine	Razadyne, Razadyne ER, Reminyl, Reminyl XL, Nivalin, Lycoremine, Galsya	Galantamine is indicated for the symptomatic treatment of mild to moderately severe dementia of the Alzheimer type. Official UK medicine details (MHRA SPC) link
Memantine	Namenda, Namenda XR, Ebixa, Memary, Axura, Akatinol, Maruxa, Nemdatine, Namzaric*	Treatment of adult patients with moderate to severe Alzheimer's disease. Official UK medicine details (MHRA SPC) link

*Namzaric = combination of Donepezil and Memantine

** MHRA: Medicines and Healthcare products Regulatory Agency - UK medicines regulator;

SPC: Summary of Product Characteristics - detailed product information

Treatment cost

Dementia-related costs in St. Kitts and Nevis remain largely borne by patients and families, with no national estimate or dementia-specific long-term care benefit available. Public healthcare and means-tested Medical Assistance can offset some medical expenses, but families may still pay for medicines, home or residential care,

supervision, transport, and overseas treatment, alongside lost caregiver income. Proposed NHIS reforms could strengthen financial protection through defined benefits and co-payments, but has not been implemented.

No national estimate of the annual cost of dementia treatment or long-term care was identified for Saint Kitts and Nevis. While public primary care and hospital services help reduce some direct medical costs, the financial burden of dementia varies depending on disease severity, the need for long-term support, and whether services are obtained locally or overseas. Families may incur out-of-pocket expenses for prescription medicines, home-care aides, live-in caregivers, transportation, continence products, home adaptations, day supervision, respite services, private residential care, overseas specialist treatment, and the indirect cost of lost caregiver income.

For low-income residents, the Social Assistance programme includes a means-tested Medical Assistance benefit that can contribute toward the cost of medical procedures performed locally, regionally, or internationally, subject to a lifetime financial limit. While this may help offset some healthcare expenses, no dementia-specific funding mechanism or long-term care benefit was identified, and ongoing costs associated with home care, supervision, and residential care continue to fall largely on patients and their families.

The proposed National Health Insurance Scheme (NHIS) aims to strengthen financial protection by introducing defined benefit packages, graduated co-payments, case management services, and coverage for approved local and overseas care through a structured referral and pre-authorization system. The Green Paper also proposes lifetime benefit limits, preferred provider networks, and coordinated follow-up for patients receiving overseas treatment. However, these reforms remain proposals and had not been implemented at the time of writing. No dementia-specific reimbursement policy or long-term care benefit has been announced, meaning that many of the ongoing social and supportive care costs associated with dementia would likely continue to fall on patients and their families.

References

- <https://hia.paho.org/en/country-profiles/saint-kitts-and-nevis>
- <https://www.ssa.gov/policy/docs/progdsc/ssptw/2018-2019/americas/saint-kitts.htm>
- <https://www.sknis.gov.kn/wp-content/uploads/2020/09/Green-Paper-on-Universal-Health-Care-SKN.pdf>

Caregiver support

Dementia caregiving in St. Kitts and Nevis depends heavily on informal family and community support, complemented by NGO-led services. The Alzheimer's Association provides caregiver education, peer groups, training, social activities, awareness initiatives, and respite grants, while health centres, nurses, churches, and social services offer further assistance. Means-tested Medical Assistance can help eligible low-income families with medical costs. Nevertheless, no universal caregiver allowance, dedicated employment leave, guaranteed respite, comprehensive home-care programme, or formal caregiver assessment framework has been identified.

Overall, dementia caregiver support relies largely on NGO-led and community-based initiatives rather than on a comprehensive, government-funded system of dementia-specific services. The recent studies suggest that caregiving in Saint Kitts and Nevis relies heavily on informal family networks and community support, with caregivers often facing limited access to specialized services, insufficient training, and practical support.

The Alzheimer's Association of St. Kitts and Nevis is the country's principal dementia-specific organization

supporting people living with dementia and their families. The association provides caregiver support groups, educational seminars and workshops, caregiver training, meaningful social activities, and community awareness programmes. It also organizes initiatives such as the Fun Day for Caregivers, which offers caregivers an opportunity for respite, peer support, and recognition of their role. One of its most practical services is a respite grant programme, which provides financial assistance to help families access temporary care and reduce caregiver burden.

Additional support is available through community health centres, public health nurses, churches, social development programmes, and extended family networks, which continue to play a central role in caring for people with dementia. Means-tested Medical Assistance is also available through the Department of Social Services and Community, which may cover the cost of medical procedures provided locally, regionally, or internationally up to a lifetime maximum for eligible low-income residents.⁵⁶ However, no universal caregiver allowance, dementia-specific employment leave, nationally guaranteed respite services, comprehensive publicly funded home-care programme, or formal caregiver assessment system was identified.

References

- https://www.researchgate.net/publication/395083614_A_Multidimensional_Analysis_of_Caregiving_and_Disability_Management_in_St_Kitts_and_Nevis
- <https://zizonline.com/fun-morning-for-caregivers-of-persons-with-dementia/>
- <https://www.alzint.org/member/alzheimers-association-of-st-kitts-and-nevis/>
- <https://www.facebook.com/sknismedia/posts/saint-kitts-and-nevis-delivered-a-powerful-show-of-support-and-solidarity-for-pe/1376534687846757/>
- <https://www.ssa.gov/policy/docs/progdesc/ssptw/2018-2019/americas/saint-kitts.htm>
- <https://www.health.gov.kn/>

Policy

A broad policy reform agenda in St. Kitts and Nevis could improve the environment for dementia care, but substantial gaps remain. The country has no dedicated dementia strategy, Alzheimer's action plan, or comprehensive legal framework, and wider ageing, disability, health-insurance, elder-care, and digital-health initiatives have yet to establish dementia-specific standards. Important needs remain unmet across diagnosis, surveillance, treatment, care coordination, legal safeguards, and formal caregiver support. The forthcoming National Policy on Ageing, elder-care regulations, NHIS reforms, HMIS, and Nevis's WHO age-friendly initiatives offer opportunities for progress. However, stigma, cultural beliefs, geographic barriers, and limited specialised services may delay recognition and increase dependence on families and community organisations for long-term support.

National dementia plan

Rather than having a dedicated dementia strategy, St. Kitts and Nevis incorporates dementia indirectly within broader ageing, disability, health, and social-protection policies. Ongoing NHIS reforms and developing standards for elder-care institutions may strengthen the wider policy environment, but no formally adopted dementia framework with dedicated funding, measurable targets, or implementation arrangements had been identified by July 2026.

Saint Kitts and Nevis does not have a dedicated national dementia strategy or Alzheimer's disease action plan. Dementia policy is instead addressed indirectly through a range of broader health, ageing, disability, and social protection frameworks. These include the National Policy on Ageing (currently under development), the National Disability Policy 2026-2030, National Social Protection Strategy and Plan of Action and ongoing reforms toward a National Health Insurance Scheme (NHIS) and universal health coverage. The government has also begun developing regulatory standards for residential elderly-care institutions in collaboration with Windsor University School of Medicine. Although these initiatives strengthen the policy environment for older adults and persons with disabilities, no formally adopted dementia strategy with dedicated funding, measurable targets, or an implementation framework had been identified as of July 2026.

References

- <https://sknis.gov.kn/wp-content/uploads/2026/02/Budget-Address-2026-1.pdf>
- <https://www.sknvibes.com/news/newsdetails.cfm/127314>
- <https://faolex.fao.org/docs/pdf/stk148762.pdf>
- <https://www.sknis.gov.kn/wp-content/uploads/2020/09/Green-Paper-on-Universal-Health-Care-SKN.pdf>

Upcoming plans

St. Kitts and Nevis is developing several wider reforms with potential implications for dementia care. The forthcoming National Policy on Ageing could strengthen ageing in place, family support, social inclusion, and care standards, while new regulations for elder-care facilities aim to improve quality, safeguarding, staffing, and oversight. Proposed NHIS reforms could expand financial protection, referral coordination, and access to services.

Meanwhile, the Health Information Management System may improve continuity and information sharing, and Nevis's participation in the WHO age-friendly network could support more inclusive environments for older adults with dementia.

The most significant forthcoming policy development is the National Policy on Ageing, announced in the 2026 Budget Address. The policy is intended to establish a comprehensive framework for supporting an ageing population, including measures related to healthy ageing, ageing in place, health and social care, protection from abuse, social inclusion, residential care, and support for older persons and their families. Although the policy is not dementia-specific, it could become an important platform for strengthening dementia care if it includes provisions on cognitive impairment, caregiver support, early diagnosis, and quality standards for dementia services.

Another important reform concerns the regulation of residential elderly-care facilities. The Ministry of Health, in collaboration with Windsor University School of Medicine, has begun developing regulatory standards for institutions providing care to older adults. The proposed framework is expected to strengthen licensing requirements, quality assurance, safeguarding, medication management, inspection, staffing standards, and complaint procedures. Although not developed specifically for dementia care, these regulations could improve the quality and safety of services for people living with cognitive impairment. At the same time, the government continues to advance plans for Universal Health Coverage (UHC) through a National Health Insurance Scheme (NHIS). Proposed reforms include expanded financial protection, structured referral pathways, case management, and improved access to healthcare services, which could benefit people with dementia if future benefit packages explicitly include cognitive assessment, specialist care, imaging, medicines, home-based support, and long-term care.

The Federation is also investing in broader health system modernization. Ongoing implementation of a national Health Information Management System (HMIS) is intended to improve digital medical records, information sharing, and continuity of care across hospitals, community clinics, and visiting specialists.

In addition, Nevis has joined the WHO Global Network for Age-friendly Cities and Communities, supporting initiatives that promote healthy ageing, accessibility, social participation, and age-friendly environments. While neither initiative is dementia-specific, both have the potential to improve care coordination and community inclusion for older adults living with dementia.

References

- <https://sknis.gov.kn/wp-content/uploads/2026/02/Budget-Address-2026-1.pdf>
- <https://www.sknis.gov.kn/2024/06/05/st-kitts-health-services-ict-project-symbolises-governments-strategic-step-towards-modernising-health-services-through-digitisation/>
- <https://www.paho.org/en/publications/barbados-and-eastern-caribbean-countries-country-annual-report-2025>

Policy gaps

Legal barriers

St. Kitts and Nevis has significant gaps in dementia-specific policy and legislation despite broader reforms for older adults and healthcare. No national dementia plan, standardised diagnostic pathway, registry, clinical guidance, care coordination framework, or treatment policy has been identified. Legal and support provisions for decision-making, caregiver rights, respite, and dementia-trained home care are also limited.

Saint Kitts and Nevis does not have a dedicated national dementia strategy or a comprehensive legal framework governing dementia care. Although broader initiatives, including the proposed National Policy on Ageing, the National Disability Policy 2026–2030, the proposed National Health Insurance Scheme (NHIS), and regulations for elderly-care institutions, are expected to strengthen services for older adults, they do not yet establish dementia-specific standards. As of July 2026, no national dementia plan, standardized diagnostic pathway, memory clinic network, dementia registry, prevalence surveillance system, published clinical guidelines, waiting-time targets, biomarker pathway, policy for disease-modifying therapies, or dedicated dementia care coordination system had been identified. Similarly, no publicly documented dementia-specific framework was found for capacity assessment, supported decision-making, guardianship, driving fitness, advance care planning, caregiver rights, or universal access to respite and dementia-trained home-care services.

References

- <https://sknis.gov.kn/wp-content/uploads/2026/02/Budget-Address-2026-1.pdf>
- <https://www.skni.gov.kn/wp-content/uploads/2020/09/Green-Paper-on-Universal-Health-Care-SKN.pdf>

Cultural barriers

Improving mental-health awareness has not eliminated stigma in St. Kitts and Nevis, and related misconceptions may contribute to delayed dementia recognition and help-seeking. Cultural beliefs, social stigma, geographic barriers, and limited specialist services can compound these challenges. Informal family networks remain central to dementia care, while gaps in caregiver training and formal support place substantial responsibility on families and community organisations.

Public awareness of dementia and mental health continues to evolve in Saint Kitts and Nevis, but stigma remains an important barrier to timely recognition and care. PAHO report notes that mental illness has historically been associated with derogatory labels such as “crazy,” “loonies,” “not right in the head,” or beliefs that affected individuals are “possessed,” although public attitudes are gradually improving. While these observations relate to mental health more broadly rather than dementia specifically, similar misconceptions may contribute to delayed recognition of cognitive decline, discourage families from seeking assessment, and increase the social isolation of people living with dementia. Emerging qualitative research further suggests that caregiving in Saint Kitts and Nevis is characterized by an overreliance on informal family networks, limited access to specialized services, insufficient caregiver training, and the influence of cultural beliefs, social stigma, and geographic barriers on long-term care. Together, these factors place much of the responsibility for supporting people living with dementia on families and community organizations rather than on formal dementia-specific services.

Research

St. Kitts and Nevis has a relatively diverse health-education base, with several medical universities, colleges, and international programmes supporting healthcare training. However, no active interventional clinical trials for Alzheimer's disease or dementia were identified in major international registries. Health-system digitalisation is more advanced, with the NDHIS connecting the main hospital and community facilities, alongside electronic hospital records, prescribing, and patient-identification systems. These technologies provide a foundation for improved continuity of dementia care, including longitudinal monitoring, referral coordination, medication management, and future telemedicine access to overseas specialists.

Selected academic institutions

[Windsor University School of Medicine](#) [University of Medicine and Health Sciences](#) [Medical University of the Americas](#) [International University of the Health Sciences](#) [Clarence Fitzroy Bryant College](#) [UWI Global Campus](#)

Clinical trials and registries

No Alzheimer's disease or dementia interventional clinical trial with a confirmed active study site in Saint Kitts and Nevis was identified in major international trial registries.

Selected innovative methods

Recent digital-health investments have created an important foundation for more integrated dementia care in St. Kitts and Nevis. The NDHIS, launched in 2024, links the main hospital with community facilities and aims to improve information sharing, clinical decision-making, and continuity of care. Earlier hospital digitisation introduced electronic patient records, prescribing, pharmacy management, and standardised identification procedures. These systems could enable better longitudinal monitoring of people with dementia, referral and medication tracking, and coordination across providers, while supporting future telemedicine connections with visiting and overseas specialists.

One of the most important health system innovations in Saint Kitts and Nevis is the implementation of the National Digital Health Information System (NDHIS) through the St. Kitts Health Services ICT Project. Funded by the Universal Service Fund (USF) of the National Telecommunications Regulatory Commission (NTRC), the project established a wide area network (WAN) connecting Joseph N. France General Hospital with 16 community clinics and health facilities across Saint Kitts. Officially launched in June 2024, the initiative aims to provide universal access to digital health services, improve the availability of patient information, and strengthen communication between healthcare providers. According to the Ministry of Health, the system is intended to support earlier access to clinical information, more efficient diagnosis, improved treatment decisions, and better continuity of care. For dementia, the NDHIS provides an important foundation for electronic health records, longitudinal monitoring, referral tracking, medication management, and future telemedicine links with visiting or overseas specialists, potentially improving access to specialist expertise in a small island setting.

The government also established Hospital Information System (HIS) at Joseph N. France General Hospital, developed with support from the Government of Taiwan. The system introduced electronic patient records, electronic prescribing, pharmacy and inventory management, barcode-based patient identification, and standardized operating procedures. It was designed to improve access to patient information across public health facilities, reduce administrative errors, and enhance the efficiency and quality of healthcare delivery. The introduction of a national patient medical information card further strengthened continuity of care by allowing patient records to be accessed more easily across the public health system, creating an important foundation for the later development of the National Digital Health Information System (NDHIS).

References

- <https://www.sknis.gov.kn/2017/02/01/health-information-system-at-jnf-hospital-is-progressing-says-minister-byron/>
- <https://sknhealth.online/> <https://www.thestkittsnevisobserver.com/st-kitts-health-services-ict-project-symbolises-governments-strategic-step-towards-modernising-health-services-through-digitisation/>
- <https://www.sknis.gov.kn/2017/02/01/health-information-system-at-jnf-hospital-is-progressing-says-minister-byron/>

Support

Community and institutional support for dementia in St. Kitts and Nevis is provided through a combination of government programmes, NGOs, and specialist and community organisations. The Alzheimer's Association plays the central dementia-specific role, offering caregiver education, peer support, training, respite grants, awareness campaigns, and activities for affected families. Government-led initiatives such as the Month of Older Persons promote healthy ageing, dignity, participation, and social inclusion, while broader health programmes support prevention and awareness of cognitive decline. CARE, Onsite Angels, and the St. Kitts Mental Health Association contribute to the wider support network. Local media and government channels provide public information, complemented by PAHO and Alzheimer's Disease International resources. Overall, awareness and community engagement are developing, but access to specialised dementia services remains limited.

Organizations are listed for informational purposes based on publicly available sources. Inclusion does not necessarily indicate affiliation with or endorsement by Alzheimer's Disease International (ADI).

Selected national associations, patient family associations, NGOs:

[Alzheimer's Association of St Kitts and Nevis](#) [St Kitts Mental Health Association](#)

Selected initiatives

Awareness and community engagement in St. Kitts and Nevis are driven by government ageing programmes, the Alzheimer's Association, NGOs, and public-health initiatives. The Month of Older Persons promotes dignity, healthy ageing, social inclusion, and intergenerational participation, while the Alzheimer's Association provides dementia education, caregiver training, support groups, respite grants, and awareness events. A 2023 campaign strengthened local capacity by training 75 professionals, frontline workers, civil servants, and caregivers. Broader health-promotion activities address brain health and dementia risk factors, while local media and regional organisations provide additional information. These initiatives support earlier recognition and community inclusion, although dementia-specific services and awareness activities remain limited.

Month of Older Persons

Each October, Saint Kitts and Nevis observes the Month of Older Persons, aligning with the United Nations' International Day of Older Persons on 1 October. Coordinated by the Ministry of Youth Empowerment, Ageing and Disabilities, the month-long programme promotes healthy ageing, dignity, and social inclusion through a variety of island-wide events. Activities include a Seniors' March, sports and recreation days, church services, intergenerational art and cultural activities involving schoolchildren, community consultations with older adults, and the annual Seniors' Prom. These initiatives encourage active ageing, strengthen intergenerational connections, raise awareness of the needs and contributions of older people, and foster a more age-friendly society, although they are not dementia-specific.

Fun Day for Caregivers

The Alzheimer's Association of St. Kitts and Nevis continues to lead most dementia-specific initiatives in the Federation. In addition to providing ongoing caregiver support groups, caregiver training, educational seminars, and respite grants, the Association has organized public awareness campaigns, memory-support activities, and community events such as its Fun Day for Caregivers, recognizing the contribution of family caregivers while promoting respite and peer support. Through advocacy and education, the Association has also worked to increase public understanding of dementia and encourage earlier recognition and diagnosis.

Ageing with Dignity

In October 2024, the Ministry of Youth Empowerment, Ageing and Disabilities marked the International Day of Older Persons with a month-long programme promoting the theme "Ageing with Dignity

The Importance of Strengthening Care and Support Systems for Older Persons Worldwide." Activities included community church services, sports and recreation events, an intergenerational seniors' march, creative workshops involving older adults and schoolchildren, and the second annual Senior's Prom. The programme also incorporated public consultations with older persons on crime, violence, and community safety as part of the national 90-Day Campaign on Violence and Crime, reflecting the government's broader commitment to healthy ageing, social inclusion, and engagement of older adults in public life.

Dementia Awareness Training

During Alzheimer's Awareness Month 2023, the White & Yellow Cross Care Foundation, the Ministry of Public Health, Social Development and Labor (VSA), and the Henry Ostiana Foundation implemented a month-long awareness campaign aimed at improving public understanding of dementia. Activities included Dementia Awareness Training delivered by specialists from the Netherlands to 75 healthcare professionals, frontline workers, civil servants, and informal caregivers, alongside island-wide public awareness campaigns, educational billboards, and online outreach. The programme also featured a fundraising event for World Alzheimer's Day, including expert lectures by specialists from Sint Maarten Medical Center, and a Family Fun Day for people living with dementia and their caregivers, promoting social inclusion, caregiver support, and dementia-friendly community engagement.

Psychogeriatric day care

The White and Yellow Cross Care Foundation's Psychogeriatric Day Care is the most developed dementia-specific service innovation in Sint Maarten. Rather than focusing solely on institutional care, the programme combines structured daytime supervision, therapeutic and recreational activities, rehabilitation, nursing support, and functional monitoring for people living with dementia and other cognitive disorders. This integrated model helps maintain daily functioning, promotes social engagement, monitors behavioural and cognitive changes, provides respite for family caregivers, and may delay the need for permanent residential placement by enabling people to remain in their own homes for longer.

Community prevention and health promotion

The Collective Prevention Services (CPS) has incorporated dementia into broader healthy ageing initiatives through campaigns promoting brain health, physical activity, healthy nutrition, cardiovascular risk reduction, and recognition of memory problems. Regular observance of World Alzheimer's Month and the International Day of Older Persons helps raise public awareness and encourages earlier recognition of cognitive decline in a setting where specialist dementia services remain limited.

Project HELP

Project HELP, a collaboration between the Ministry of Public Health and the American University of the Caribbean School of Medicine, delivers community health education, screening, and outreach activities across the island. Although not dementia-specific, the programme demonstrates a community-based prevention model that could be expanded to include cognitive screening, dementia risk assessment, caregiver education, and earlier referral of individuals with suspected cognitive impairment.

References

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- <https://zizonline.com/fun-morning-for-caregivers-of-persons-with-dementia/>
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Dedicated media outlets

The Alzheimer's Association of St. Kitts and Nevis is the principal source of dementia-specific information, using its Facebook page, public awareness campaigns, educational events, and caregiver activities to promote understanding of dementia and support affected families. More general health and ageing information is disseminated through the St. Kitts and Nevis Information Service (SKNIS), ZIZ Broadcasting Corporation, The St. Kitts-Nevis Observer, WINN FM, SKN Newslane, and local radio and television programmes featuring healthcare professionals and NGO representatives. Residents also have access to regional and international dementia resources through the Pan American Health Organization (PAHO) and Alzheimer's Disease International (ADI).