Dementia Capable Webinar Series Post Test Answers:

“Life After Diagnosis- Finding the Silver Lining” presented by Gayle Alston

Provided by the Rosalynn Carter Institute for Caregiving
In partnership with the Georgia Division of Aging Services

Multiple Choice

1. What are some of the attitudes that bring about stigma?
   a. Fear of dementia behaviors
   b. Lack of knowledge about the disease
   c. Need to feel separated and, therefore, safe from the disease
   d. All of the above
   e. None of the above

2. Stigma against illnesses is not new, which illnesses listed below have been stigmatized in the past?
   a. Cancer
   b. Measles
   c. HIV/Aids
   d. A (Cancer) and C (HIV/Aids)
   e. None of the above

3. How does stigma affect people living with dementia?
   a. They stop engaging with friends and family
   b. They act out because their feelings are hurt
   c. They delay seeing a doctor and miss medications that can help
   d. A (They stop engaging with friends and family) and C (They delay seeing a doctor and miss medications that can help)
   e. All of the above

4. The fact that dementia and Alzheimer’s is just normal aging is…
   a. True, so we should all be prepared
   b. Helpful to know so we don’t feel ashamed
   c. A myth that keeps people from seeking treatment in a timely manner
   d. All of the above
   e. None of the above
5. Once a person is diagnosed with dementia, what should they do?
   a. **Get their life’s affairs in order**
   b. Find a nursing home to move into as soon as possible
   c. Give up their jobs and hobbies
   d. All of the above
   e. None of the above

6. Prescribed Disengagement is:
   a. A treatment to help people living with dementia transition to a new way of living
   b. A practice for caregivers to accept the diagnosis
   c. **A common suggestion by doctors that causes people living with dementia to become isolated and depressed**
   d. None of the above
   e. All of the above

7. What do we mean by the medical model for dementia care?
   a. People living with dementia should be housed in hospitals
   b. The focus is on the biological aspects rather than the whole person
   c. Identifying losses and deficits is the key feature of doctor visits
   d. All of the above
   e. B (The focus is on the biological aspects rather than the whole person) and C (Identifying losses and deficits is the key feature of doctor visits)

8. What do we mean by the social model for dementia care?
   a. A holistic approach encompassing the person’s history, personality, and preferences
   b. Focus is on the remaining strengths and abilities to enhance their daily experiences
   c. Provides for independence for as long as it is safe
   d. **All of the above**
   e. None of the above

9. The disability model for dementia care…
   a. Calls for ongoing adaptations to empower the person living with dementia to remain engaged in activities for as long as possible, with various forms of assistance
   b. Encourages caregivers and people living with dementia to maintain their pre-diagnosis lifestyle for as long as possible, with adaptation
   c. Is proactive in seeking solutions and utilizing skills and abilities still intact
   d. **All of the above**
   e. None of the above
10. Caregiver practices that can ensure ongoing quality of life for both the caregiver and the person living with dementia include:
   a. Involving the person living with dementia as much as possible in all decisions concerning their care and their daily routine
   b. Creating a dementia friendly environment which enables the person living with dementia to remain as active and independent as possible
   c. Providing memory prompters
   d. Focusing on remaining strengths
   e. All of the above