Content Analysis of the Perception of Dementia by the Elderly Women in the Community

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Abstract. This study investigates the content analysis of the perception of dementia of elderly women in the community to give dementia management of the elderly to increase healthy and happy life. Researchers collected data from 12 women over the age of 65 from October to December 2015 using focus group discussions. Researcher used content analysis method for data analysis. Results of the study showed that there was a need for dementia prevention program due to low cognitive function, lack of communication, stress, and burden on the family because of dementia in a loved one.

Keywords: Elderly, Dementia, Content analysis

1 Introduction

In 2000, elderly population was 339,000 (7.2%) and in 2014 year it was 639,000 (12.7%), this is double the number in 14 years. It is estimated for 2017 to be 712,000 (14%) and for 2025 about 1,000,000 [1] (health department data 2014). These are the number for the dementia population, which has shown a continued increase: 2012 was 345,145, in 2013 was 382,017 and in 2014 was 430,974. This is a 12.80 percent increase for these 3 years. Treatment fee for dementia in 2012 81,260,000 won 2013 98,822,000 won, in 2014 about 166,800,000 won. Therefore it increased 48.80% in 3 years [2]. Furthermore, number of admission of elderly health problems increased and admission of dementia cases also increased, in 2010 age 55-64 (46.1%), age 65-74 (29.9%), age over 75 (86.3%). Outside clinic visits are very high, admission of dementia cases are increased, especially age over 75 is very high increasing rate of 138.4% [3]. There is no specific dementia treatment, but dementia prevention program can reduce the incidence of dementia and slow down the dementia [4]. Therefore, researcher should develop dementia prevention programs to improve cognitive function and continuous prevention treatment program should provide to decrease dementia [5].
The purpose of this study is to identify elderly participants’ opinion regarding dementia and develop nursing intervention to decrease dementia in the community.

2 Method

2.1. Research design

Researcher identified the opinion of elderly regarding dementia and use content analysis for data analysis.

2.2. Recruitment of clients

Researcher collected the data from J city elderly population and subject should be over age 65 who understands the purpose of study and agrees to participate who can communicate with researcher collected from 12 elderly clients and researcher used focus group discussion to collect data.

2.3. Research method

Research question was 1. What do you know about dementia? Researcher collected data by focus group discussion. Participants tried to explain about their experience regarding dementia.

2.4. Collecting data and ethical consideration

Researcher conducted a 2 hour and 15 minute one time interview of elderly people over 65 years old in a quiet room using 2 record players during the discussion period. Before using record players, researcher asked permission to use record players. Researcher distributed demographic questionnaires and the used focus group discussion to collect data. Researcher explained purpose of the study; those who agreed to participate in the study signed a consent form.

2.5. Data analysis

Content analysis method used for data analysis. This is the communication analysis for individual society from newspaper, journal, counseling record and tapes. This study is an analysis of the elderly experience about dementia. Researcher tried to find open coding, axial coding and selective coding, after that process researcher identified themes.
3 Results

3.1. Characteristics of participants

The age range of the participants is 63-87 with two majority groups: Ages 70-75 and age 75-80. Most of the women were widows; therefore, when they get sick they prefer to go to a general hospital to get care for them.

3.2. Results of the study

Study resulted in five specific areas concern. These areas are a need for a dementia prevention program, lack of cognitive function, lack of communication, stress, and burden on the family because of dementia in a loved one. Open coding 246, axial coding 149, and selective coding 50 were used to categorize these areas.

1) Lack of cognitive function

"I don't know about my memory and I am making not making sense." "Even I am making Kimchi and asking my daughter to buy kimchi for me." "I eat the stool because it is like bread."

2) Lack of communication

"I am sorry that I don't have a friend who I can speak to." "I would like to communicate with my close friend but I do not have a friend." "My sister curses at and asking why are you doing like that when I am trying to help her."

3) Stress

"Those with higher level of stress have higher potential for dementia." "If somebody experiences trauma at a young age and they don’t get help for it, they also have higher potential for developing dementia later in life." "If somebody low self-esteem which causes stress this can also develop into dementia."

4) Burden of the family member

"One family member has to take care of dementia family member." "Family crisis tend to develop dementia in the family." "Dementia family member can sometimes break things in the home, which can add to the family’s stress."

5) Dementia prevention program

"We have to exercise the hand and foot every day." "Client needs play games and reading to exercise their mind."
4 Conclusions

Results indicated that to promote dementia preventive activity in elderly population in community, programs should be conducted focus differently for women and men. Researcher should emphasize in to improve cognitive function and knowledge for dementia program to decrease depression level in the community.

References

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