



**integrando la
Innovación**

X Congreso Nacional de
ALZHEIMER
GIJÓN. 8, 9, 10 y 11 /NOV/ 2023

¿Cómo mejorar las actitudes hacia la enfermedad de Alzheimer?

La necesidad de nuevos enfoques para acabar con el estigma

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AFA RECUERDA 'Los Pedroches', Córdoba





integrando la
Innovación

55 millones

de personas con **demencia** en todo el mundo

OMS (2023)



10 millones

de nuevos casos de **demencia** cada año

OMS (2023)



60-70 %

de los casos son **enfermedad de Alzheimer**

OMS (2023)



Las **personas con EA y sus familias** conviven con

Estigmatización

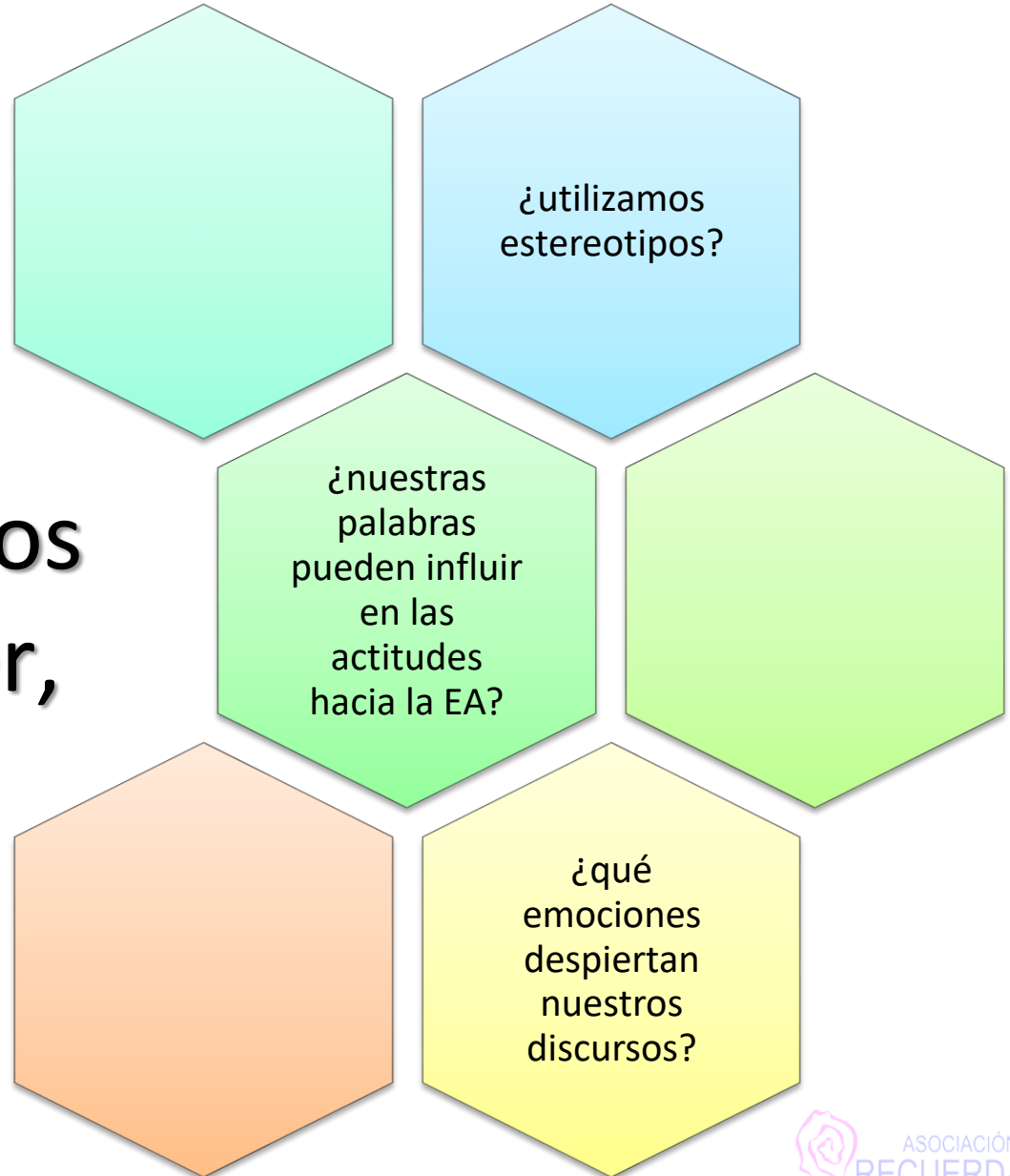
(OMS, 2017; Werner et al., 2023)

Estigmatización

proviene de un sentimiento de **incomprensión**
reforzado por **representaciones negativas**

(OMS, 2017; Werner et al., 2023)

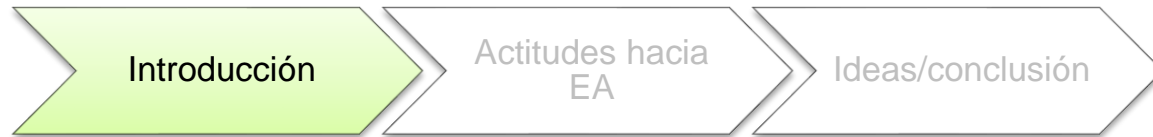
Quando hablamos sobre Alzheimer,





1. Introducción
2. Actitudes hacia la enfermedad de Alzheimer
3. Ideas a tener en cuenta

¿DE QUÉ VAMOS A HABLAR?



Marcos y contramarcos de la demencia

MARCO (frame): Herramienta conceptual usada por una sociedad o grupo cultural para transmitir, interpretar y evaluar la información (Neuman, Just y Crigler, 1992).

MARCOS	
POBLEMATIZADORES	DESPOBLEMATIZADORES
Dualismo cuerpo-mente	Unidad cuerpo-mente
El invasor	El extraño compañero de viaje
Proceso natural del envejecimiento	Fe en la ciencia
Miedo a la muerte y a la degeneración	Carpe diem
Roles invertidos	Cada uno en su turno
No <i>'quid pro quo'</i>	La buena madre

Dualismo vs. Unidad

Dualismo cuerpo-mente

- Teoría del **dualismo cartesiano**.
- Seres humanos: combinación de dos partes (**cuerpo-alma**).
- Demencia confisca el alma y la persona **pierde su identidad**.
- El **cuerpo queda intacto** provisionalmente.

- **Totalidad cuerpo-mente** como algo indivisible.
- **No** existe la **superioridad de la razón**.
- Déficit cognitivo, pero **no pérdida de identidad**.
- Se conserva la **capacidad emocional** y sensorial.

Unidad cuerpo-mente

Comunicar sobre Alzheimer

Nuestra
comunicación se ve
afectada por los
marcos



Usar un marco u
otro influye en la
percepción y la
valoración de la EA

(Van Gorp et al., 2012)

PROBLEMATIZADORES

(Van Gorp et al., 2012)

- Mayor impacto
- Mayor credibilidad

DESPROBLEMATIZADORES

(Gooblar y Carpenter, 2013)

- Respuestas psicológicas
positivas

¿Qué ocurre con
las actitudes
hacia le EA?

1º)

Escala de Actitudes hacia la demencia (EAD) Serrani, 2012

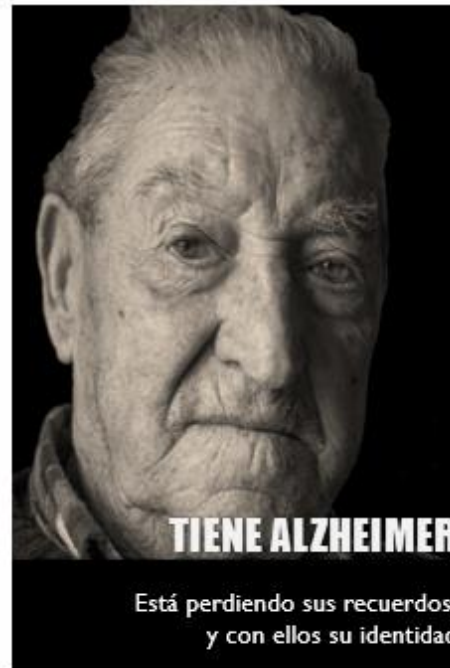
2º)

DUALISMO

UNIDAD

Creación de grupos y visionado de 6 carteles:

- ✓ Dualismo
- ✓ Unidad



3º)

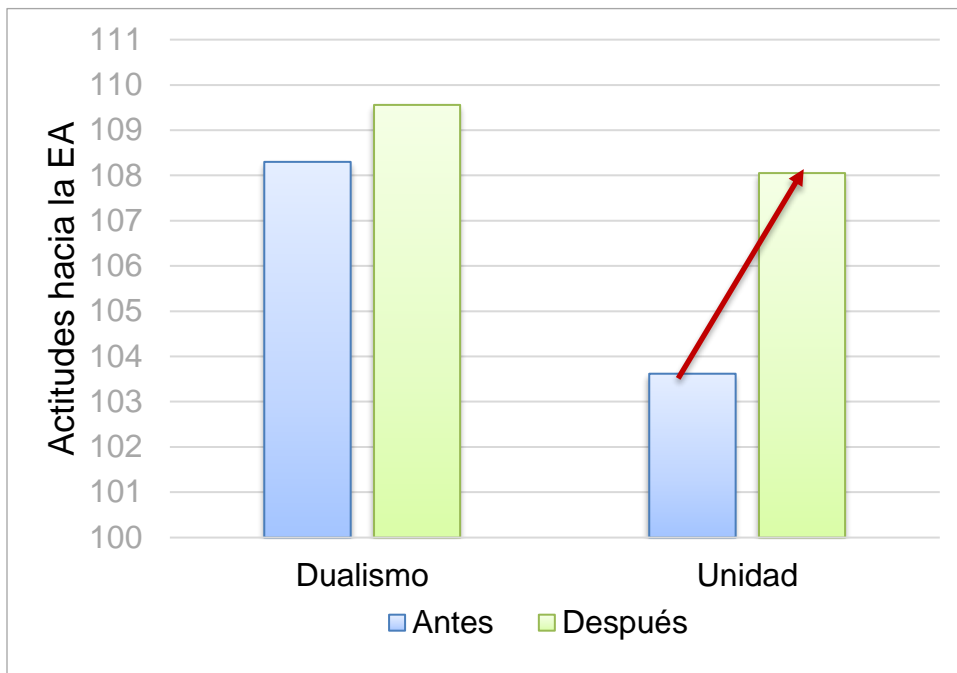
Escala de Actitudes hacia la demencia (EAD) Serrani, 2012

Nivel de experimentación de emociones

(alegría, tristeza, miedo, enfado y asco)

85 estudiantes universitarios

$M_{\text{edad}} = 24.24$, $DT_{\text{edad}} = 4.99$; 60% mujeres



Dualismo

Unidad



Impacto

Alegría

Tristeza

Enfado

Giving Meaning to Alzheimer's Disease: An Experimental Study Using a Framing Approach

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ABSTRACT

The prejudices and stereotypes associated with Alzheimer's disease (AD) are based on contents that highlight the most negative and dramatic aspects of the symptoms of this disease. This is reinforced by the preponderance of negative representations related to AD. In this paper, these representations have been analyzed as frames. The most dominant frame used to represent dementia is "body-mind dualism," and its alternative is the "body-mind unity" counter-frame. This study aims to define the impact of different messages inspired by the Dualism frame and the Unity counter-frame in the collective representation and meaning given to AD. Posters of simulated health campaigns about AD were designed, combining contents related to the Dualism frame and the Unity counter-frame, and were shown to 85 participants. To analyze the impact of both types of frameworks, a pre-post record of the attitudes of the participants toward AD was conducted using the *Attitudes toward Dementia Scale*. The assessment of the campaign and the self-report emotions were also registered. Participants' eye movements were measured during exposure to the posters. Attitudes toward dementia were found to be significantly more positive following exposure to discourses characteristic of the Unity counter-frame. Likewise, the dualism discourse evoked more sadness and anger. Moreover, the posters that used the discourse of the Unity counter-frame were considered more useful. We concluded that attitudes toward dementia are influenced by framing. Designing suitable health campaigns using these frames could help mitigate the attitudes and stigma associated with AD.

Introduction

The population of developed countries is progressively aging due to declining birth rates and an increase in life expectancy. Worldwide average life expectancy increased by 5 years between 2000 and 2015, the fastest increase since the 1960s (World Health Organization, 2016). Although individuals now live longer, a solution has not yet been found for many chronic and degenerative diseases, such as some dementias, among them Alzheimer's disease (AD). Approximately 46.8 million people live with dementia worldwide; a figure that is expected to double every 20 years (ADI, 2015). Of those with dementia, Alzheimer's Disease International (ADI, 2014) reports that from 50% to 75% suffer from AD.

In view of these data, AD poses an enormous challenge for society, since the disease affects not only the patients, but their social and family environment as well. To overcome this challenge, it is necessary to look for ways to change the negative representation and stigma surrounding AD.

The representation of AD

Research on AD and its effects on caregivers has shown that both negative emotions and situations as well as positive ones

occur. Despite some positive connotations related to AD, this is the second most feared disease after cancer in the UK and the USA (Alzheimer's Research Trust, 2011; MetLife Foundation, 2011), which awakens negative emotions related to death (Anderson, Day, Beard, Reed, & Wu, 2009). In addition, most people who have not had a family member with AD consider that these feelings and emotions produce high levels of stress (Werner, 2002). The stigmatization, taboo, isolation, and frustration associated with AD are not only due to the symptoms of the disease, but also arise from a feeling of incomprehension that is reinforced by the discourse and negative representations that prevail over the disease (Clare, 2003; Segers, 2007).

AD has become increasingly visible and impactful on society. However, the negative aspects and consequences of AD predominate in the way that this disease is presented. The media focus on the terminal stage of AD (Carbannelle, Casini, & Klein, 2009) emphasize the burden on the family as the primary caregiver (Werner, Goldstein, & Buchbinder, 2010) and rarely offer testimonies of people suffering from dementia or how they live with their illness, but rather others speak for them (Clarke, 2006; Kirkman, 2006).

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DE GRUYTER MOUTON

Fátima Cuadrado*, Adoración Antolí, Juan A. Moriana, and Julia Vacas

Communicating about Alzheimer’s disease: Designing and testing a campaign using a framing approach

<https://doi.org/10.1515/commun-2019-0157>

Abstract: The prevalence of negative representations of Alzheimer’s disease (AD) reinforces the stigma and negative attitudes toward this dementia. To mitigate these negative views, campaigns have been launched by several organizations. This study aims to explore the effect of framing in AD campaigns on attitude change. For this purpose, several posters were designed with framed messages defining dementia (dualism, unity, and control) and 189 participants were shown the posters. In order to analyze the effect of the different frames, a repeated-measures design was used, in which attitudes toward dementia were measured three times. The impact of the campaign and the emotions it produced were recorded as well as the effects of the participants’ experience with AD and the importance they attached to it. Posters with unity-framed messages produced a positive and lasting change in attitudes toward dementia and higher levels of happiness, while dualism-framed messages had a greater impact and produced feelings of sadness, anger, and fear but did not change the audience’s attitude. Although more research is needed on persuasion in campaigns, the findings can serve to guide the design of AD campaigns.

Keywords: campaign, framing, attitude change, persuasion, Alzheimer’s disease

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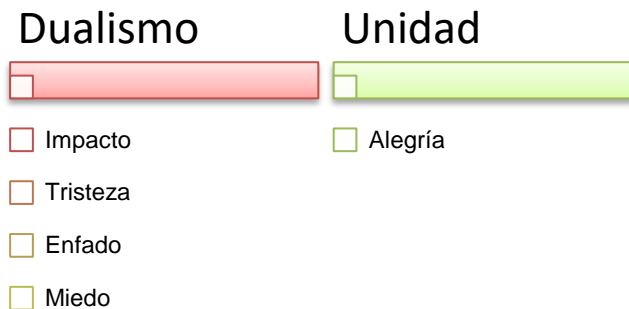
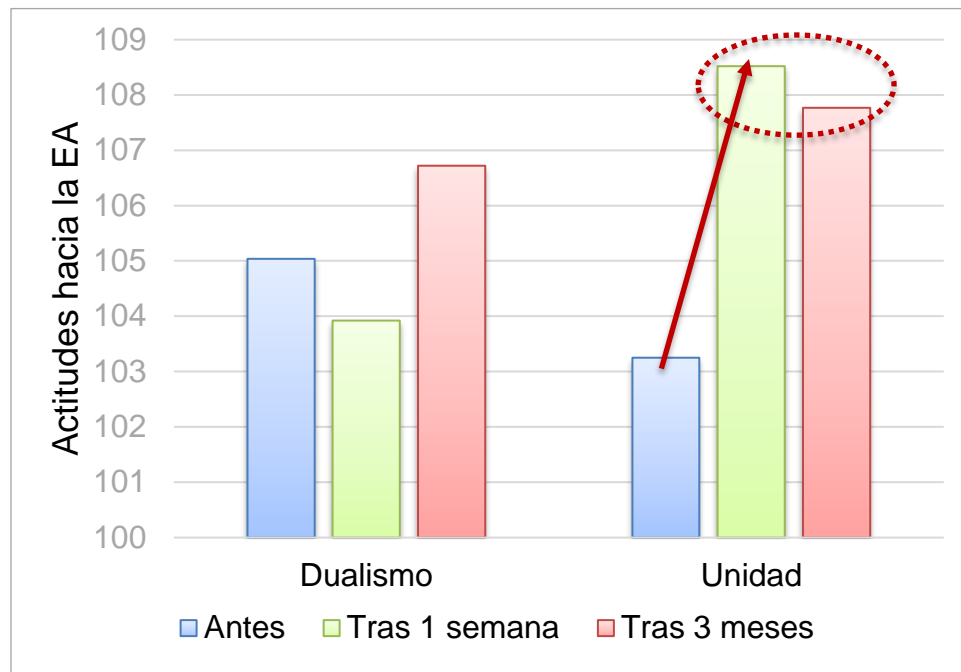
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195 estudiantes universitarios

$M_{\text{edad}} = 19.92, DT_{\text{edad}} = 3.87; 76.2 \% \text{ mujeres}$



PLOS ONE

RESEARCH ARTICLE

The effect of framing on attitudes towards Alzheimer's disease. A comparative study between younger and older adults

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Abstract

The stigma and negative attitudes surrounding Alzheimer's disease (AD) are reinforced by the prevalence of their negative representations. This study aimed to determine how AD framing influences attitudes towards AD and whether this influence differs between younger and older people. Additionally, the elaboration likelihood model (ELM) was used to examine the mediating role that emotions induced by different frames may have in bringing about attitude change. Posters with framed messages on AD (dualism and unity) were designed and shown to 136 participants (68 younger and 68 older adults). Both the younger and older participants were randomly divided into two sub-groups. Each sub-group was shown posters of a campaign with different AD frames: one group viewed posters with messages of the dualism frame and the other group viewed posters with messages of the unity frame. To analyse the effect of the different frames, a mixed design of repeated measures (ANOVA) was used in which attitudes towards AD were measured on two occasions. Both the impact and the emotions produced by exposure to the messages were recorded after the presentation of the posters and a MANOVA test was performed on them. Attitudes, impact and emotions experienced by the younger and older participants were compared. Older adults displayed positive attitudes towards AD but less than younger people. Unity-framed messages produced a positive change in attitudes regardless of the audience's age and led to higher levels of happiness, whereas dualism-framed messages had a greater impact and produced feelings of sadness, anger and fear but did not change attitudes. These findings suggest that reframing of AD may be essential to achieve a positive attitudinal change in both younger and older populations and foster positive emotions. The use of unity-framed messages should be considered when developing and implementing policies targeted at communication and awareness of AD in order to reduce the stigma associated with this form of dementia.

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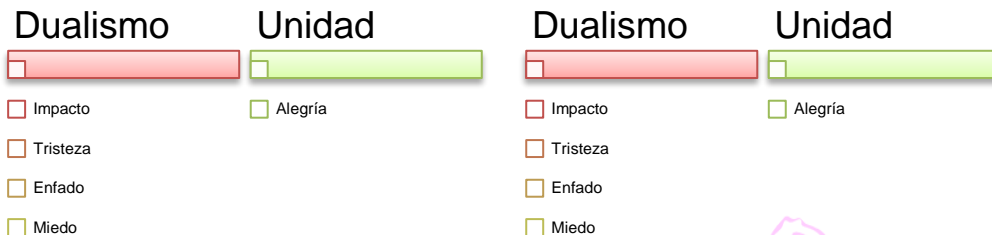
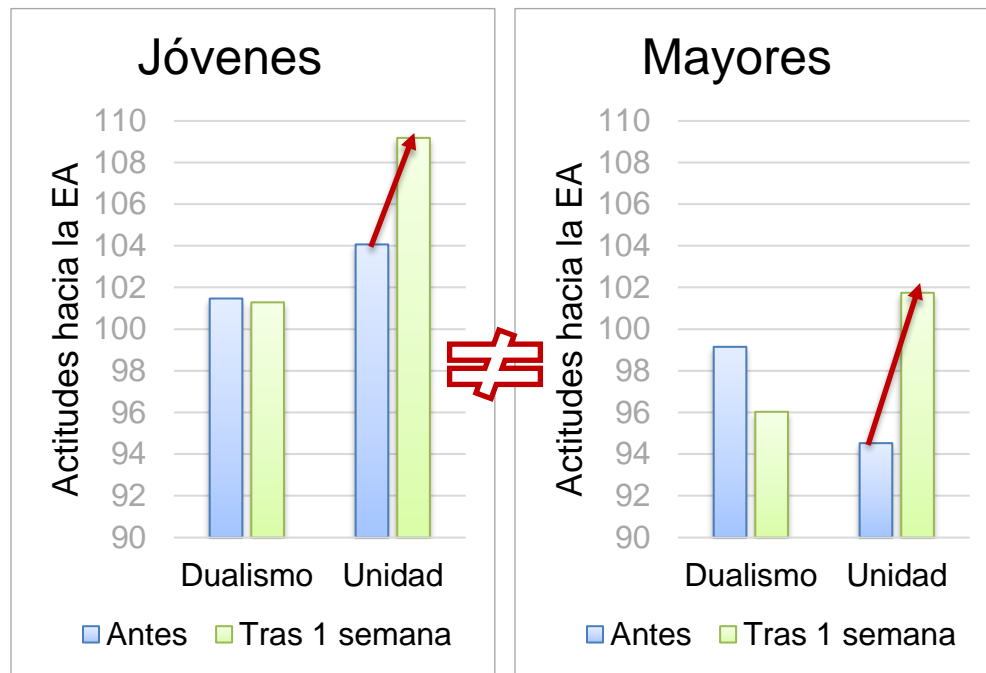
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Data Availability Statement: The datasets generated and analysed during the current study are available in the Open Science Framework (OSF) repository, <https://mf.osf.io/render?url=https%3A%2F%2Fosf.io%2Fdm6pc%2Fdownload>.

68 jóvenes ($M_{\text{edad}} = 18.15, DT_{\text{edad}} = 0.95; 69.12\% \text{ mujeres}$)
68 mayores ($M_{\text{edad}} = 68.03, DT_{\text{edad}} = 4.94; 52.94\% \text{ mujeres}$)



Estudio 1: 261 ($M_{\text{edad}} = 19.40$, $DT_{\text{edad}} = 3.29$; 47.13% mujeres)
 Estudio 2: 240 ($M_{\text{edad}} = 20.83$, $DT_{\text{edad}} = 3.54$; 48.9 % mujeres)

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How to improve attitudes towards dementia? Reframing as a tool to overcome the stigma around Alzheimer's disease

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ARTICLE INFO

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 Health messaging
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ABSTRACT

Objective: This article aims to determine how Alzheimer's disease (AD) framing impacts on attitudes and self-reported emotions towards the disease.
Methods: We designed posters with framed messages based on the person with AD: Dualism of body and mind, Unity of body and mind, and control (Study 1, $N = 261$) and based on the relationship person with AD-family: No reciprocation, Good Mother, and control (Study 2, $N = 240$). To analyse the effect of the different frames, attitudes towards AD were measured twice (before and after the posters display). Emotions emerging from this exposure were also recorded.
Results: Data analysis yielded four significant findings regarding communication on AD: (1) deproblematizing frames (i.e., Unity of body and mind and Good Mother) lead to a positive attitude change; (2) Non reciprocation frame reduces positive attitudes; (3) problematizing frames (i.e., Dualism body and mind and Non reciprocation) trigger negative emotions; (4) deproblematizing frames induce higher positive feelings, which increase positive attitudes.
Conclusions: Negative representations about AD reinforce the negative attitudes towards it. Reframing AD is essential to achieve a positive attitudinal change.
Practice implications: The use of deproblematizing frames (i.e., Unity of body and mind or Good Mother) should be considered when developing and implementing policies targeted at communication and awareness of AD to reduce the stigma associated with this disease.

1. Introduction

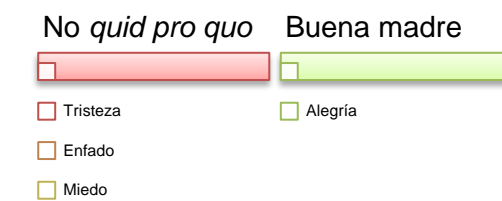
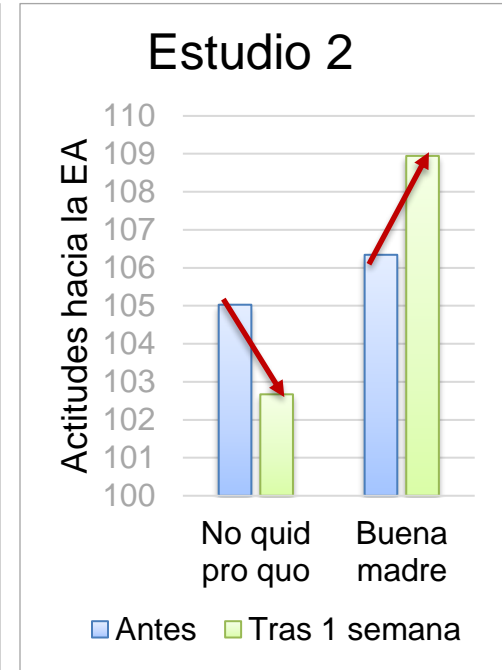
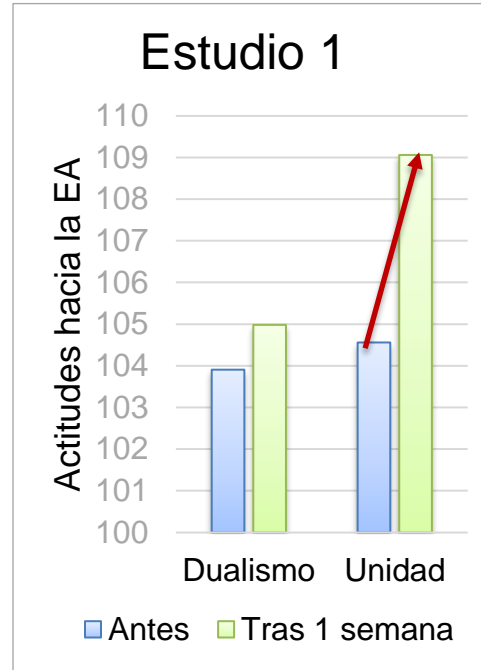
More than 55 million people live with dementia worldwide [1], and it is expected to increase to 132 million by 2050 [2,3]. Of all people with dementia, 50-75% have Alzheimer's disease (AD) [4]. AD affects not only the person itself, but also the community and relatives, having significant impact on different spheres like political, healthcare, economic, and social, where it is stigmatized [5,6].

Stigma is a social phenomenon; it is not an inherent attribute to individuals, but a set of socially constructed and imposed ideas [7]. The detrimental consequences of stigma highlight the fact that the importance of understanding and eliminating stigma is not only a matter of public health, but also of social justice [8]. The stigma associated with AD and its consequences are determined by how the disease is defined or framed [9,10]. In this sense, problematizing frames about AD lead to discrimination and higher feeling of sorrow, thereby contributing to stigma [11,12].

Framing refers to how a particular subject is defined. Frames are socially shared ideas that become "organizing principles" in the collective imaginary. Hence, they are used symbolically to structure and give meaning to the social reality [13]. Likewise, frames offer a biased outlook on the reality as they focus on a small portion of it while disregarding other perspectives. Regarding to AD, 12 frames give meaning to this disease [14,15]. Among them, six are problematizing frames, which only highlight negative consequences of the AD. Usually, problematizing frames are dominant in common public discourse. Additionally, there are six alternative frames which are used to invalidate the dominant idea inverting its reasoning, then they portray AD as less

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Conclusión

PROBLEMATIZADORES

- ✓ No producen ninguna mejora en las actitudes, incluso pueden empeorarlas.
- ✓ Activan los niveles de impacto y de emociones negativas

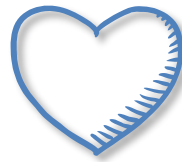
DESPROBLEMATIZADORES

- ✓ Producen un cambio de actitud positivo.
- ✓ Inducen sentimientos positivos, que incrementas las actitudes positivas.

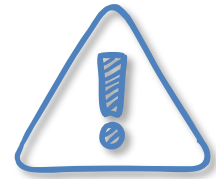
Recomendaciones



**Reflexionar sobre
los mensajes que
recibimos**



**Fomentar el uso de los
marcos
desproblematizadores**



**Cuidar nuestros
mensajes**



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