A Convergence Study of Korean Adults' Awareness and Attitudes toward Dementia

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한국 성인의 치매에 대한 인식과 태도에 관한 융합연구

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Abstract This study was undertaken to identify the level of the awareness and attitudes toward dementia in Korean adults. The data were collected from January 23 to April 30, 2016, with 95 adults visit to Senior Experience Complex located in Seongnam city in Korea, using self-reported questionnaires. The descriptive statistical data were analyzed using the Pearson correlation coefficient by SPSS 18.0. In this study, the mean scores of the level of the awareness and attitudes of dementia in Korean adults were showed over the neutral range, 12.97 ± 1.55 , 4.13 ± 0.48 respectively. A significant differences between general characteristics and attitudes of dementia in Korean adults were showed a significant positive relationship between the awareness and attitudes of dementia (r=0.773, p<.001). The findings of this study are to be a baseline data to develop the empowerment public program related in dementia.

• Key Words : Awareness, Attitude, Dementia, Senior Simulation Program, Adults

요 약 본 연구는 한국 성인들의 치매에 대한 인식과 태도 정도를 확인하기 위해 시도되었다. 연구대상은 성남에 위치한 노인체험센터에 방문한 한국성인 95명이었고, 2016년 1월 23일에서 4월 30일까지 자가 설문지를 통해 자료 를 수집하였다. 수집된 자료는 SPSS18.0 프로그램을 이용하여 상관관계를 분석하였으며, 연구결과로는 치매에 대한 한국 성인들의 인식과 태도의 평균점수는 각각 12.97±1.55, 4.13±0.48이었고, 치매에 대한 인식과 태도의 상관관 계는 (r=0.773, *p*<.001) 통계적으로 유의하였다. 이상의 연구결과를 토대로 향후 치매와 관련된 인식과 태도를 향 상시키기 위한 프로그램이 개발되기를 기대한다.

• Key Words : 인식, 태도, 치매, 노인유사체험, 성인

1. Introduction

the prolonged average life span of human beings brought a serious social problem, an increase in older

The rapid increase of population aging according to

Revised September 2, 2017 Published September 28, 2017 people in dementia[1]. Currently, dementia is a major health problem worldwide as it is estimated to be 35.6 million in people living with dementia globally and expected to be double increase by 2030 and triple by 2050[2]. Dementia has a challenge all of us, facing a considerable human being issue. Above all, the problem of dementia cannot be solved by an access in individual level or in family level any more[3]. It can be solved by the access in the district and national level, such as systematic and political intervention[4].

Dementia is defined a chronic degenerative brain damage and a deterioration of cognitive area which is diagnosed by memory defects[5]. Not only with the brain damage from a aging but also with the additional symptoms, like a confusion, disorientation, agitation and frustration, loss of memory and language skills, personality changes[6,7]. These conditions make them involuntary action, independent daily life, decreased capacities of communication skill, interpersonal-social relationship[8]. Patients living with dementia want to take care of themselves a professional medical intervention, safe environments to prevent a emergency situation, spending a high quality of the remained life. The elderly with dementia was transferred to nursing home or day and night care center for health monitoring and psychiatric services[9,10]. Major treatment to dementia can be divided into two ways, drug or non-drug[11]. Currently, in occupational therapy, cognitive intervention and physical therapy are suggested mainly to improve symptoms[12,13].

Nowadays, the challenge of the health education toward dementia has grown as a national destination gradually. It was worrisome that living longer contributes to be diagnosed dementia to everyone. Of course, It was the main factor that lead family members to recognize toward dementia[14]. In trying to overcome the anxiety of dementia, it is necessary to provide the health education toward dementia for prevention, intervention, a positive attitudes[15,16,17]. In Priority, it is helpful to educate them in clinical information for improving people's awareness of dementia. Therefore, this study aims are to investigate the awareness and attitudes toward dementia in Korean adults and to be a baseline data for developing basic materials for prevention and promotion policy toward dementia.

2. Materials and Methods

2.1 study design

This study was designed as a descriptive research to identify the level of the awareness and attitudes toward dementia, the relationship between the awareness and attitudes in Korea adults.

2.2 Sample and Data analysis

This study participants were selected through a random sampling method from adults who visit to Seongnam Senior Experience Complex. The data were collected from January 23 to April 30, 2016 and the subjects were 95 adults. The SPSS program 18.0 was used to analyze the data. Descriptive statistics were used to identify the general characteristics of the participants, the level of the awareness and attitudes. The Pearson correlation coefficient was used to determine the relationship between the awareness and attitudes toward dementia

2.3 Measures

2.3.1 Awareness of Dementia

The levels of Korean Adults' awareness of dementia were measured through Dementia Knowledge Scale[18]. This instrument consists of 17 items with true or false responses that they are divided into the following four subcategories: 5 items for the course of dementia, 5 items for the symptom of dementia, 3 items for the treatment and prevention of dementia and 4 items for the epidemiology of dementia. Indicating correct responses were scored 1 point, incorrect responses were scored 0 point. Hence, the total number of marks in the knowledge section ranged from 0 to 17, with a higher score indicating a higher level of correct knowledge about dementia. The Cronbach's alpha in this study was .71.

2.3.2 Attitude of Dementia

The levels of Korean Adults' attitude of dementia were measured through Dementia Attitudes Scale developed by McManusand Devine[19]. This instrument consists of 7 items with 5-point Likert scale that ranged from 5point means 'strongly disagree' to 1pont means 'strongly agree' to reveal Korean Adults' attitudes toward dementia. The total possible scores for this scale range from 7 to 35 with a higher score indicating a more positive attitude. The Cronbach's alpha in this study was .74.

3. Results

3.1 General Characteristics of participants

The mean age of the participants was 32.82±11.63 years old. The proportion of men was 29.5 percent, 91.5 percent are college graduated, 65.3 percent are married, 50.5 percent have a religion, 17.9 percent of adults lived with grandparents, 16.8 percent experienced dementia family, 9.5 percent of adults open dementia family anyone as shown in <Table 1>.

<Table 1> General Characteristics o Participant

		(n=95)
Variables	n	%
Age(yr)		
20<39	66	69.5
40~60	29	30.5
Gender		
Male	28	29.5
Female	67	70.5
Education		
High schoolgraduate	8	8.5
College graduate	86	91.5
Marriage		
Married	62	65.3
Unmarried	33	34.7
Religion		
Yes	48	50.5
No	47	49.5

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Lived with grandparents			
	Yes	17	17.9
	No	78	82.1
Having the family			
history of dementia			
·····, ····	Yes	16	16.8
	No	79	83.2
Experience of caring			
for dementia patients			
	Yes	9	9.5
	No	-	
	INU	86	90.5
Disclose anyone in			
the family suffering			
from dementia			
	Yes	87	91.6
	No	8	8.4
			0.4

3.2 Awareness of Dementia

Results were shown the mean score of correct responses on the awareness toward dementia in Korean adults was 12.97 in $0 \sim 17$ points as shown in table 2. The highest percent item of correct responses was "Regular exercise can prevent a person from getting dementia." and this item was related in treatment and prevention of dementia subcategories. The lowest percent item of correct responses was" The old man 100, about one in every one of the dementia." and this item was related in the epidemiology of dementia.

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<Table 2> Knowledge of the Elderly

		(n=95)
Variables	n	%
Dementia is a normal part of aging	89	93.7
Dementia is a disease of brain	86	90.5
Dementia is caused by CVA	85	89.5
Dementia is related to drinking	86	90.5
Dementia is related to genetic factors	63	71.6
Dementia is mental disorder	46	48.4
If a person remembers thing that happened in the past, it is not regarded as dementia	82	86.3
Dementia can change personalities	90	94.7
Depression can be accompanied by dementia		83.2
Dementia diagnosed by blood hematology		65.3
Dementia cannot be cured	44	46.3
Early treatment of dementia helpful to process	93	97.9
Regular exercise can prevent a person from getting dementia	95	100.0
Dementia is aging process	53	55.8
Woman is more susceptible to dementia than man	67	70.5
The old man 100, about one in every one of the dementia	38	40.0
People with dementia to register as disabled	69	72.6
Total awareness score(Mean±SD)	12.97	′±1.55

3.3 Attitude of Dementia

The result of the Korean adult's attitude toward dementia was showed that the mean score was 4.13 in 0°5 points as shown in table 3. This result is consistent with these findings of Park et al.[20] and Kim et al.[21]. The highest mean score item was 4.40. "If someone of my family gets dementia, I want to hide the fact.", and the lowest mean score item was 3.68, " What we can do for people with dementia is only hygiene, safety, health maintenance.".

<table 3=""></table>	Attitude	toward	the	Elderl	у
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Variables	Mean±SD
What we can do for people with dementia is only hygiene, safety, health maintenance.	3.68±0.93
Other people too many decisions for people with dementia	3.94±0.88
The people who diagnosed with dementia is no longer be treated as human beings to be able to think	4.32±0.68
Severe dementia patients are felt as invalid existence	4.17±0.85
If someone of my family gets dementia, I want to hide the fact	4.40±0.68
A person diagnosed dementia that it was impossible to decide for his or her care	4.07±0.79
Dementia patients can not able to communicate with others	4.36±0.70
Total attitude score	4.13±0.48

3.4 Comparison Correlation between general characteristics and Awareness, attitudes of dementia

First, when the attitudes of dementia in general characteristics were analyzed, the findings were significant correlation with living with grandparents, having the family-history of dementia and the awareness of dementia was not a significant correlation in general characteristics as shown in <Table 4>.

<table< th=""><th>4></th><th>Comparison</th><th>Corre</th><th>elation</th><th>betw</th><th>reen</th><th>gene</th><th>ral</th></table<>	4>	Comparison	Corre	elation	betw	reen	gene	ral
		characteristics	and	Aware	ness,	attit	udes	of
		dementia						

a.	Emenua		
varia	ables	Awareness Mean±SD	Attitudes Mean±SD
Age(yr)	20<39 40~60 t(p)	13.02 12.86 0.43(0.338)	4.17 1.01 1.45(0.153)
Gender	Male Female t(p)	12.71 13.07 -1.10(0.275)	4.03 4.16 1.22(0.226)
Education (graduated)	High school College t(p)	12.75 12.98 -0.47(0.621)	3.86 4.15 1.56(0.155)
Marriage	Married Unmarried t(p)	12.82 13.05 -0.64(0.523)	4.04 4.17 1.11(0.270)
Religion	Yes No t(p)	13.13 12.81 1.00(0.320)	4.12 4.12 0.01(0.997)
Lived with grandparents	Yes No t(p)	13.12 12.94 0.54(0.594)	3.85 4.18 -2.57(0.012)**
Having the family-history of dementia	Yes No t(p)	13.00 12.96 0.08(0.934)	4.34 4.08 2.24(0.034)*
Experience of caring for dementia patients	Yes No t(p)	12.89 12.98 -0.19(0.851)	4.48 4.08 2.63(0.024)*
Disclose anyone in the family suffering from dementia	Yes No t(p)	13.02 12.38 1.23(0.250)	4.12 4.12 -0.02(0.983)

*p <.05, **p<.01

3.5 Correlation of the Awareness, attitudes of dementia

There is a significant correlation between the awareness and attitudes of dementia(r=.773, P<.001) as shown in table 5. It means the Korean adults have the higher awareness of dementia, they have the more positive attitudes.

<Table 5> Correlation of awareness and attitude of dementia

Variables	Attitude r(<i>p</i>)
Awareness	0.773(0.000)***

***/~.001

4. Conclusion

This study was designed as a descriptive research to identify the level of the awareness and attitudes toward dementia, the relationship between the awareness and attitudes in Korea adults.

Summarize the key results in regular orders, first, the mean score of correct responses on the awareness toward dementia in Korean adults was over a neutral range. Closely analyzing this tool's items, Korean adults recognize a importance of the regular exercise to prevent from getting dementia. On the other hand, they have few knowledge about the treatment and prevention of dementia. The government should be responsible for the health education toward dementia systematically.

Second, the result of the level of Korean adult's attitudes was identified that they had a wrong recognition and information about dementia. Analyzing the highest score item of attitudes of dementia, Korean adults want to hide the fact of getting dementia. It means they have a negative attitudes of dementia as a degree of awareness. Also, If anyone in the family suffers from dementia, a negative attitude of dementia makes more difficulty relationships with a patient. It is clear that Korean adults have the higher awareness toward dementia, they have the more positive attitudes as this study results. It is emphasized that the local community should process the health educational program toward dementia widely, in the same way as before.

Third, there is a significant correlation between the awareness and attitudes of dementia. The results suggest that it is necessary to develop a concrete, appropriate, and standardized social health program for getting the knowledge and attitudes toward dementia.

Furthermore, It is suggested that developing of the family health program toward dementia will encourage and give a hope to all of aging people in this period.

REFERENCES

- [1] Ministry of Health and Welfare, "2012 Prevalence rate of Dementia among the South Korean Population:, retrieved April 30, 2015, from http://www.mw.go.kr/front_new/al/sal0301vw.jsp? PAR_MENU_ID=0403&CONT_SEQ=286138&page=2
- [2] World Health Organization. Dementia: a public health priority. Geneva:2012. http://whqlibodoc. who.int/publication/2012/9789241564458-eng.pdf.
- [3] M. K. Lee, E. K. Kim, "Relationship between resource utilization and long-term care classification level for residents in nursing homes", Journal of Korean Academic Nursing, Vol. 4, No, 6, pp. 903–912, 2010.
- [4] S. H. Kim, O. H. Ahn, D. H. Park, "Nursing Students and Social Welfare Students' Knowledge and Attitudes toward Dementia", Journal of the Korea Convergence Society, Vol. 6, No, 3, pp. 111–117, 2015.
- [5] J. Keightley, A, Mitchell, "What factors influence mental health professionals when deciding whether or not to share a diagnosis of dementia with the person?" Aging and Mental Health, Vol. 8, No, 1, pp. 13–20, 2004.
- [6] Greve & O'Connor, A survey of Australian and New Zealand old age psychiatrists' preferred medications to treat behavioral and psychological symptoms of dementia (BPSD), International Psychogeriatrics, Vol. 17, No, 2, Available at: https://doi.org/10.1017/S1041610205001481, 2005.
- [7] Ono, T., Tamai, A., Takeuchi, D., Tamai, Y., Hasegawa, Y., "Longitudinal study of the cognitive, behavioral and physical status of day care service uses with dementia: Factors associated with long-term day care use", Geriatrics & Gerontology International, Vol. 4, pp. 138–145. 2014.
- [8] J. Agnes, "Encouraging positive interactions in dementia care", British Journal of Nursing, Vol. 25, No. 21. pp. 2–3, 2016.
- [9] C. Yan., F. Rong, M. Yue, J. K. Aeron, D. K. Ala,

P. B. Franklin, M. P. Jian, "A Changing healthcare system model: The effectiveness of knowledge, attitude, and skill of nursing assistants who attend senile dementia patients in nursing homes", The Ochsner Journal, Vol. 14, pp. 328–334, 2014.

- [10] J. A. Song, J. W. Park, H. J. Kim, "Impact of behavioral and psychological symptoms of dementia on caregiver burden in nursing homes", Journal of Korean Gerontological Nursing, Vol. 15, No. 1, pp. 62–74, 2013.
- [11] D. R. Kim, "An Integrate Review of Non-pharmacological Intervention in Elderly Patients with Mild Cognitive Impairment", Journal of the Korea Convergence Society, Vol. 8, No. 5, pp. 243–253, 2017.
- [12] Viola, I., F., Nunes, P. V., Yassuda, M. S., "Effects of a multidisciplinary cognitive rehabilitation program for patients with mild Alzheimer's disease, Clinics", Vol. 66, pp. 1395–1400, 2011.
- [13] Y. W. Song, J. S. Lee, A. Y. Song, "Meta-analysis about cognitive intervention effect applied to dementia patients, Neuro-Rehabilitation", Vol. 39, pp. 319–327, 2016.
- [14] Jean, B, Kathleen, M, "Challenges that specialist palliative care nurses encounter when caring for patients with advanced dementia", International Journal of Palliative Nursing, Vol. 17, No. 12, pp. 587–591, 2011.
- [15] Y. J. Jang, "A Comparative Study on the Factors that Determine the Attitude Toward Dementia in Korea and Japan: Focusing on the Care Workers Who Work in Nursing Homes", Journal of the Korean Gerontological Society, Vol. 34, No. 2, pp. 333–348, 2014.
- [16] M. R. Lee, "The Relationship among Dementia care Knowledge, Attitudes toward to dementia and Approach to dementia care of Nurses", Journal of Digital Convergence, Vol. 14, No. 12, pp. 357–367, 2016.
- [17] J. Y. Cho, "Analysis of Knowledge, Attitude, and Educational Needs toward Dementia in University Student", Journal of Digital Convergence, Vol. 14,

No. 12, pp. 257-265, 2016.

- [18] M. I. Jo, "The prevalence and risk factors of dementia in the Korean elderly"., Health and Welfare policy forum, pp. 43–48, 2009.
- [19] M. McManus, P. Devine, "Dementia: public knowledge and attitude", Research Update, 77, 2011.
- [20] S. J. Park, K. S. Park, Y. G. Kim, "The Effects of Geriatric Nursing Education for Nursing Students' Attitude, Perception toward Dementia and Dementia Policy", Journal of the Korea Academia-Industrial cooperation Society. Vol. 16, No. 7, pp. 4467–4477, 2015.
- [21] S. H. Kim, C. H. Ahn, D. H. Park, "Nursing Students and Social Welfare Students's Knowledge and Attitude toward Dementia", The Journal of the Korea Convergence Society, Vol, 6, No. 3, pp. 111–117, 2015. http://dx.doi.org/10.15207/JKCS.2015.6.3.111

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