PERCEPTION OF NURSES TOWARDS THE CARE OF ELDERLY PATIENTS WITH DEMENTIA IN FEDERAL MEDICAL CENTER, UMUAHIA, NIGERIA

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ABSTRACT

Globally, approximately 50 million, mostly elderly people, have dementia. Annually, this number increases by 10 million (World Health Organization, 2019). This study determines Nurses' perception towards managing Elderly Patients with Dementia at Federal Medical Center, Umuahia. A descriptive Cross-sectional research design was used for this study; the target population are Elderly Patients and Total patients was used. The instrument for obtaining data for the study was a structured questionnaire and IBM SPSS Version 21 was used to analyze the data, generated from the study presented in frequencies, tables and percentages. The socio- demographic characteristics of this study shows that majority of the respondents are with the age of 40 and above years (31%), had Nursing diploma certificate (57%) with 0 – 1year in service (52%) and are exposed to living with the elderly person(s) (81%). This study indicates that the level of perception towards the management of elderly patients with dementia is negative (48.8%), the level of nurses' knowledge towards the care and management of the elderly with dementia is high (65%) and the level of nurses' practices in the care of the elderly with dementia is also high (60). Hypothesis revealed there is a significant relationship between the Level of Knowledge of nurses and the Management of elderly Patients with dementia in FMC, Umuahia (P=.005). It is therefore recommended that Seminars on dementia is to be introduced to improve the knowledge. There should also be enhancement in the enlightenment of Nurses' Perceptions toward the elderly patients. Preparation of mind before going to the wards to care for these patients and many others.

Keywords: Perception; Nurses; Care of Elderly Patients; Dementia.

INTRODUCTION

Dementia is a general term for loss of memory, or language abilities that are severe enough to interfere with daily life. Alzheimer's is the most common cause of dementia. Globally, approximately 50 million, mostly elderly people, have dementia. Annually, this number increases by 10 million (World Health Organization, 2019). In the Netherlands, over 280,000 people are currently living with dementia (Alzheimer Nederland, 2019). People with dementia are regularly hospitalised, not for their dementia but for other illnesses such as, fractures, chronic diseases or infections, including respiratory, urinary or gastrointestinal infections (Toot, Devi, 2013). The national average percentage of people with dementia admitted to the hospital in 2017 was 25.3%, compared to 17% in a comparable group without dementia (Vektis, 2019). The exact percentage of patients with dementia in hospitals is unknown. An estimate is that people with dementia occupy approximately one-quarter of hospital beds (Brooker et al., 2014; Feast et al., 2020). People with dementia have an increased risk of complications during their hospital stay, caused by infections, a decline in functional and nutritional status, and incontinence, and the result is an unwanted longer hospital stay (Fogg et al., 2018; Möllers et al., 2019). In addition to the variety of comorbidities of people with dementia, nurses often have to manage patients' challenging behaviour, such as aggression, agitation, resistance to care or wandering (Dewing & Dijk, 2016; Evripidou et al., 2019).

The prevalence and study of dementia increase as the lifespan of humans extends. Since early civilizations, ancient philosophers viewed mental decay as a normal part of ageing. In the late 1880s, with the advancements in medicine and the ability to look inside the brain, the medical community realized that diseases could cause this deterioration. The most common was named in 1910, after Alois Alzheimer, a German Psychiatrist. In 1906, Alzheimer, who looked at the Post-Mortem brains of affected younger people, published the first case of a 50-year-old woman with dementia symptoms. After death, Alzheimer's saw the microscopic plaques and tangles now known as hallmarks of the disease. At the same time, another German Psychiatrist, Oskar Fischer, studied the brains of older people, and he too, saw plaques and tangles. Both contributions furthered the understanding of the condition, but the naming of Alzheimer's disease by prominent psychiatrist Emil Kraepelin and the occurrence of World War II relegated Fischer's name into obscurity.

Hence, Dementia is a global issue, with increasing prevalence rates impacting health services and outcomes. According to the World Health Organization (WHO), around 55 million. People have dementia, with over 60% living in low-and-middle-income countries. As the proportion of older people in the population is increasing in nearly every country, this number is expected to rise to 78 million in 2030 and 139 million in 2050. Also, in tandem with the ever-increasing ageing population, the burden of dementia is rising on the African continent. The dementia prevalence varies from 2.3% to 20.0%. According to the Federal Ministry of Health, about 20-30% of Nigerians suffer from mental illness. Also, the statistics of the WHO show that Nigeria accounts for 57.7% of this problem. Moreover, in Abia State, we have 4.7% from the Nigerian Statistics by the WHO. And out of the 4.7% of Abia State Statistics. About 1% of cases reported is from Federal Medical Centre, Umuahia. Gradual deterioration in cognition function and behaviour makes an individual with dementia dependent on others for support with their activities of daily living. Person-centred care is widely recognized as the ideal approach for caring for people with dementia (Terada et al., 2011).

The focus in FMC, Umuahia is primarily on Nurses' perception and managing drug administrations, whereby nurses experience time pressures and staff shortages (Reilly & Houghton, 2019). The individual care and needs of people with dementia are not always recognized and understood by nurses (Dewing & Dijk, 2016). Earlier studies show that nurses tend to avoid caring for patients with dementia, especially when they exhibit challenging behaviour (Clissett et al., 2014; Hynninen et al., 2016). Also, nurses experience difficulties in dealing with and caring for the family of these patients (Ernst, et al., 2019). Especially for patients with dementia, care must be adapted to their specific needs (Feast et al., 2020). The nurses' perception towards dementia affects their provision of care and the amount and type of physical restraints and restrictive medical measures they apply (Dewing & Dijk, 2016). Nursing care is related to patient safety, quality of care, and an assumption that there is also a strong relationship between the provided care, and nurses' perceptions of dementia and nursing outcomes (Persoon et al., 2015).

Most studies on care for patients with dementia in an acute hospital setting have used a qualitative perspective as shown in recent reviews (Digby, Lee, & Williams, 2016; Evripidou et al., 2019), or focus on a specific part of the nursing care, like orthopaedic care (Jensen et al., 2019). It is known that the experience of nurses, their level of education, courses and the number of hours that nurses work on the ward influence the quality of care for patients with dementia, the nurses' attitudes towards caring for patients with dementia and their perceptions of this care. This knowledge gap also accounts for the Federal Medical Center, Umuahia. Therefore, in the study aim to determine Nurses' Perceptions toward Patients with Dementia in Federal Medical

Center, Umuahia, and Nurses' Management towards caring for Patients with Dementia and their Perceptions of this care; additionally, we gain insights into how Nurses manage challenging behaviour of hospitalized patients with Dementia in FMC.

OBJECTIVE OF THE STUDY

The main objective of this study is to determine the Perception of Nurses toward the Management of Elderly Patients with Dementia at Federal Medical Center, Umuahia.

Specifically, the study intends to:

1. assess the Nurses' level of perception towards the management of elderly patients with dementia at Federal Medical Center, Umuahia
2. identify level of Nurses' knowledge towards the care and management of the elderly with dementia.
3. determine level of Nurses' practices in the care of the elderly with dementia in FMC.

METHODOLOGY

Research Design: A descriptive Cross-sectional research design was used for this study. This is because this type of research design collects data from many individuals simultaneously.

Setting: The Federal Medical Centre, Umuahia came into existence in November 1991. It metamorphosed from the Queen Elizabeth Hospital, which was commissioned on March 24, 1956, by Sir Clement Pleas representing Queen Elizabeth the Second of England. It started as a joint mission hospital administered by the Methodist, Anglican and Presbyterian churches. Before its takeover by the Federal Government, it had first been taken over from the missions by the then Imo State Government under the then Military Governor – Navy Captain Godwin Ndubuisi Kanu (now A retired rear Admiral). It was renamed Ramat Specialist Hospital in honour of the late slain Head of State, General Murtala Ramat Mohammed. During the first republic under the administration of late Chief Sam Mbakwe, Governor of the old Imo state, it reverted to its original name – Queen Elizabeth Hospital. It thus became the Federal Medical Centre (FMC), Umuahia on its takeover in November 1991. It is the first FMC to be so recognized. The setting is a 483-bedded tertiary health institution; located opposite Guaranty Trust Bank Umuobasi, along Aba Road in Umuahia North LGA of Abia State. The hospital covers an area of 77 acres of land bounded on the south by the Nigerian prisons, Umuahia; East by Ndume Ibeku; North by Umuahia Urban and West by the Afara clan. The mission of FMC, "As the foremost Federal Medical Centre, we provide specialized and comprehensive health care services to our clients, using modern equipment, training and research by highly skilled manpower, in a friendly environment"

The motto of the Hospital: Serving Beyond Your Expectation.

Target Population: The target population included all the Registered Nurses working at FMC summing up to 477. The accessible population included all the selected wards; Ludlow Slessor Ward, Male Medical Ward, Female Medical Ward, New Surgical Ward (Males), Bartley Ward (Female Surgical Ward) summing up to 138.

The criteria for eligibility included those registered Nurses that were willing and able to participate in the study. Those that were excluded from the study included all those without the aforementioned criteria.

Table 1: Ward Population Distribution for Study Sites.

Serial No.	Wards	No. of Nurses	Percentage of total population	Sample size
1	Ludlow Slessor Ward	25	18.1%	138
2	Male Medical Ward	21	15.2%	138
3	Female Medical Ward	24	17.3%	138
4	New Surgical Ward	33	23%	138
5	Bartley Ward	35	25.3%	10

Sampling Technique: Total patients were used.

Instrument for Data Collection: The instrument for obtaining data for the study was a structured questionnaire. The questionnaire composed of Four Sections A, B, C, and D. Section A; reveal the demographic data, of the respondents in FMC, Umuahia. Section B; seek to determine the level of knowledge of Nurses toward the care and management of elderly patients with dementia in FMC. Section C; assess the way Nurses feel concerning their care practices in the management of the elderly with dementia in FMC. Section D; evaluate the way nurses perceive the availability of resources in the management of the elderly with dementia in FMC.

Validity of The Instrument: The questionnaire was submitted to experts for content, construct and face validity. Corrections were effected.

Reliability of the Instrument: The reliability of the instrument was tested by the distribution of the questionnaire to 40 registered Nurses who did not participate in the main study and was repeated after two weeks to assess the consistency of the instrument. The results obtained from the test-retest method were calculated using Pearson's Product moment correlations formula to obtain the reliability coefficient score of 0.8.

Method of Data Collection: Data was collected using a self-administered structured questionnaire. The questionnaire was administered and recovered on the spot by the researcher within five days.

Method of Data Analysis: IBM SPSS Version 21 was used to analyze the data, generated from the study. SPSS is a computer software used in cohousing data because it wades the rigour of ambiguous mathematical calculations and time spent in evaluation. Data was arranged in tables and percentages.

Ethical Approval: Written permission was first obtained from the ethical board of the institution of study. A letter introduction to the required place stating that the information obtained was held in confidence by the researcher, who did not coerce the respondent to answer the questionnaire.

Ethical Considerations: The researcher ensured strict confidentiality in discharging this duty, this was done by ensuring that the respondents were adequately briefed on the need for the information and were also assured that information would not be used against them in any form. Personal information was not required.

RESULTS

The table below shows, that 13% (23) are from the age range of 25-29, 21% (21) 30-34, 29% (41) 35-39 and 31% (44) 40 and above.

The data collected in the table below shows, that 57% (80) have certificates. 34% (48) have diploma. 7% (10) have a bachelor's degree. The table below shows, 52% (72) have worked between 0-1, 13% (18) 2-6 years of working experience, 10% (15) 7-11 years and 7% (10) 12 and above. The table below shows that 81% (113) yes to having been exposed to the elderly and 18% (25) said no. The socio-demographic characteristics of this study shows that majority of the respondents are with the age of 40 and above years (31%), had Nursing diploma certificate (57%) with 0 – 1year in service (52%) and are expose to living with the elderly person(s) (81%).

Table 1: Socio-demographic Characteristics of Respondents in Quantitative Data

Socio-demographic Characteristics	Frequency (n)	Percentage %	Total Participants(n)
Age (In years)			
25-29	23	13	138
30-34	30	21	138
35-39	41	29	138
40 and above	44	31	138
Level of Education (Nursing Qualification)			certificate
Certificate	80	57	138
Diploma	48	34	138
Bachelor's Degree	10	7	138
Number of Year(s) in Service			
0-1	72	52	138
2-6	18	13	138
7-11	15	10	138
12 and above	10	7	138
Exposure to living with the elderly person(s)			
Yes	113	81	138
No	25	18	138

Nurses' level of Perception towards the Management of Elderly Patients with Dementia

Table 2 below shows that 3.6% of respondents Strongly Agreed that Nurses offer practical support and advice to patients with dementia. 3.6% agreed 72.5% disagreed and 23.3% strongly disagreed. 14.5% of respondents strongly agreed that thorough history is obtained by Nurses, 14.5% agreed and 71% disagreed. 43.5% of respondents strongly agreed that Nurses do physical examination. 29% agreed 13% disagreed and 14.5% strongly disagreed. 43.5% of respondents strongly agreed that assessment of neurological and psychiatric status is done by nurses 29% agreed 10.8% disagreed and 16.6% strongly disagreed. 36% of respondents strongly agreed that mood is also assessed 36.2% agreed 20.3% disagreed and 7.3% strongly disagreed. 36% of respondents strongly agreed that behavior and ability to dress is checked 36.2% agreed 20.3% disagreed and 7.3% strongly disagreed. Further findings revealed that 43.5% of respondents strongly agreed that adequate nutrition is ensured 29% agreed and 27.6% disagreed. 50.7% of respondents strongly agreed that nurses ensure that patient is oriented, 21.7% agreed and 20.3% disagreed while 7.3% strongly disagreed. 4.3% of respondents strongly agreed that Nurses provide structure and maintain schedule 2.9% agreed and 72.5% disagreed while 20.3% strongly disagreed. 4.3% of respondents strongly agreed that Nurses assist with daily living activities. 2.9% agreed and 72.5% disagreed while 20.3% strongly disagreed. This study indicates that the level of perception towards the management of elderly patients with dementia is negative (**48.8%**).

Table 2: Nurses' level of Perception towards the Management of Elderly Patients with Dementia

S/N	ITEMS	Strongly Agreed	Agreed	Disagreed	Strongly Disagreed
1	Do Nurses offer practical suppory and advice	5(3.6%)	5(3.6%)	100(72.5%)	28(20.3%)
2	Thorough history is obtained by Nurses	20(14.5%)	20(14.5%)	98(71%)	(%)
3	Nurses do physical examination	60(43.5%)	40(29%)	18(13%)	20(14.5%)
4	Assessment of neurological and psychiatric status are done by nurses	60(43.5%)	40(29%)	15(10.8%)	23(16.6%)
5	Mood is also assessed	50(36.2%)	50(36.2%)	28(20.3%)	10(7.3%)
6	Behaviour and ability to dress is checked	50(36.2%)	50(36.2%)	28(20.3%)	10(7.3%)
7	Adequate nutrition is ensured	60(43.5%)	40(29%)	38(27.6%)	(%)
8	Ensure that patient is oriented	70(50.7%)	30(21.7%)	28(20.3%)	10(7.3%)
9	Nurses provide structure and maintain schedule	6(4.3%)	4(2.9%)	100(72.5%)	28(20.3%)
10	Nurses assist with daily living activities	6(4.3%)	4(2.9%)	100(72.5%)	28(20.3%)
		28.3%	20.5%	40.1%	11.4%
		48.8%		51.5%	

Nurses' Knowledge towards the Care and Management of the Elderly with Dementia

In Table 3 76 .1% of respondents agreed that one golden rule of dementia is do not ask direct question while 23.9% said no. 85.5% of respondents agreed that when managing dementia patients, you have to be patient and 14.5% said no. 85.5% of respondents agreed that Nurses should not look frustrated while 23.9% said no. 39.8% of respondents agreed that Nurses Don't argue with dementia patients and 60.1% said no. Further findings indicate that 56.2% of respondents' agreed that second golden rule of dementia is to listen and learn while 43.5% said no. 56.2% of respondents' agreed that learn how to communicate with dementia patients while 43.5% said no. 56.2% of respondents' agreed that there is difficulty in managing the symptoms of dementia while 43.5% said no. 41% of respondents' agreed that the third golden rule of dementia is not to contradict while 58% said no. Lastly, 75.4% of respondents' agreed that dementia patients should be help maintain their quality of life by giving medication and 24.6% said no. 75.4% of respondents' agreed that Prevention of injuries and accidents is vital and 24.6% said no. This study noted that the level of nurses' knowledge towards the care and management of the elderly with dementia is high (65%).

Table 3: Level of Nurses' Knowledge towards the Care and Management of the Elderly with Dementia.

ITEMS	YES	NO
One golden rule of dementia is doesn't ask direct question	105(76.1%)	33(23.9%)
When managing dementia patients, you have to be patient	118(85.5%)	20(14.5%)
Nurses should not look frustrated	118(85.5%)	20(14.5%)
Don't argue with dementia patients	55(39.8%)	83(60.1%)
Second golden rule of dementia is to listen and learn	78(56.2%)	60(43.5%)
Learn how to communicate with dementia patients	78(56.2%)	60(43.5%)
There is difficulty in managing the symptoms of dementia	78(56.2%)	60(43.5%)
Third golden rule of dementia is not to contradict	58(41%)	80(58%)
dementia patients should be help maintain their quality of life by giving medication	104(75.4%)	34(24.6%)
Prevention of injuries and accidents is vital	104(75.4%)	34(24.6%)
	65%	33%

Level of Nurses' Practices in the care of the Elderly with Dementia in FMC.

Table 4 shows that 36.2% of Nurses observe and report any potential signs underlying dementia, 36.2% agreed and 20.3% disagreed while 7.3% strongly disagreed. 43.5% of respondents strongly agreed that Nurses ensure safety, 29% agreed and 27.6% disagreed. 50.7% of respondents strongly agreed that Nurses promote independence of dementia patients, 21.7% agreed and 20.3% disagreed while 7.3% strongly disagreed. 4.3% of respondents strongly agreed that Nurses enhance cognitive function, 2.9% agreed and 72.5% disagreed while 20.3% strongly disagreed. 72.5% of respondents strongly agreed that Nurses provide emotional support 20.3% agreed and 3.6% disagreed while 3.6% strongly disagreed. 71% of respondents strongly agreed that Nurses Reassure patients 14.5% agreed and 314.5% strongly disagreed. Result further shows that 43.5% of respondents strongly agreed that Nurses allow patients to keep as much control of his/her life as possible, 29% agreed and 13% disagreed while 14.5% strongly disagreed. 43.5% of respondents strongly agreed that Nurses respect the person's personal space, 29% agreed and 13% disagreed while 14.5% strongly disagreed. 50.7% of respondents strongly agreed that Nurses build quiet times into the day along with activities, 21.7% agreed and 20.3% disagreed while 7.3% strongly disagreed. 4.3% of respondents strongly agreed that Nurses provide patient with evidence-base information 2.9% agreed and 72.5% disagreed while 20.3% strongly disagreed. This study observed that the level of nurses' practices in the care of the elderly with dementia is high (60)

Table 4: The Level of Nurses' Practices in The Care of The Elderly with Dementia

ITEMS	SA	Agreed	Disagreed	SD
Nurses observe and report any potential signs underlying dementia	50(36.2%)	50(36.2%)	28(20.3%)	10(7.3%)
Nurses ensure safety	60(43.5%)	40(29%)	38(27.6%)	(%)
They promote independence of dementia patients	70(50.7%)	30(21.7%)	28(20.3%)	10(7.3%)
Nurses enhance cognitive function	6(4.3%)	4(2.9%)	100(72.5%)	28(20.3%)
Nurses provide emotional support	100(72.5%)	28(20.3%)	5(3.6%)	5(3.6%)
Reassure patients	98(71%)	20(14.5%)	-	20(14.5%)
Allow patients to keep as much control of his/her life as possible	60(43.5%)	40(29%)	18(13%)	20(14.5%)
Respect the person's personal space	60(43.5%)	40(29%)	15(10.8%)	23(16.6%)
Build quiet times into the day along with activities	70(50.7%)	30(21.7%)	28(20.3%)	10(7.3%)
Provide patient with evidence -base information	6(4.3%)	4(2.9%)	100(72.5%)	28(20.3%)
	42%	17.8%	26.1%	11.2%
	60		37.3%	

Decision rule: If the P-value is less than 0.05 the null hypothesis (H0) will be rejected and the alternative hypothesis (H1) will be accepted otherwise null hypothesis will be accepted and the alternative is rejected.

Hypothesis 1

H01 -There is no significant relationship between the Level of knowledge of nurses and the management of elderly patients with dementia in FMC, Umuahia. The result of this hypothesis is presented in Table 5.

Table 5 ANOVA results indicates that there was significant relationship between the Level of Knowledge of nurses and the Management of elderly Patients with dementia in FMC, Umuahia ($F = 268.647$ $p= .005$ at $p <.05$) which is less than

the 0.05 alpha level. Therefore, this study suggests a significant statistical difference in level of knowledge. This implies the level of knowledge of Nurses and the Management of the elderly with dementia is high. Hence, we reject the null hypothesis which says, that there was no significant relationship between the Level of Knowledge of nurses and the Management of elderly Patients with dementia in FMC, Umuahia.

ANOVA

Table 5: ANOVA of nurses level of knowledge and the management of elderly patients with dementia

		Sum of Squares	Df	Mean Square	F	Sig.
To what extent do the Nurses on duty manage the Dementia Patients and other workloads in the ward?	Between Groups	44.467	3	14.822	88.177	<.005
	Within Groups	22.525	134	.168		
	Total	66.993	137			
How do you feel concerning the competence level of the Nurses who attend to Elderly Patients with Dementia?	Between Groups	120.496	3	40.165	180.472	<.005
	Within Groups	29.823	134	.223		
	Total	150.319	137		268.647	

DISCUSSION OF FINDINGS

This study assesses the Perception of Nurses toward the Management of Elderly Patients with Dementia at Federal Medical Center, Umuahia The socio-demographic characteristics of this study shows that majority of the respondents are with the age of 40 and above years, had Nursing diploma certificate, with 0 – 1year in service and are expose to living with the elderly person(s).

This study indicates that the level of perception towards the management of elderly patients with dementia is negative. This study support Cowdell (2010) who noted that the experience of caregivers and nurses in the hospital tends to be negative. Similarly, Evripidou et al. (2019) noted their respondents face challenging behaviour, such as agitation, aggression, resistance to care, and confusion, in patients with dementia who often have comorbidities. This study concurs with Deasey et al., (2014) who found in their study that emergency department (ED) nurses have a less positive attitude towards dementia patients. This study corresponds to Ojewale (2013) who shows that her respondent's attitude towards care of elderly patient with dementia is negative

This study noted that the level of nurses' knowledge towards the care and management of the elderly with dementia is high. This study is in contrast to Fessey, (2007) who observed knowledge deficit among nurses in how to respond to dementia related, challenging behavior. This study is not in support of Evripidou, Melina & Charalambous, Andreas & Middleton, Nicos & Papastavrou, and Evridiki. (2018) who indicated that Nurses lack knowledge in the provision of dementia care.

This study is consistent with Ojewale (2013) who observed that her respondents are knowledgeable about aging process.

This study observed that the level of nurses' practices in the care of the elderly with dementia is high. This study is in contrast to Evripidou, Melina & Charalambous, Andreas & Middleton, Nicos & Papastavrou, Evridiki.(2018) who revealed that Nurses lack communication skills, management strategies, and confidence in the provision of dementia care.

CONCLUSIONS

Based on the findings and analysis of the data from the respondents, the researcher concluded respondents' level of knowledge towards the management of elderly patients with dementia is high but perception is low. Most of them believe that the patients display hysterical sickness which is called "Dementia". The researcher is of the view that a lack of adequate knowledge towards the care and management of elderly patients with dementia leads to fragmented care and body-draining services in the wards.

RECOMMENDATIONS

Based on the findings of the study, the following recommendations were made, nurses should be encouraged to attend seminars to improve the knowledge on Dementia management. Also, enhancement in the enlightenment of Nurses' Perceptions toward elderly patients.

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