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Version: Supplemental Material

Article:

Hunter, SW, Armstrong, J, Silva, M et al. (1 more author) (2020) Physiotherapy Students' Attitudes Toward Working With People With Dementia: A Cross-Sectional Survey. *Physical & Occupational Therapy In Geriatrics*, 38 (1). pp. 56-66. ISSN 0270-3181

<https://doi.org/10.1080/02703181.2019.1690088>

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Supplemental Online Material

Supplementary Table 1. Responses of physiotherapy students on the Confidence in Dementia Scale[22] (n=55).

	Rating of Confidence				
	1 Not Able	2	3	4	5 Very Able
I feel able to understand the needs of a person with dementia when they cannot communicate verbally.	5 (9%)	18 (33%)	26 (47%)	5 (9%)	1 (2%)
I feel able to interact with a person with dementia when they cannot communicate well verbally.	4 (7%)	14 (26%)	20 (36%)	15 (27%)	2 (4%)
I feel able to manage situations when a person with dementia becomes agitated.	7 (13%)	19 (34%)	17 (31%)	11 (20%)	1 (2%)
I feel able to identify when a person may have dementia.	0	9 (16%)	18 (33%)	25 (46%)	3 (5%)
I feel able to gather relevant information to understand the needs of a person with dementia.	0	15 (27%)	24 (44%)	15 (27%)	1 (2%)

I feel able to help a person with dementia feel safe during their stay in a hospital or inpatient setting.	0	7 (13%)	22 (40%)	21 (38%)	5 (9%)
I feel able to work with people who have a diagnosis of dementia.	1 (2%)	0	24 (44%)	25 (45%)	5 (9%)
I feel able to understand the needs of a person with dementia when they <u>can</u> communicate verbally.	1 (2%)	7 (13%)	11 (20%)	25 (45%)	11 (20%)
I feel able to interact with a person with dementia when they <u>can</u> communicate well verbally.	1 (2%)	0	9 (16%)	27 (49%)	18 (33%)

Supplementary Table 2. Physiotherapy students' attitudes to working with people with dementia (n=55).

Question	Response				
	Strongly Agree	Agree	Undecided	Disagree	Strongly Disagree
I believe that a diagnosis of dementia negatively impacts functional recovery with rehabilitation interventions.	6 (11%)	19 (34%)	17 (31%)	12 (22%)	1 (2%)
My expectations for a positive outcome from rehabilitation for a person with dementia are less than a person without dementia.	1 (2%)	25 (45%)	9 (16%)	17 (31%)	3 (5%)
Given that people with dementia have a limited ability to learn, I believe intensive inpatient rehabilitation treatments should not be offered.	0	2 (4%)	9 (16%)	31 (56%)	13 (24%)
Compared to other patient groups, I think I would prefer to work with people with dementia upon graduation.	0	3 (6%)	18 (33%)	26 (47%)	8 (15%)

I think working with people with dementia would lead to stress and burn-out for me.	5 (9%)	19 (34%)	17 (31%)	13 (24%)	1 (2%)
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Appendix 1: Questionnaire administered to physiotherapy students to evaluate attitudes to working with patients with dementia.

A. Exposure to people with dementia prior to starting your physiotherapy degree program

The next section asks questions about your experiences of knowing and working with people with dementia **prior to** entering physiotherapy school.

1. Prior to starting your physiotherapy program, did you have any paid or volunteer experience **working** with people with dementia?

Yes (GO TO Q2) No (Go to Q9)

2. Please indicate the setting where you worked with people with dementia?

Home care

Acute care hospital

Rehabilitation hospital

Private outpatient clinic

Nursing home/long term care facility

Other _____

3. How would you rate your experience **working** with people with dementia?

Mostly negative Somewhat negative Neither negative or positive Somewhat positive Mostly positive

4. Has **working** with people with dementia made a positive impact on how you view the need for giving access to and providing rehabilitation to people with dementia?

Yes No

5. Do you **personally know** someone with dementia (e.g., a family member)?

Yes (If YES, go to Q7) No (GO TO next section with Q9)

6. How often did you/do you have contact with this person(s) with dementia (e.g., a family member)?

Never Rarely Sometimes Often Very Often

7. How would you rate your interactions with this person(s) with dementia?

Mostly negative Somewhat negative Neither negative or positive Somewhat positive Mostly positive

8. Has knowing someone with dementia made a positive impact on how you view the need for giving access to and providing rehabilitation services to people with dementia?

Yes No

B. Academic training

The next section asks questions about the in-class training/education you received during your entry-level physiotherapy program. In the next six questions, please indicate if you feel the training you received during your physiotherapy degree program was sufficient or insufficient to allow you to effectively work with people with dementia after you graduate?

Question	Sufficient	Insufficient
9. Basic overview of common dementia diseases		
10. Prevalence of common dementia diseases		
11. Pathophysiology of dementia diseases		
12. Pharmacological management of dementia		
13. Impact of dementia on the individual and their care-giver's physical well-being		
14. Communication strategies to engage the person with a dementia disease		

15. Overall, do you feel that the academic training you received in your degree program was **sufficient** to allow you to effectively and empathetically work with people with dementia after you graduate?

Yes No

C. What Do You Understand About Dementia

In this section, we would like you to complete the Knowledge in Dementia Scale [Elvish et al.] in order for us to capture your understanding of dementia diseases. Please answer either “agree ” or “disagree ” to each of the following statements.

Question	Agree	Disagree
16. Anger and hostility occur in dementia mostly because the “aggression” part of the brain has been affected.		
17. Dementia is a general term which refers to a number of different diseases.		
18. Dementia can be caused by a number of small strokes.		
19. People with dementia will eventually lose all their ability to communicate.		
20. People with dementia’s history and background plays a significant part in their behaviour.		
21. A person with dementia is less likely to receive pain relief than a person without dementia when they are in hospital.		
22. People with dementia who are verbally aggressive nearly always become physically aggressive.		
23. When people with dementia walk it is usually aimless.		
24. Permanent changes to the brain occur in most types of dementia.		
25. Brain damage is the only factor that is responsible for the way people with dementia behave.		
26. Physical pain may result in a person with dementia becoming aggressive or withdrawn.		
27. People who have dementia will usually show the same symptoms.		
28. Currently, most types of dementia cannot be cured.		

29. People with dementia never get depressed.		
30. My perception of reality may be different from that of a person with dementia.		
31. It is possible to catch dementia from other people.		

D. Confidence in working with people with dementia.

In this section, we would like you to complete the Confidence in Dementia Scale [Elvish et al.]. Please answer each statement using the 5 point scale, such that 1 indicates “not able” and 5 indicates “very able”.

	1 Not Able	2	3	4	5 Very Able
32. I feel able to understand the needs of a person with dementia when they cannot communicate verbally					
33. I feel able to interact with a person with dementia when they cannot communicate well verbally					
34. I feel able to manage situations when a person with dementia becomes agitated					
35. I feel able to identify when a person may have dementia					
36. I feel able to gather relevant information to understand the needs of a person with dementia					
37. I feel able to help a person with dementia feel safe during their stay in a hospital or inpatient setting					
38. I feel able to work with people who have a diagnosis of dementia					
39. I feel able to understand the needs of a person with dementia when they can communicate verbally					
40. I feel able to interact with a person with dementia when they can communicate well verbally					

E. Attitudes to Working with People with Dementia

For the next six questions please indicate how **strongly** you agree with each statement.

41. I believe that a diagnosis of dementia negatively impacts functional recovery with rehabilitation interventions.

Strongly agree Agree Undecided Disagree Strongly disagree

42. My expectations for a positive outcome from rehabilitation for a person with dementia are less than a person without dementia.

Strongly agree Agree Undecided Disagree Strongly disagree

43. Given that people with dementia have a limited ability to learn, I believe intensive inpatient rehabilitation treatments should not be offered.

Strongly agree Agree Undecided Disagree Strongly disagree

44. I have sufficient training and knowledge to work with people diagnosed with dementia after graduation.

Strongly agree Agree Undecided Disagree Strongly disagree

45. Compared to other patient groups, I think I would prefer to work with people with dementia upon graduation.

Strongly agree Agree Undecided Disagree Strongly disagree

46. I think working with people with dementia would lead to stress and burn-out for me.

Strongly agree Agree Undecided Disagree Strongly disagree

In the next section, please rate your belief as to which severity of dementia, if any, would impact various dimensions of physical therapy. We have provided standard definitions of disease severity to assist with answering the questions.

Mild dementia is defined as the person having loss of short term memory, decreased judgment, safety concerns, difficulty with mathematical calculations, and an inability to comprehend abstract ideas.

Moderate dementia is defined as the person having difficulty with speech and language, labile personality changes, changes in usual grooming habits, apraxia, urinary incontinency, wandering, hallucinations or paranoia, and depression.

Severe dementia is defined as the person having an inability to perform basic activities of daily living, inability to remember how to walk, use the toilet, eat or swallow; minimal to no communication, immobile, and requires total care.

Which of the following severity of dementia do you believe.... (CHECK ALL THAT APPLY)	Mild	Moderate	Severe	None of them	Don't know/Not sure
47. Negatively impacts functional recovery with rehabilitation interventions is?					
48. Leads to lower expectations for a positive outcome from rehabilitation?					
49. Results in a limited ability learn while in rehabilitation?					
50. You have sufficient training and knowledge to work with after graduation is?					

F. Clinical Experience

The next section asks questions about your clinical placement experiences **during** the two years of your entry-level physiotherapy degree program.

51. Did you have any clinical placements where you worked with older adults with dementia?

Yes (GO TO Q52) No (GO TO Q57)

52. In what setting(s) did you work with the adults with dementia? (CHECK ALL THAT APPLY)

Home care

Acute care hospital

Rehabilitation hospital

Private outpatient clinic

Nursing home/long term care facility

Other _____

53. What percentage of your caseload was comprised of patients with dementia?

____% (Respondent enters a number)

54. Did you observe your clinical preceptor comment about and/or act positively towards older adults with dementia?

Yes No

55. Did you observe your clinical preceptor comment about and/or act negatively towards older adults with dementia?

Yes No

56. Do you have an interest in working with older adults with dementia after graduating?

Yes No

G. Demographic Information

The following section asks about sociodemographic information.

57. Gender Male Female Other

58. Age ____ years

59. What was the highest degree you earned prior to starting your studies in physiotherapy? (CHECK ONE)

Baccalaureate

Thesis-based Masters (research)

Non-thesis based Masters

Research Doctorate (PhD)

Other _____

End of Survey

You have completed the survey. Thank you for taking the time to participate in the survey.