

# About You

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What is your title?

Q.1

☐ Mr

☐ Mrs

☐ Ms

☐ Dr

☐ Other:

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What is your first name?

Q.2

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What is your surname or family name?

Q.3

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What is your gender?

Q.4

☐ Male

☐ Female

☐ Gender Fluid

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What is your age?

Q.5

- ☐ 16-19
  - ☐ 20-29
  - ☐ 30-39
  - ☐ 40-49
  - ☐ 50-59
  - ☐ 60-69
  - ☐ 70-79
  - ☐ 80-89
  - ☐ 90-99
- 

What is your marital status?

Q.6

- ☐ Married or domestic partnership
  - ☐ Widowed
  - ☐ Seperated
  - ☐ Divorced
  - ☐ Single
  - ☐ Other:
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What is the highest level of education you have completed?

Q.7

- ☐ Completed Primary School
  - ☐ Completed Secondary Education (Leaving Certificate or equivalent)
  - ☐ Partly completed Secondary Education (Intermediate/Junior Certificate or equivalent)
  - ☐ Further Education (Vocational Education/ Apprenticeship)
  - ☐ Higher Education Undergraduate (Higher Certificate, Bachelors Degree)
  - ☐ Higher Education (Postgraduate Masters Qualification, or PhD)
  - ☐ No formal education
  - ☐ Other:
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What is your employment status?

- ☐ Homemaker
  - ☐ Unemployed
  - ☐ Employed Part-Time
  - ☐ Employed Full-Time
  - ☐ Self-Employed
  - ☐ Retired
  - ☐ Student
  - ☐ Other:
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What county do you live in?

- ☐ Donegal
  - ☐ Sligo
  - ☐ Leitrim
  - ☐ Monaghan
  - ☐ Cavan
  - ☐ Mayo
  - ☐ Roscommon
  - ☐ Longford
  - ☐ Westmeath
  - ☐ Louth
  - ☐ Meath
  - ☐ Kildare
  - ☐ Dublin
  - ☐ Offaly
  - ☐ Galway
  - ☐ Clare
  - ☐ Limerick
  - ☐ Laois
  - ☐ Carlow
  - ☐ Kilkenny
  - ☐ Tipperary
  - ☐ Wexford
  - ☐ Waterford
  - ☐ Cork
  - ☐ Kerry
  - ☐ Kilkenny
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# About Your Caring Situation

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What is your relationship to the person for whom you are providing care?

Q.10

- ☐ Spouse / Partner
- ☐ Sibling
- ☐ Parent
- ☐ Parent-in-law
- ☐ Other:

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Do you share these caring responsibilities with any other member of your family?

Q.11

- ☐ Yes
- ☐ No

Please help us understand why you selected this answer

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What age is the person with dementia for whom you are providing care?

Q.12

- ☐ 30-39
  - ☐ 40-49
  - ☐ 50-59
  - ☐ 60-69
  - ☐ 70-79
  - ☐ 80-89
  - ☐ 90-99
-

How long have you been providing care to your loved one with dementia?

Q.13

- ☐ Less than one year
  - ☐ 1-2 years
  - ☐ 2-3 years
  - ☐ 3-4 years
  - ☐ 4-5 years
  - ☐ More than 5 years
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Approximately how many hours per week do you provide care to your loved one with dementia?

Q.14

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# Understanding Dementia

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Please rate your understanding of dementia on the following scale (where 1 is a very low and incomplete level of understanding to 5 which is a very high and complete understanding of dementia) Q.15

- ☐ 1
  - ☐ 2
  - ☐ 3
  - ☐ 4
  - ☐ 5
- 

## Changing Relationships

Q.16

	Very negative	Negative	No change	Positive	Very positive
What impact has caring for your loved one with dementia had on your relationship with them?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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## Communications

Q.17

	Very infrequently	Infrequently	Neither infrequently or frequently	Frequently	Very frequently
To what extent do you use verbal (speaking / talking) communications when caring for your loved one?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
To what extent do you use non-verbal (eye contact, body language, facial expressions) communications when caring for your loved one with dementia?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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	Very difficult	Difficult	Neither difficult or easy	Easy	Very easy
How easy do you find it to ensure your loved one follows your instructions to carry out daily tasks?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How easy do you find it to ensure your loved one with dementia answers questions?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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# Responsive Behaviours

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To what extent do you feel frustrated by sudden changes in your loved one's behaviour as a result of their dementia (please choose the most appropriate option below where 1 is Totally Frustrating to 5 which is Not Frustrating)? Q.19

- ☐ 1
  - ☐ 2
  - ☐ 3
  - ☐ 4
  - ☐ 5
- 

## Responsive Behaviours

Q.20

	Totally disagree	Disagree	Neither disagree or agree	Agree	Totally Agree
To what extent do you agree with the following statement: I feel I can influence my loved one's behaviour	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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Nutrition and Eating Well: How do you feel about the following statements? Q.21

	Totally disagree	Disagree	Neither disagree or agree	Agree	Totally Agree
I believe my loved one eats well	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I believe my loved one has a balanced diet	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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Engaging Life Activities / Quality of Life: How do you feel about the following statement?

Q.22

	Totally disagree	Disagree	Neither disagree or agree	Agree	Totally Agree
My loved one with dementia has a very good quality of life	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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Personal Care: Please rate your personal care skills on the matrix below. If you have not already undertaken personal care skills for your loved one please choose N/A

Q.23

	Very poor	Poor	Competent	Very Competent	N/A
Toileting	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Washing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Dressing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Oral Hygiene	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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Safety at Home: To what extent to you agree with the following statement:

Q.24

	Totally disagree	Disagree	Neither disagree or agree	Agree	Totally agree
I am confident I can provide care in a safe, hazard-free environment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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## Looking After Yourself: to what extent do you agree with the following statements?

Q.25

	Totally disagree	Disagree	Neither disagree or agree	Agree	Totally agree
I find time to do things for myself	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
It is important to take breaks from caring and to make time for my own interests	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Providing care to my loved one with dementia is rewarding	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel capable of providing care for my loved one with dementia now and in the future	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I know where to find relevant information to help me in my caring role	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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