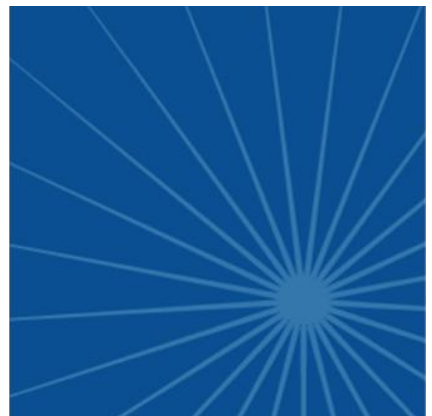


# Alzheimers New Zealand

## Awareness and Understanding of Dementia in New Zealand

July 2015 Report



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# Introduction

## ■ Background

Alzheimers New Zealand is a not for profit organisation focused on supporting all people affected by dementia: people with dementia, their home-based carers, families/ whānau and friends. They do this by providing awareness raising, advocacy, information services and resources to and for the public generally and health professionals and health providers in the dementia sector/ community. The Wellington based national operation supports a federation of 21 locally based Alzheimers organisations throughout New Zealand.

In 2014, Alzheimers NZ secured funding to continue their national awareness raising campaign through to 2016. They commissioned UMR in 2014 to conduct a research study to measure the level of awareness and understanding of dementia, and of Alzheimers NZ, amongst the New Zealand public. This year, UMR repeated a shortened version of the 2014 benchmark survey; the results of which are summarised in the following document.

The survey also included additional questions to measure the awareness of marketing activity generally and the 'Let's get our heads around dementia' campaign specifically and to provide benchmarks for future research. The results from these questions are available in a separate document.

## ■ Objectives and Outcomes

The objectives of this research were to:

- Measure understanding and awareness of dementia in New Zealand.
- Compare key measures of awareness and understanding against the key benchmark measures from 2014.

## ■ Methodology

Research was conducted using:

- A telephone omnibus survey of a nationally representative sample of 750 New Zealanders.
- A booster sample of Maori; n=75 to achieve a total sample of n=150 was also included to provide more in-depth and robust awareness and understanding among Maori.
- Fieldwork was conducted during mid May 2015.

## ■ Margins of Error

- **Main Sample** – The margin of error for a 50% figure at the 95% confidence level for a sample size is 750 is plus or minus 3.6%.
- **Maori Booster Sample** – The margin of error for a 50% figure at the 95% confidence level for a sample size of 150 is plus or minus 8%.

## ■ Reporting

This document contains commentary from both of the surveys, top line tables and an executive summary of key findings.

# Summary of Main Findings

## ■ Key Findings

- Unprompted knowledge for Maori respondents has improved;
- There is increased awareness that Alzheimer's is a fatal disease or condition;
- But a sizable proportion still do not know this or that Alzheimer's does not have to run in the family for them to be at risk and that it is not a typical part of the aging process;
- Memory loss is by far the most commonly known symptom of Alzheimer's Disease;
- More people are concerned how a person with dementia might act in public than in 2014;
- But are generally open to others knowing if a close family member has a Alzheimer's diagnosis;
- And, more would generally prefer to care for someone with Alzheimer's than be diagnosed themselves;
- A cancer diagnosis is still a far greater concern than a dementia one.

## More knowledgeable respondents are:

Females;

Those aged 45+;

Those who know or have known someone with Alzheimer's Disease;

Those with a higher level of education;

***These findings are broadly consistent with 2014.***

Also more knowledgeable are those who are aware of the media campaign; Let's get our head around Dementia; suggesting that exposure to the campaign has increased knowledge and understanding.

### ■ Knowledge of Alzheimer's disease

Unprompted knowledge for Maori respondents has improved;

Unprompted knowledge for general public is consistent with 2014 findings;

Prompted knowledge has decreased slightly; maybe in part due to the less detailed description used in this survey compared with 2014.

### ■ Symptoms of Dementia

Memory loss is still the most commonly cited symptom of dementia;

Changes in mood and behaviour, repeating things, disorientation of time and place and confusion are mentioned by a much smaller proportion of each audience.

***These findings are broadly consistent with 2014.***

### ■ Perceptions of Dementia (Statement Testing)

The majority of respondents disagree 'Alzheimer's has to run in my family to be at risk'; consistent with 2014;

The majority of respondents disagree 'Alzheimer's is a typical part of aging'

However, approximately a half do not believe 'Alzheimer's is a fatal disease'.

***A sizable proportion of respondents still hold incorrect perceptions for all statements and ongoing education is required.***

## ■ Personal Experience of Alzheimer's

63% of general public and 72% of Maori know or have known a person with Alzheimer's; broadly consistent with 2014.

## ■ Attitudes towards Dementia (Statement Testing)

Around two fifths of people would be worried how someone who had dementia would act in public; an increase from those who were worried in 2014;

A small proportion would be reluctant to tell other people if a close family member was diagnosed with Alzheimer's; broadly consistent with 2014;

About a quarter would rather be diagnosed with Alzheimer's than care for someone with Alzheimers; an increase from those who agreed this in 2014.

## ■ Concerns Regarding Cancer versus Dementia Diagnosis

Significantly more people are more concerned about a Cancer than a dementia diagnosis;

However, around a third are concerned with both equally; and,

Around a quarter are concerned with neither.

# Executive summary

## ■ Knowledge of Alzheimer's disease

Around half of respondents reported knowing 'a lot' or 'fair amount' about Alzheimer's. This increased to 61% when prompted with a brief description.

The large majority of respondents could only recall memory loss as a symptom of Alzheimer's disease.

Views of Alzheimer's were mostly accurate, with clear majorities disagreeing that it has to run in their family to be at risk and that it is a typical part of ageing.

The exception was knowledge around it being a fatal disease - with this statement dividing respondents.

## ■ Personal experience and attitudes towards Alzheimer's disease

Almost two thirds of respondents reported knowing or having known a person with Alzheimer's; respondents 45 years of age and over were more likely to know someone with the disease.

Most respondents indicated an open attitude towards Alzheimer's with a strong majority disagreeing they would be reluctant to tell others if a close family member was diagnosed and a majority disagreeing they would be worried about being out in public with someone suffering from the disease.

There is a consensus that it would be better to care for someone that had Alzheimer's, rather than be diagnosed with it.

When compared to cancer, three times more respondents were concerned about cancer than Alzheimer's, though a notable proportion (a third) were concerned with both equally and around a quarter with neither.



# Section One: Understanding of Alzheimer's Disease

## 1.1 Unprompted understanding of Alzheimer's disease

### Declared knowledge of Alzheimer's disease

<i>How much do you feel you know about Alzheimer's disease?*</i>				
	General public %		Maori booster %	
	2014	2015	2014	2015
<i>Base: n=</i>	<b>750</b>	<b>750</b>	<b>150</b>	<b>150</b>
A lot	18	13	13	14
A fair amount	36	38	24	29
<b>Total 'a lot' + 'fair amount'</b>	<b>54</b>	<b>51</b>	<b>37</b>	<b>43</b>
Not that much	36	32	49	41
Hardly anything	10	16	14	16
<b>Total 'not much' + 'hardly anything'</b>	<b>46</b>	<b>48</b>	<b>63</b>	<b>57</b>
Unsure	-	1	-	-

\*In 2014, question read as 'How much do you feel you know about each of the following conditions? A lot, a fair amount, not that much or hardly anything?' followed by a list of conditions including Alzheimer's.

Base: All respondents

#### ■ General public

Just over half of respondents (51%) reported knowing 'a lot' or 'fair amount' about Alzheimer's disease this year – a result consistent with 2014 when 54% reported this.

Detailed knowledge of Alzheimer's has had a small decrease with those that reported knowing 'a lot' dropping 5% to 13%.

#### ■ Maori booster

Results showed some improvement for Maori, with overall knowledge of Alzheimer's increasing 6% to 43%.

The proportion that said they knew 'a lot' was similar to the general public at 14%.

## ■ Demographics (general public)

Females were significantly more likely than males to report knowing 'a lot' or 'fair amount' about Alzheimer's (59% vs. 43%).

This was also true for respondents aged 45 years plus compared to younger respondents under 45; 63% of 45+ respondents reported knowing 'a lot' or 'a fair amount' about Alzheimer's compared with 38% of their younger counterparts.

Regionally, Wellington was most likely to declare a reasonable knowledge of dementia (58%) and rural areas were the least likely (42%).

Findings also indicated that those with higher levels of education were more likely to declare knowledge of dementia than those with lower levels (60% with university qualification reported knowing 'a lot' or 'a fair amount' compared with 42% up to secondary school education level).

## ■ By experiences and views of dementia

Respondents that know someone with Alzheimer's were more likely to declare knowledge of the disease at 66% (compared to 27% of those that did not).

Those that had seen the Alzheimers NZ campaign were also significantly more likely to declare knowledge at 68%, compared with those who had not; 47%.

## 1.2 Prompted understanding of Alzheimer's disease

### Prompted declared knowledge of Alzheimer's disease

*As you may be aware, Alzheimer's disease is a type of dementia that causes problems with memory, thinking and behaviour. Some of the following questions may or may not be closely connected to your own experience.*

*Based on that description, would you say you know a lot, a fair amount, not that much or hardly anything about Alzheimer's disease?\**

	General public %		Maori booster %	
	2014	2015	2014	2015
Base: n=	750	750	150	150
A lot	19	16	13	16
A fair amount	46	45	47	35
<b>Total 'a lot' + 'fair amount'</b>	<b>65</b>	<b>61</b>	<b>60</b>	<b>51</b>
Not that much	27	27	29	37
Hardly anything	8	12	11	12
<b>Total 'not much' + 'hardly anything'</b>	<b>35</b>	<b>39</b>	<b>40</b>	<b>49</b>
Unsure	-	-	-	-

\*In 2014, question asked about dementia rather than Alzheimer's disease. The description given was also more detailed, a copy of the 2014 description is as follows:

*'As you may be aware, the term "dementia" describes a group of conditions which can affect memory, thinking, behaviour, personality and emotion. It is caused by physical changes in the brain. Because dementia is a progressive condition, symptoms will gradually worsen. There are many different types of dementia, the most common of which is Alzheimer's disease.'*

Base: All respondents

#### ■ General public

After being read a brief description of Alzheimer's disease, declared knowledge of Alzheimer's increased 10% to 61%.

This was a slightly lower figure than that recorded in 2014 (down 4% from 65%). A possible explanation for this is that the description of Alzheimer's given this year was less detailed than the description given in 2014.

#### ■ Maori booster

Levels of declared knowledge for Maori also increased after the description, going up 8% to 51%.

Consistent with the general public sample, this was also lower than the figure recorded in 2014 (down 9% from 60%).

## ■ Demographics (general public)

The differences between subgroups remained when respondents were prompted with a description of Alzheimer's Disease.

- Once more, females were significantly more likely to declare knowing 'a lot' or 'fair amount' about the disease compared to males (68% vs. 52%).
- Older respondents (45 plus) declared more knowledge than their younger - under 45 counterparts (70% vs. 51%).
- Wellington remained the region most likely to declare a reasonable level of knowledge (67%).

## ■ By experiences and views of dementia

After hearing a brief description, of Alzheimer's Disease three quarters of those that know someone with Alzheimer's reported knowing 'a lot' or 'fair amount'.

Seventy three percent of respondents who had seen the Alzheimers NZ campaign declared knowing 'a lot' or 'a fair amount' compared with 57% who had not.

# Section Two: Recognising Symptoms of Dementia

## 2.1 Suspected symptoms or behaviour associated with Alzheimer's (unprompted, open ended)

### Unprompted symptoms of Alzheimer's

*What sort of symptoms or behaviour would make you suspect someone you knew had Alzheimer's disease?\**

	General public %		Maori booster %	
	2014	2015	2014	2015
<i>Base: n=</i>	<b>750</b>	<b>750</b>	<b>150</b>	<b>150</b>
Memory loss	79	84	81	80
Changes in mood or behaviour	25	16	21	17
Repeating things	10	10	9	15
Disorientation of time and place	9	10	7	10
Confusion (general comment)	13	6	5	8
Misplacing things	3	2	1	2
Changes in personality	6	2	5	1
Difficulty performing regular tasks	5	2	1	1
Problems with language	5	2	6	-
Living in the past	1	1	4	1
Loss of initiative	3	1	-	2
Problems with abstract thinking	-	1	-	1
Poor concentration	1	1	1	-
Loss of coordination	1	1	1	2
Lose control of bodily functions	1	-	2	-
Poor judgement	2	-	1	-
Other	2	2	3	1
Don't know/unsure	7	6	7	6

\*In 2014, question referred to dementia rather than Alzheimer's disease

Base: All respondents

### ■ General public

Similar to 2014, by far the most cited symptom that would make respondent's suspect someone they know of having Alzheimer's disease was memory loss, with 84% citing this (up 5%).

Other symptoms were cited by much lower proportions of respondents:

- Changes in mood and behaviour at 16% (down 9% from 25%);
- Repeating things (10%, unchanged);
- Disorientation of time and place at 9% (consistent with 10% in 2014).

The only other notable response was a general comment about confusion at 6% (down 7%), though this may be explained by respondents being more specific describing memory loss as a symptom.

## ■ Maori booster

The top symptoms cited by Maori were the same as those cited by the general public:

- Memory loss was cited by 80% (consistent with 81% in 2014);
- Changes in mood or behaviour (17%, consistent with 21% in 2014);
- Repeating things (15%; a marginal 6% increase from 2014);
- Disorientation of time and place (10%, consistent with 7%), and;
- Confusion (8%, consistent with 5% in 2014).

# Section Three: Perceptions of Alzheimer's

## 3.1 Statement testing about perceptions of Alzheimer's

### Statement testing - perceptions of Alzheimer's

Summary: total 'strongly agree' + 'agree'

*How much do you agree or disagree with the following statements? Strongly agree, Agree, Disagree or Strongly Disagree.*

	General public %		Maori booster %	
	2014	2015	2014	2015
Base: n=	750	750	150	150
Alzheimer's is a fatal disease (2014: dementia is a fatal condition)	27	46	30	49
Alzheimer's is a typical part of aging (2014: It is a normal part of the aging process)	25	34	25	29
Alzheimer's has to run in my family for me to be at risk <sup>^</sup>	20	18	21	21

\*In 2014, question used a different scale: 'For each of the following statements about dementia, please tell me whether you think they are definitely true, probably true, probably false, definitely false or if you are not sure.'

<sup>^</sup>The sample size for Maori respondents in 2014 was n=82 due to this question only being asked in the Omni that year

Base: All respondents

#### ■ General public

Views of Alzheimer's were mostly accurate with two of the three statements being answered correctly by a clear majority and only one of the statements dividing respondents.

The statement that most respondents answered correctly was '**Alzheimer's has to run in my family for me to be at risk**'. 70% disagreed (unchanged) with this statement and only 18% in agreement (consistent with 20% in 2014).

A clear majority of respondents also answered the statement '**Alzheimer's is a typical part of aging**' correctly; 63% were in disagreement (down 7% from 2014). However, 34% of respondents agreed with this statement; an increase of 9% since 2014.

The third statement – '**Alzheimer's is a fatal disease**' – elicited a more polarised response. Just under half (46%) agreed that Alzheimer's is a fatal disease this year and a similar proportion disagreed; 47%.

This is a large increase in agreement compared to 2014 (up 19%), though this may be partly explained by a wording change in the question – with the term dementia, rather than Alzheimer's having been tested in 2014.

## ■ Maori booster

Results for Maori were similar to those of the general public.

Strong majorities disagreed that Alzheimer's has to run in their family for them to be at risk (68% compared to 70% general public) and that it is a typical part of aging (66% compared to 63% general public).

A slightly larger proportion of Maori agreed that Alzheimer's is a fatal disease; 49% compared to 46% of the general public and 42% of Maori disagreed. 30% of Maori agreed with this statement in 2014.

## ■ Demographics (general public)

In general, females were more likely to answer correctly compared to males.

Those 45 years of age and over and those that knew someone with Alzheimer's were also more likely to hold accurate beliefs compared to respondents under 45 years of age and those that did not know anybody with Alzheimer's.

Higher proportions of respondents who were aware of the advertising campaign answered the statements 'Alzheimer's is a fatal disease' and 'Alzheimer's disease has to run in my family for me to be at risk' correctly. Views were evenly split for 'Alzheimer's disease is a typical part of aging'.



## Statement testing - perceptions of Alzheimer's

### - General public

*How much do you agree or disagree with the following statements? Strongly agree, Agree, Disagree or Strongly Disagree.*

	<b>Strongly agree</b>	<b>Agree</b>	<b>Total 'agree'</b>	<b>Disagree</b>	<b>Strongly disagree</b>	<b>Total 'disagree'</b>	<b>Unsure</b>	<b>Refused</b>
	<b>%</b>	<b>%</b>	<b>%</b>	<b>%</b>	<b>%</b>	<b>%</b>	<b>%</b>	<b>%</b>
Alzheimer's is a fatal disease (2014: dementia is a fatal condition)	16	30	<b>46</b>	36	11	<b>47</b>	7	-
Alzheimer's is a typical part of aging (2014: It is a normal part of the aging process)	7	27	<b>34</b>	45	18	<b>63</b>	3	-
Alzheimer's has to run in my family for me to be at risk	4	14	<b>18</b>	50	20	<b>70</b>	12	-

*\*In 2014, question used a different scale: 'For each of the following statements about dementia, please tell me whether you think they are definitely true, probably true, probably false, definitely false or if you are not sure.'*

Base: All respondents

## Statement testing - perceptions of Alzheimer's

### - Maori booster

*How much do you agree or disagree with the following statements? Strongly agree, Agree, Disagree or Strongly Disagree.*

	<b>Strongly agree</b>	<b>Agree</b>	<b>Total 'agree'</b>	<b>Disagree</b>	<b>Strongly disagree</b>	<b>Total 'disagree'</b>	<b>Unsure</b>	<b>Refused</b>
	<b>%</b>	<b>%</b>	<b>%</b>	<b>%</b>	<b>%</b>	<b>%</b>	<b>%</b>	<b>%</b>
Alzheimer's is a fatal disease (2014: dementia is a fatal condition)	14	35	<b>49</b>	34	8	<b>42</b>	9	-
Alzheimer's is a typical part of aging (2014: It is a normal part of the aging process)	4	25	<b>29</b>	56	10	<b>66</b>	4	1
Alzheimer's has to run in my family for me to be at risk	4	17	<b>21</b>	50	18	<b>68</b>	11	-

\*In 2014, question used a different scale: *'For each of the following statements about dementia, please tell me whether you think they are definitely true, probably true, probably false, definitely false or if you are not sure.'*

Base: Maori booster (n=150)

# Section Four: Personal Experience of Alzheimer's

## 4.1 Knowing someone with Alzheimer's disease

### Know a person with Alzheimer's disease

<i>Do you know, or have you known, a person with Alzheimer's?</i>				
	General public %		Maori booster %	
	2014	2015	2014	2015
<i>Base: n=</i>	<b>750</b>	<b>750</b>	<b>150</b>	<b>150</b>
Yes	67	63	67	72
No	32	35	31	28
Unsure	1	2	2	-

\*In 2014, question referred to dementia, rather than Alzheimer's disease

Base: All respondents

#### ■ General public

Almost two thirds (63%) of respondents said they know, or had known a person with Alzheimer's disease in this survey – marginally fewer than the 67% who said this in 2014<sup>1</sup>.

#### ■ Maori booster

Maori were more likely to report knowing, or having known someone with the disease than Non-Maori; 72% compared with 63%.

This is an indicative increase compared to 2014 (67%).

#### ■ Demographics (general public)

The largest difference between subgroups was by age-group. Over three quarters (77%) of those 45 years of age and over reported knowing or having known someone with Alzheimer's compared to 48% of those under 45.

Females were more likely to report knowing or having known someone with the disease (68%) compared to males (58%).

Regionally, Aucklanders were the least likely to report knowing or having known someone with the disease. 50% reported this compared to 71% in provincial regions and 67% in Wellington and Christchurch.

<sup>1</sup> The term 'dementia' was used instead of Alzheimer's in 2014.

# Section Five: Attitudes Towards Alzheimer's Disease

## 5.1 Statement testing about attitudes towards Alzheimer's

### Statement testing - attitudes towards Alzheimer's

Summary: total 'strongly agree' + 'agree'

*How much do you agree or disagree with the following statements? Strongly agree, Agree, Disagree or Strongly Disagree.*

	General public %		Maori booster %	
	2014	2015	2014	2015
<i>Base: n=</i>	<b>750</b>	<b>750</b>	<b>150</b>	<b>150</b>
If I was out in public with someone who had dementia, I would be worried about how they would act.	32	39	24	40
If a close family member was diagnosed with Alzheimer's, I would be reluctant to tell other people about it*	19	15	14	13
I would rather be diagnosed with Alzheimer's than care for someone with Alzheimer's*	18	24	17	26

\*In 2014, these two questions used the term 'dementia,' rather than Alzheimer's.

Note: In 2014, questions asked: 'Using a 0 to 10 scale where - means strongly disagree and 10 means strongly agree, how strongly do you agree or disagree with the following statements?' The table shows the sum of 7-10 for that year.

Base: All respondents

Please note that the scales used to answer the questions in this section between years are different enough that comparisons between the years are not valid. Although the table shows responses from both years, differences between the years will not be discussed in the text.

#### ■ General public

Most respondents gave answers indicating they would be open about Alzheimer's disease. A strong majority (83%) disagreed that if a close family member was diagnosed with Alzheimer's, they would be reluctant to tell other people about it and only 15% agreed.

A majority of respondents (56%) disagreed that if they were out in public with someone who had dementia, they would be worried about how they would act. Even so, a notable minority did express some concern, with 39% agreeing with the statement.

Just under one quarter (24%) said they would rather be diagnosed with Alzheimer's than care for someone with Alzheimer's and 61% disagreed with this statement.

## ■ Maori booster

Sentiment was very similar among Maori respondents.

- Large proportions disagreed that if a close family member was diagnosed with Alzheimer's, they would be reluctant to tell other people about it (87%, 13% agreed);
- Over half disagreed that if they were out in public with someone who had dementia, they would be worried about how they would act (58%), though two fifths (40%) agreed.
- A much larger proportion disagreed that they would rather be diagnosed with Alzheimer's than care for someone with Alzheimer's (53% ) though over a quarter (26%) agreed

## ■ Demographics (general public)

In general, females and those that know someone with Alzheimer's were more likely to disagree with the statements tested; Aucklanders were less likely to disagree.

When looking at the statements in more detail, it was found:

- There were no significant differences between genders and age groups for the statement 'if I was out in public with someone who had dementia, I would be worried about how they would act'.
- Respondents 45 years and over were slightly more likely to agree that they 'would rather be diagnosed with Alzheimer's than care for someone with Alzheimer's' than those under 45, though the majority still disagreed. There was no significant regional difference for this question.

## Statement testing - General public

*How much do you agree or disagree with the following statements? Strongly agree, Agree, Disagree or Strongly Disagree.*

	<b>Strongly agree</b>	<b>Agree</b>	<b>Total 'agree'</b>	<b>Disagree</b>	<b>Strongly disagree</b>	<b>Total 'disagree'</b>	<b>Unsure</b>	<b>Refused</b>
	%	%	%	%	%	%	%	%
If I was out in public with someone who had dementia, I would be worried about how they would act	9	30	<b>39</b>	42	14	<b>56</b>	5	-
If a close family member was diagnosed with Alzheimer's, I would be reluctant to tell other people about it*	4	11	<b>15</b>	49	34	<b>83</b>	2	-
I would rather be diagnosed with Alzheimer's than care for someone with Alzheimer's*	7	17	<b>24</b>	41	20	<b>61</b>	13	2

\*In 2014, these two questions used the term 'dementia,' rather than Alzheimer's.

Note: In 2014, questions asked: 'Using a 0 to 10 scale where - means strongly disagree and 10 means strongly agree, how strongly do you agree or disagree with the following statements?' The table shows the sum of 7-10 for that year.

Base: All respondents (n=750)

## Statement testing

### - Maori booster

*How much do you agree or disagree with the following statements? Strongly agree, Agree, Disagree or Strongly Disagree.*

	Strongly agree	Agree	Total 'agree'	Disagree	Strongly disagree	Total 'disagree'	Unsure	Refused
	%	%	%	%	%	%	%	%
If I was out in public with someone who had dementia, I would be worried about how they would act	8	32	<b>40</b>	45	13	<b>58</b>	2	0
If a close family member was diagnosed with Alzheimer's, I would be reluctant to tell other people about it*	3	10	<b>13</b>	50	37	<b>87</b>	0	0
I would rather be diagnosed with Alzheimer's than care for someone with Alzheimer's*	4	22	<b>26</b>	41	12	<b>53</b>	17	4

\*In 2014, these two questions used the term 'dementia,' rather than Alzheimer's.

Note: In 2014, questions asked: 'Using a 0 to 10 scale where - means strongly disagree and 10 means strongly agree, how strongly do you agree or disagree with the following statements?' The table shows the sum of 7-10 for that year.

Base: Maori booster (n=150)

# Section Six: Concerns Regarding Cancer versus Dementia Diagnosis

## 6.1 Concerns regarding cancer versus dementia diagnosis

**Note:** In the 2014 survey respondents were not read the entire list of responses over the phone. This time, in order for the findings to be more comparable at an International level, the 'both equally' and 'neither' options were also read to respondents. Correspondingly, both options recorded a large increase in selection.

### Bigger concern: dementia or cancer

<i>Would you say you were more concerned about being diagnosed with cancer, dementia, both equally or neither. Or have you already been diagnosed with cancer or dementia?</i>				
	General public %		Maori booster %	
	2014	2015	2014	2015
<i>Base: n=</i>	<b>750</b>	<b>750</b>	<b>150</b>	<b>150</b>
More concerned about Dementia	16	9	15	7
More concerned about Cancer	56	26	62	26
Both equally	10	33	8	37
Neither	10	24	10	25
Not applicable, I have already been diagnosed with cancer or dementia.	2	5	1	2
Unsure	6	3	4	3

Note: in 2014, question asked 'Would you say you were more concerned about being diagnosed with cancer or dementia in the future?'

Base: All respondents

#### ■ General public

In 2015, 9% of respondents explicitly chose dementia as the condition they were more concerned about (7% less than those who explicitly chose it in 2014) and 26% chose cancer versus 56% in 2014.

The option 'both equally' increased to 33% (up 23% from 10% in 2014).

A more surprising result was that one quarter of respondents that said they were not concerned with either condition, which increased by 14% to 24% in 2015.

When comparing the respondents that **only chose** either the dementia or cancer response each year, the proportion that chose dementia was just slightly higher in 2015 (when looking at only those that chose cancer or dementia, 26% chose dementia in 2015 compared to 22% in 2014<sup>2</sup>). Cancer was by far the bigger concern in both years.

<sup>2</sup> These are adjusted figures which exclude 'both equally', 'neither', 'not applicable' and 'unsure'



## ■ Maori booster

Overall, 7% of Maori respondents reported being more concerned about dementia, 26% about cancer and 37% about both equally in 2015. Similar to the general public, there was a large increase in the proportion that said they were concerned about neither condition in 2015, up 15% to 25% and a quarter (25%) was unconcerned about either condition.

When looking at **just those** that chose dementia or cancer, there was little difference between years. In 2015, 21% chose dementia compared to 19% in 2014.

Cancer was by far the bigger concern in both years.

## ■ Demographics (general public)

There were no differences in levels of concern between genders.

Although cancer was the main concern for any age group, respondents 45 years and over were more likely to report being concerned about dementia compared to those under 45 (31% that explicitly chose cancer or dementia compared to 19% of those under 45).

## ■ By experiences and views of dementia

Those that said they know 'a lot' or 'fair amount' about Alzheimer's were also more concerned about dementia than the general public, as were those that know or had known someone with dementia.

## ■ International studies

Last year, UMR reported on two studies showing that American adults and adults from an international study feared a diagnosis of cancer more than Alzheimer's, but that the results were relatively close. When looking at the UMR results this year, the results are not as close as the international studies, with a clearly larger proportion of New Zealanders reporting being more concerned with cancer than dementia (three times more).

The American study conducted for the MetLife Foundation found that 31% of American adults feared Alzheimer's the most and 41% feared cancer the most (Harris Interactive, 2010) and the Abt SRBI (2014) study for the Alzheimer's Association also showed a close ratio between those most afraid of cancer (42%) compared to Alzheimer's (23%).

A quick internet search for 'fear of cancer versus dementia' restricted to the past one year shows a number of headlines reporting on recent polls suggesting that internationally there are now regions where people do fear dementia more than cancer, and that this is especially true for subgroups over the age of 50.

# References

Alzheimer's Association. (2014). The Alzheimer's and Brain Awareness Month International Survey. Retrieved from [https://alz.org/news\\_and\\_events\\_60\\_percent\\_incorrectly\\_believe.asp](https://alz.org/news_and_events_60_percent_incorrectly_believe.asp)

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