Open Dementia Programme Printable Notes

Module 2: Living with dementia

Learning aims

On completion of this module you will be able to describe:
- key aspects of the personal experiences of people with dementia
- the importance of recognising the individuality of people with dementia and their unique strengths, preferences and needs
- how a person’s life history impacts on how they interact with the world around them today
- the impact of dementia on family and friendship networks
- key aspects of the personal experiences of carers of people with dementia.

Estimated time required: 20 to 30 minutes

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Section 1: Introduction

Hello, and welcome to ‘Living with dementia’, the second module of this programme.

The starting point for positive intervention and support is an understanding of the lived experience of the person with dementia; a recognition of the person’s strengths and abilities, and an understanding that the person with dementia is still a unique individual with his or her own preferences, needs and life story.

In this module we will use real-life testimony to look at this lived experience and also the experiences of those who are closest to the person with dementia.
Section 2: ‘Do you know who I am?’

In this section you will:
- learn that the effects of dementia are not visible from the outside, so people’s symptoms and needs can be easily misunderstood
- question the popular image of someone with dementia as very old, dishevelled, disorientated and distressed
- realise that dementia does not strip people of who they are or their achievements.

The starting point for positive intervention and support is:
- an understanding of the experience of each individual with dementia
- a recognition of the person’s strengths and abilities
- an understanding that the person with dementia is still a unique individual with his or her own preferences, needs and life story.

In this module we will hear some real-life testimony from people with dementia and their family members.

As we learned in the previous module, dementia involves permanent and progressive damage to the brain. But because this damage is not visible from the outside, a person’s actions and needs can be easily misunderstood.

We may, for example, assume that a person will know who we are because we met them yesterday. But short-term memory loss and facial recognition problems, resulting from the damage to the brain, might make it impossible for the person to remember us, and so we will need to introduce ourselves again.

Life becomes more of a struggle for people living with dementia and we need to understand that people are doing their best to function, even though their capacities are limited. It is important to try to support people in coping with the effects of their ‘invisible disability’.

‘Try to understand how hard it is for us – it’s just that you can’t see the missing bits that we are having to cope without.’
Christine Bryden (2006)
Identifying dementia

You may have seen images of people with dementia looking dishevelled, disorientated and distressed. But in reality, people with dementia look just like people without dementia. See whether you are successful in ‘spotting’ the five people with dementia from the 12 character outlines below.

1. Name: Grace (age 61)
   Current/previous occupation: District nurse
   ‘Hello, my name is Grace. I am a district nurse. I’m looking forward to my retirement and will be moving back to St Lucia.’
   I do have dementia   or   I don’t have dementia

2. Name: John (age 66)
   Current/previous occupation: Entertainer
   ‘Hello, my name is John. I had to give up my work as a singer. I now enjoy relaxing at home with my dog, and I have friends all over the world.’
   I do have dementia   or   I don’t have dementia

3. Name: Abram (age 83)
   Current/previous occupation: Doctor
   ‘Hello, my name is Abram. I am a retired consultant obstetrician. I now spend much of my time in the USA visiting my two daughters and their families.’
   I do have dementia   or   I don’t have dementia

4. Name: Nancy (age 75)
   Current/previous occupation: Shop assistant
   ‘Hello, my name is Nancy. I still help out from time to time in the deli where I used to work full time. I have six cats and love them as if they were my children.’
   I do have dementia   or   I don’t have dementia

5. Name: Jeff (age 75)
   Current/previous occupation: Cobbler
   ‘Hello, my name is Jeff. I was a cobbler. I love big band music and play the organ and keyboards.’
   I do have dementia   or   I don’t have dementia

Please note: any word in blue can be found in the accompanying glossary.
### 6. Name: Rose (age 90)
Current/previous occupation: Fashion artist
‘Hello, my name is Rose. As well as my interest in fashion, for many years I have been an active political campaigner.’

| I do have dementia | or | I don’t have dementia |

### 7. Name: Philip (age 79)
Current/previous occupation: Hoffman Presser
‘Hello, my name is Philip. My passion was athletics and cricket, which I played to a high standard in my native Grenada.’

| I do have dementia | or | I don’t have dementia |

### 8. Name: May (age 100)
Current/previous occupation: Sculptor
‘Hello, my name is May. I still sculpt, though have not had an exhibition for a number of years. My pieces have been sold all over the world. I don’t get out much now, but still live independently.’

| I do have dementia | or | I don’t have dementia |

### 9. Name: Chandrika (age 79)
Current / previous occupation: Carer
‘Hello, my name is Chandrika. I care for my husband who has multiple sclerosis. I am very proud of my two sons – one is a lawyer and the other is an engineer.’

| I do have dementia | or | I don’t have dementia |

### 10. Name: David (age 62)
Current/previous occupation: Close combat instructor
‘Hello, my name is David. I had a career in the Royal Canadian Air Force and am fascinated by all things military.’

| I do have dementia | or | I don’t have dementia |

### 11. Name: Demetrios (age 64)
Current/previous occupation: Plumber
‘Hello, my name is Demetrios. I am a plumber. I have a passion for vintage cars and am currently refurbishing a 1952 Jaguar XK 120 Roadster.’

| I do have dementia | or | I don’t have dementia |

Please note: any word in blue can be found in the accompanying glossary.
12. Name: Anne (age 85)
Current/previous occupation: Boat maintenance worker
‘Hello my name is Anne. I used to work for the Thames River Police. I live on my own but really feel part of my community. I am a real ‘goer-outer’.’

I do have dementia       or       I don’t have dementia

Now go to the next page to find out who does have dementia.
Were you able to spot the people with dementia?

Of the people you met above, these five do have dementia:

2. John
6. Rose
7. Phillip
10. David
12. Ann

Over to you!

1. How difficult was it for you to identify the five people with dementia?
2. Take some time now to reflect on why you made the selections you did.
3. What was it that influenced your choice?
4. What conclusions about people with dementia can you draw from this exercise?
5. How might you use this in the future?

Dementia does not strip people of who they are.

As we come to the end of this section, remember the phrase, ‘I’m still me’.

The singer is still an entertainer even if he no longer performs on stage. His belief in the value of entertainment and his achievements as a singer have got him where he is today, and they cannot be taken away from him.

‘There’s a time there where I will forget everybody’s name, but inside I’m still here. I’m still me.’
Charles Jackson (2007)

When you are ready, move on to the next section where we shall look in more depth at the importance of knowing somebody’s life story.
Section 3: Understanding a person with dementia

In this section you will:
- learn how getting to know the background and life history of a person with dementia can really help in understanding their perspective and needs.

Getting to know the background of a person with dementia can really help in understanding their perspective and needs.

Knowing personal history, meeting needs

Read the three accounts that follow: they show how an understanding of the person’s history was key to meeting their individual needs. For each story you can also read some key learning points.

Frank’s story, as told by a neighbour

‘Frank would spend most days walking around the neighbourhood. He would often tell our kids off when he saw them playing in the street. When they laughed at him he would get very angry and threaten to call us parents. Then we found out he used to be a police sergeant. We all started greeting him with ‘Hello, Sarge’, whenever we met him on his ‘beat’. This really worked! He responded keenly to being called Sarge by everyone and engaged much more with those people who treated him with the respect that he expected as a figure of authority in the community.’

Learning point
It is vital to understand how a person sees themselves. When we find out about a person’s occupation we may gain insight into their way of engaging with the world around them. Knowing the person’s background may also help us to meet their needs – in Frank’s case, the need was respect for his status. Being called ‘Sarge’ gave him back his place in the world.

Barry’s story, as told by a member of the care home staff team

‘Barry used to choose to sit in the wide corridor in his care home. But often when people walked past he would shout at them and become anxious and upset. We didn’t understand why, until we discovered that during his active service in the war he had responsibility for guiding his troops through heavily land-mined areas. We realised that his shouting was his attempt to keep us safe. When we listened carefully he was trying to give us directions. (continues over)
'So we followed his directions and let ourselves be guided by him to find a safe passage down the corridor. When we reached the end of the corridor we’d turn back and thank him. It didn't take us any longer to get down the corridor, but now each time we did so, Barry felt a sense of pride and achievement.'

*Learning point*
A person’s unique skills and achievements have helped make them who they are. Staff helped to bring meaning and importance back to Barry’s life. They helped him feel useful – indeed, a life saver. He regained his self-esteem and was no longer anxious.

**Rose’s story, as told by Rose and her daughter**

Rose: ‘This is my children and a neighbours child outside the Nissan hut where we lived. The back. We had a nice big garden at the back where the children could play and I could grow flowers. Which was quite rare in those days.’

Rose’s daughter: ‘My mother has lots of interesting memories. She can remember lots of things that happened during the war. She even talked about going to see Glen Miller play because she and her sister used to like going to American airbases at that time. She remembers living in the Nissan huts that were built for the homeless by Italian prisoners of war at the time. She can talk about lots of these things if she is stimulated, if she is asked.’

*Learning point*
Each individual with dementia has had a life full of rich and varied experiences. Memory for the past is often relatively intact in dementia, but people may need help in accessing these memories.

Rose’s daughter tells us that Rose simply needs to be asked questions; for other people it may be a piece of music, a picture or even a smell that unlocks buried memories. Giving prompts, time and attention for the sharing of memories is vital, because it can help to generate senses of identity and inclusion; feelings of pride; experiences of being an expert and giving rather than just receiving.

**Why it matters**

As you have seen, a person’s life history remains vitally important. Events and occupations from the past often influence what people do and say. The person’s life history will also influence their needs now. We need to understand that life history to know how to support them. We can help to keep people’s sense of identity intact.
Over to you!

1. What do you know about the life histories of people with dementia that you support?
2. How could you find out more?
3. How could this help you provide better support?

In the next section we shall look at the difficulties and abilities of people with dementia.
Section 4: The person with dementia as an individual

In this section you will learn about:
- some of the difficulties people with dementia face
- some of the abilities they retain.

We are now going to look at the personal experience of people with dementia in more detail. We will hear from people living with dementia as they talk about their difficulties, strengths and needs.

It is often assumed that people with dementia do not have any insight into their own condition. But most people do have insight, even though they may have difficulty articulating it.

Difficulties yes, but strengths too

It is vital to listen carefully to people in order to understand their own experience of dementia.

Now read the accounts below from several people who have dementia. They talk about some of the difficulties they face.

John (age 66): ‘Well I was a singer… working abroad, singing the same songs for about 30 years. The music would start up and there would be a 1000 people staring there looking at you and I’d be there with the microphone and thinking what the hell am I doing here what are the words to the song! Gone! And that’s a song I’ve sung 10s of 1000s of times. Gone, totally gone.’

Philip (age 79): ‘I don’t say anything getting better with my memory instead I have things which I want and I go to look for it and because I forget where I put it looking all over the place.’

Interviewer: ‘Do you ever lose things, your glasses...?’
Anne (age 85): ‘Oh losing them all the time, so I get nagged about that, see I put them down, I got a spare pair and put those down. I do forget them.’
Angela, Anne’s niece: ‘She’s always losing things and what I found hard to cope with at first was everything that went missing I took. Or somebody’s been in my house, when nobody goes in her house but me. So it kind of worried me she was telling people this has been took out of my house and that it did upset me, but it wasn’t she has lost them, I found the tray for the knives and forks in her freeze box in the fridge. So they are in her house but she just puts strange things in strange places.’

Please note: any word in blue can be found in the accompanying glossary.
David (age 62): ‘I usually don’t know what day of the week it is, or even what month it is and certainly don’t know the date.’

Rose (age 90): ‘I can remember things a long time ago better than things that happened recently. Although the things that I can remember are momentous occasions, like, the first I went to school, when I was taken away for a holiday, I can remember the holidays and things like that but I can’t remember what happened last week.’

Over to you!

1. What do you imagine it’s like to live with these difficulties?
2. How might people’s lives change as a result of these difficulties?

Of course, dementia causes problems, but even in severe dementia people retain abilities too. Seeing the person as an individual means being aware of their strengths as well as their difficulties.

You’ve heard about some of the difficulties John, Philip, Anne, David and Rose face because of their dementia. But would you have guessed that they also have these (and many more) abilities:

- going out alone
- answering questions with great authority
- cooking
- felling a man using martial arts
- proficiency on the computer and the internet
- expertise in Tai Chi
- cleaning?

It is important to be aware that everyone has hidden strengths and talents that we need to discover. We will often engage with people far more successfully if we find out about and focus on the things they can still do and talk about.

Now read on and discover more about John, Philip, Anne, David and Rose talking about some of the things they still do well.

John (age 66): ‘I’m very very lucky, I suppose, really for a person of my age that I learnt the computer. So I am very very computer literate. I love being on the internet. I probably spend three or four hours a day on the internet. I absolutely love the internet. I find it very informative, entertaining, I’ve got friends all over the world. So we webcam to each other.’

Philip (age 79): ‘I do my own cooking. I…. do most things, in the house, I do it for myself. Putting out the garbage, putting out the garbage, cleaning up the place. I think I’m active enough.’
Anne (age 85): ‘Well I always been a goer-outer, staying out and going places and they think I going that way and said they are worried about me. I’m alright if I’m going to Whitechapel or somewhere shopping or I want to go somewhere but they still worry because they think I’m not as able as I should be but I think I’m better than they think I am. Can you understand that?’

David (age 62): ‘I’m here, talk to me. I’m not an idiot uh… I can be asked any/most questions and I can answer them quite lucidly and in some cases with great authority.’

Rose (age 90): ‘I used to go to Tai Chi classes and another elderly lady asked if I would take a class for the elderly. We quite enjoyed it, you know, seeing a lot of elderly people and it was besides being a teaching occasion it was a social occasion as well.’

Rose’s daughter: ‘Mother’s always been interested in Tai Chai and she is good at it, she was so good at it that they asked her to take a class for other pensioners which she took for many years. She also can do some of the martial arts aspect of it because I’ve even seen her with my ex-partner – she said she could get him to the ground and she did get him to the ground as well just by one kick. She’s good.’

Rose: ‘I’m 90, 90 years old, still going strong.’

All is not lost

A person’s difficulties often become our focus because we have to devote time and attention to helping them with these difficulties. The person with dementia, too, will often be preoccupied by the things they can’t do.

But there never comes a point in dementia when every ability is lost. After all, a healthy brain contains nearly 100 billion nerve cells (Merki, 1989) and even in severe Alzheimer’s disease, there are still approximately 60 billion nerve cells left.

Having knowledge of peoples’ strengths and abilities helps us to look beyond the label of dementia and see the person. It is essential to find ways of enabling people to use their strengths to the full. This can help provide respite from the daunting experience of facing day-to-day life with impaired mental functioning.

‘I thought quite a lot of things would have gone by now. But they haven’t, they cling on.’
Words of a person with dementia in Dementia diary, a compilation by John Killick (2008)
Every person with dementia is still a person and cannot be defined simply by their dementia. It is important to recognise that each person with dementia is different from every other person with dementia.

Knowing a person’s strengths, needs, preferences and difficulties will enable us to provide the support that the person needs.

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<td>1. Do you know about the strengths and abilities of people with dementia that you support?</td>
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<td>2. How can you enable people with dementia to use their abilities to the full?</td>
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‘I have always said, when you’ve met one person with Alzheimer’s disease, you’ve met one person with Alzheimers’ disease.’

Laureenhue (2001)

In the next section, we’ll look at how dementia can impact on those closest to them.
Section 5: A ‘whole mess of people’

In this section you will learn how:
• dementia not only affects the individual with the condition, but also has an impact on their whole network of relationships
• dementia is challenging for families and so they need support.

‘One of the things about this is it’s in the family and the family has not only me and my wife, but we have our children and the children have their spouses. In other words, this whole thing about Alzheimer’s is not just about two people, it’s about a whole mess of people. Not only our families but our extended families and their friends. It gets very, very involved.’
Cary Smith Henderson (1998)

Dementia not only affects the individual with the condition, but also has an impact on their whole network of relationships. Most people will know someone, either in their immediate family or in their wider network, who has dementia.

Over to you!

1. How might dementia affect people’s relationships?
2. What worries and concerns might families have?
3. What change in roles and responsibilities might happen within a family when one member develops dementia?
4. Why may families or carers of people with dementia become socially isolated?
Explanations for common dementia problems

Listed below are some of the problems commonly voiced by carers of people with dementia.

You will learn more about dementia, including finding out how likely it is to occur, and what the causes might be.

1. Elderly female carer: ‘He used to be a great handyman. Now the house seems to be falling to bits and I’m no good at fixing things.’

Explanation: Carers frequently grieve for the lost abilities of their loved ones. They may find themselves having to take on new roles and responsibilities, for which they feel ill-equipped.

2. Elderly female carer: ‘I made vows and now I have to accept outsiders coming into our house to help. I feel so guilty.’

Explanation: Carers often feel they have failed in some way if they have to resort to outside help or long-term care. They have not failed. In fact, without their support, the person would have needed much more outside help much earlier on.

3. Grandson: ‘I love my gran, she’s great. She does some really funny things sometimes. We all have a good laugh about it.’

Explanation: Dementia can often provide many humorous moments. Making light of it and laughing with (not at) the person with dementia can be a really useful way of uniting a family, rather than alienating one member of it.

4. Grown-up daughter: ‘Honestly, it’s like looking after a baby. It doesn’t feel right to have to do these things for my own mother.’

Explanation: Many carers may struggle with a sense of role reversal. Although the responsibility may feel similar to that of a parent looking after a child, it is important to remember that a person with dementia is not a child.

5. Elderly male carer: ‘She keeps asking the same question over and over again. Usually it doesn’t bother me but I get so tired that sometimes I just wish she’d shut up.’

Explanation: Exhaustion (both physical and emotional) can be a frequent complaint and can cause great strain on relationships within families.

Please note: any word in blue can be found in the accompanying glossary.
6. Close friend: ‘I don’t really know how to talk to her now. I should help in some way, but it feels embarrassing and awkward.’

Explanation: It is common for friends to drift away because they do not know how to cope with the effects of dementia. They may benefit from information and advice to help them understand the condition and recognise the importance of their continued involvement in the person’s life.

7. Husband: ‘She seems to hate me, always having a go. We’ve been married for 35 years but I’m wondering if it was all a sham.’

Explanation: Questioning the validity of decades of marriage is sadly very frequent when the carer is struggling to understand the nature or effects of the dementia.

8. Husband: ‘I worry about what’s going to happen, how we’ll manage financially. Will we lose our house?’

Explanation: From as early as possible, carers need access to advice and information about welfare rights and legal matters. We will address the network of support in more detail in Module 4.

9. Wife: ‘If I could just get out of the house to do some shopping on my own, I could be me again.’

Explanation: Carers need periods of respite, in whatever form, to help cope with their stresses and regain a sense of their own identity outside of their caring role.

10. Daughter in-law: ‘What about her other children – my husband’s brother and sister? Why can’t they do more? It all seems to be down to us because we live closest to her.’

Explanation: It is common for conflict to arise within extended families, particularly when the caring role is not shared equally. Many carers may feel isolated and unappreciated.

11. Friend and neighbour: ‘We’ve always been friends as well as neighbours, but now I worry about what she’s going to do next. Last week she went out and left her front door wide open.’

Explanation: Many people may have concerns about a person with dementia, and it will be important for them to know that a network of support is in place.
Carers’ feelings

Now read the two interviews below, where two family members tell us a little about their experiences and feelings.

Jim talks about his wife who has dementia

Narrator: ‘Jim has never told his wife that she has dementia.’
Jim: ‘So it has been difficult because we have not been able to cry together and I’ve still had to be the same silly idiot that I’ve always been in her eyes. Once the carers have left, you are by yourself again with your wife. And …you have to do everything … so you are alone. My wife doesn’t converse much, she can understand me talking to her … even watch the TV, but unless it’s a comedy programme, she is unable to interact with it, she can’t follow the plot and so basically you are alone. Now we’re at the stage where basically all we have left is that she recognises me and other family members and also that she is still aware that she loves me.’

Jerry and John talk about John having dementia

Narrator: ‘Jerry felt that the important thing was to face the situation and not be frightened of it.’
Jerry: ‘I kind of get a feeling with a lot people that they don’t want to face that there’s a possibility that one of their partner or their parents have got what has to be called dementia. And that therefore, they don’t what to find out that they have so they don’t take it any further.’
Narrator: ‘John’s condition also threatened his music making.’
John: ‘Obviously, I was going off…’
Jerry: ‘You did find it harder and harder because you kept losing your place in the music but when you discovered that you had actually got something wrong with you…’
John: ‘It was such a relief…’
Jerry: ‘Yes…’
John: ‘To realise that…’
Jerry: ‘Yes, he told all the fellow bases…please look after me.’
John: ‘Yes, look after me…I’m not going to be the fellow that I was, but I need help.’
Narrator: ‘All the choir knows about John’s condition because John and Jerry don’t see anything to be secretive about it.’
Jerry: ‘He’s got Alzheimer’s, there’s nothing to be ashamed of.’
Over to you!

1. What strikes you about the things that people said?
2. Was anything different or similar to your initial expectations?
3. If you are close to a person with dementia, what feelings can you identify with?
4. What type of support do you feel would be helpful for families in these situations?

This brings us to the end of the second module, which has focused on the individual experiences of people living with dementia and those closest to them.

We have looked at the importance of understanding life histories and recognising unique strengths, needs and preferences.

We look further at the emotional impact on those living with dementia in later modules.

Below is a summary of the main points from this module:

- People with dementia are not all alike. Every person with dementia is a unique individual and has individual strengths, problems, preferences and needs.
- Because the effects of dementia in the brain are not visible, people's actions and needs can easily be misunderstood.
- Knowing about the person's life and uniqueness is key to supporting that person.
- Dementia causes the loss of certain abilities, but people also retain many skills and strengths.
- Dementia has an impact not only on the person who has it, but also on their family, friends and community.

Before you move on to the third module of the programme, where we look at the causes of dementia, why don’t you take our self-assessment quiz on the next page, which will allow you to test your understanding of some of the key points?
Section 6: Self-assessment

This self-assessment will allow you to test your understanding of some key messages and facts covered in this module. Choose between true and false for each question. You will then see the right answers and some feedback on page 22, and where to look in this module to review.

**Question 1**

The most vital information you can find to support people with dementia will be in textbooks and factsheets about ‘the diseases and conditions that cause dementia’.

- True
- False

**Question 2**

You can often identify a person with dementia by their dishevelled appearance.

- True
- False

**Question 3**

People with dementia are doing their best to function with limited capacities.

- True
- False

**Question 4**

Rather than interact too much with a person with dementia, you should give them plenty of space, and steer clear as they might become aggressive.

- True
- False

**Question 5**

The best type of activities are those that tap into the person’s strengths and life history.

- True
- False

Please note: any word in blue can be found in the accompanying glossary.
## Question 6

By drawing upon the strengths of a person with dementia you can help them feel better about themselves.

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## Question 7

People with dementia all have the same needs.

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## Question 8

It’s the carers and family members who are most affected by dementia.

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## Question 9

The life history of a person with dementia shapes who they are now.

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## Question 10

When one partner in a relationship develops dementia, that relationship is over.

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Please note: any word in blue can be found in the accompanying glossary.
Answers

1. The correct answer is ‘false’. It is vital to first listen to the experiences of individuals themselves. After you finish this self-assessment, you might want to re-visit Section 2 ‘Do you know who I am?’ where we cover this point.

2. The correct answer is ‘false’. You cannot identify a person with dementia by appearance alone. After you finish this self-assessment, you might want to re-visit Section 2 ‘Do you know who I am?’ where we cover this point.

3. The correct answer is ‘true’. People should not be blamed as being deliberately lazy, awkward or forgetful. If you want to review this go to Section 2 ‘Do you know who I am?’ where we cover this point.

4. The correct answer is ‘false’. People with dementia, like anyone, need people to take interest in their life history, experiences and feelings for interactions to be positive. To review this go to Section 3 ‘Understanding a person with dementia’ where we cover this point.

5. The correct answer is ‘true’. Activities should not expose people to failure but rather be geared to a person’s interest, strengths and life history. You can review this in Section 4 ‘The person with dementia as an individual’ where we cover this point.

6. The correct answer is ‘true’. People with dementia are too often only engaged in terms of weakness and failure. If you want to review this, go to Section 4 ‘The person with dementia as an individual’ where we cover this point.

7. The correct answer is ‘false’. Everyone in the world, regardless of disability, is unique and has many different needs. If you want to review this, go to Section 4 ‘The person with dementia as an individual’ where we cover this point.

8. The correct answer is ‘false’. Both the person with dementia and their carers are affected in different ways. After you finish this self-assessment, you might want to re-visit Section 5 ‘A whole mess of people’ where we cover this point.

9. The correct answer is ‘true’. That is one of the reasons why it is important to know about the life histories of people with dementia. After you finish this self-assessment, you might want to re-visit Section 4 ‘The person with dementia as an individual’ where we cover this point.

Please note: any word in blue can be found in the accompanying glossary.
10. The correct answer is ‘false’. The relationship continues and enters a new phase with a new dynamic to adapt to. Many need support to make these adaptations. After you finish this self-assessment, you might want to re-visit Section 5 ‘A whole mess of people’ where we cover this point.
Section 7: References


