

Chapter 1 intro

1.1 Chapter 1

1.2 introduction

Hello, and welcome again to our programme on coping skills for families and carers.

This is chapter 1: Focusing on the person. As with all our chapters, we will ask you to do some practical work and reflections. If you wish to use your reflection journal for those, make sure you have it in front of you. But don't worry, if you don't have a printed version of the journal, you can also use a notebook or a piece of paper.

1.3 How do you see dementia?

The first thing we will do is examine some ideas, and how we see things.

How do you see dementia?

First of all, think of three words to describe dementia. write down those words PAUSE

Then, think of three words to describe the person with dementia. write those words down.

1.4 How does society see dementia?

In order to focus on the person, we need to establish what dementia means to us - and in some cases, we might need to challenge those meanings.

The way we view dementia and the way we talk about dementia have implications on the way we care for people with dementia.

Let's look at how dementia can be viewed, and also at what implications these views can have on the care we provide

1.5 Dementia as illness

Very often, we hear about dementia as an illness.

Medical professionals often explain dementia with words such as: an illness, a disease, a sickness, something that happens in a person's brain.

Medical advances have increased the possibility of earlier diagnosis, and have made possible the availability of medication. These are invaluable, but an emphasis on the purely medical model can have some drawbacks.

In the medical world, the person with dementia often becomes a sufferer, a patient, a victim, an object.

As carers, this is often the first explanation we encounter - usually at the time of diagnosis, or else from public awareness.

1.6 Implications of dementia as illness

What are the disadvantages of viewing dementia as an illness?

Sometimes, when we see dementia as an illness and a disease, it can make us forget about the person who is living with the condition.

Care becomes about managing tasks, often without asking for the opinion of the person with dementia. These tasks can be about feeding (you have to eat your dinner), grooming (you need to shower now), taking medication (take all these tablets, they make you better).

This commonly held view of dementia as a medical, biological and neurological illness with no medical cure can lead carers and people with dementia to feelings of despair and hopelessness.

1.7 Dementia as behaviour

As you continue to care for the person with dementia, you may come across some behaviours on their part which could lead you to view dementia as behaviour.

Based on these behaviours, we can describe dementia as

- changing the person
- making them unreasonable
- making them uncontrollable.

In this case, the person with dementia could be described as

- Aggressive
- Abusive
- In denial

Or as a wanderer.

1.8 Implications of dementia as behaviour

If we focus on treating the behaviour, we tend to forget to think of the meaning behind the behaviour, and of the reasons why someone may be behaving a certain way.

Behaviour can sometimes be a response to other behaviours, or even a response to emotions from the past - you will learn the skills to recognize and respond to emotions and behaviours driven by emotion in Chapter 5.

1.9 Dementia as Personal Experience

Dementia can also be viewed as a personal experience. This is where we want to see the person with dementia as an individual, to focus on the person rather than their illness or the abilities they may have lost.

We consider the whole person, we take into account each individual's unique qualities, abilities, preferences and needs. Understanding dementia as a personal experience will help to treat people with dementia with dignity and respect.

1.10 Implications of dementia as a personal experience

If we view dementia as a personal experience, then the dementia process is not just about the brain, but also about relationships and social contexts.

When we focus on the individuality of the person and when we view dementia as their personal experience, then we can provide person-centered care.

Person-centered care means recognizing each individual, and so providing care on an individual basis, rather than relying on "one fit all" strategies.

Care should be about a search for well-being rather than treatment of ill-being.

1.11 Dementia awareness

Please click on the video, and watch a person with dementia share their views; after the video, we will ask you to answer some questions.

1.12 Two questions

Having watched the video and completing the Introduction to Chapter 1 we will examine some ideas, and how we see things again.

How do you see dementia?

First of all, think of three words to describe dementia. write down those words.

Then, think of three words to describe the person with dementia. write those words down.

1.13 For more information



Coping Skills for Families and Carers

**You have finished: Introduction
in Chapter 1: Focusing on the Person.**

**You can now go to
Skill 1: How to focus on the person**

for more information, go to
[Dementia Elevator](#)