**Dementia Caregiving Technology Survey (GPS Tracking)**

Before beginning the main survey, we would like to ask you a few questions to ensure your eligibility to participate.

Q: Are you taking care of a someone who has some type of cognitive impairment, such as mild cognitive impairment, Alzheimer's disease, Lewy Body disease, vascular dementia, etc.?  We will refer to this person as the "care recipient".

* Yes (1)
* No (3)

Skip To: End of Block If Are you taking care of a someone who has some type of cognitive impairment, such as mild cogniti... = No

Q: Are you the primary caregiver/care manager for the care recipient?

* Yes (30)
* No (31)

Skip To: End of Block If Are you the primary caregiver for the care recipient? = No

Q: Do you receive any kind of payment or financial consideration for being a caregiver/care manager to the care recipient?

* Yes (5)
* No (6)

Skip To: End of Block If Do you receive any kind of payment or financial consideration for being a caregiver/care manager... = Yes

Q: Does your care recipient live in a secure memory care unit or a nursing home?

* Yes (1)
* No (2)

Skip To: End of Block If Does your care recipient live in a secure memory care unit or a nursing home? = Yes

Q1 Which of the following characterizes the care recipient's current living arrangement? Select all that apply.

* Lives alone (1)
* Lives with child or children (2)
* Lives with parent(s) (3)
* Lives with other relatives (4)
* Shares living quarters with friend or roommate (5)
* Lives with partner or boyfriend (6)
* Lives with husband or wife (7)
* Lives in group housing such as assisted living (8)
* Lives in a secure memory care unit (9)
* Lives in a nursing home (10)
* Homeless (11)
* Other (Please specify): (12) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

End of Block: Screening Questions

Start of Block: Section 1. Characteristics of you, the caregiver

Now, we would like to ask you some questions about characteristics of you, the caregiver/care manager.

Q2 Please answer the following questions about yourself.   
  
  
What is your year of birth?

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Q3 What is the country of your birth?

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Q4 What is your gender?

* Male (1)
* Female (2)
* Non-binary (3)

Q5 What is your ethnicity?

* White/Caucasian (1)
* Hispanic, Latino, or Spanish origin (2)
* Black or African American (3)
* Asian (4)
* American Indian or Alaska Native (5)
* Middle Eastern or North African (6)
* Native Hawaiian or Other Pacific Islander (7)
* Some other race, ethnicity, or origin (8)

Q6 What is the highest level of education you have completed?

* 5th grade (1)
* 6th grade (2)
* 7th grade (3)
* 8th grade (4)
* 9th grade (5)
* 10th grade (6)
* 11th grade (7)
* High school graduate (8)
* Technical/vocational school (9)
* Some community college (10)
* Community college graduate (11)
* Some college (12)
* College graduate (13)
* Some advanced graduate study (14)
* Graduate degree (15)

Q7 Which of the following characterizes your current living arrangement? Select all that apply .

* Live with husband or wife (1)
* Live with my child or children (2)
* Live with my parent(s) (3)
* Live with other relatives (4)
* Share living quarters with friend or roommate (5)
* Live with partner or boyfriend (6)
* Live alone (7)
* Live in group housing such as assisted living (8)
* Live in a nursing home (9)
* Homeless (10)
* Other (please specify): (11) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Q8 Do you have children?

* Yes (1)
* No (2)

Q9 If you have children, what are the ages of your children?

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Q10 Please tell us a little bit about your use of communication technology.  
  
Do you have any of the following devices? Select all that apply.

* A desktop computer (1)
* A laptop computer (2)
* An e-Book reader, such as a Kindle (3)
* An iPod or other portable music player (4)
* A tablet computer like an iPad (5)
* A basic cell phone (6)
* A smartphone (7)
* A webcam (8)
* Any smarthome products like a Nest thermostate or other controller (12)
* A smart speaker like Alexa or Echo (13)
* And in-car GPS system for driving (9)
* A Fitbit or other fitness tracker (10)
* An Apple Watch or similar product (11)

Q11 If you have and use a smartphone, what are the features of your phone that you use? Select all that apply.

* Making phone calls (1)
* Receiving phone calls (2)
* Web browsing (3)
* Taking pictures or videos (4)
* GPS navigation and maps (5)
* Hands-free talking (6)
* Voice messaging (7)
* Sending a text message (8)
* Receiving a text message (9)
* Online shopping (10)
* Getting coupons or specials (11)
* Getting a ride, like Uber (12)
* Sending or receiving money (13)
* Getting news and information (14)
* Making video calls (Skype, FaceTime) (15)
* Playing games (Pokemon Go, Candy Crush, etc.) (16)
* Participating in social media (17)
* Keeping an eye on my house or apartment (34)
* Reading books (18)
* Accessing medical records (19)
* Sending and receiving emails (20)
* Looking up the weather (21)
* Downloading and/or playing music (22)
* Keeping a journal or diary (23)
* Adjusting things in my house such as a thermostat or security system (35)
* Making to-do lists (24)
* Tracking health statistics (for example, step counts or weight) (25)
* Streaming TV shows and movies (26)
* Making videos and stories to share with others (27)
* Looking up where things are located (28)
* Finding out where my friends or family members are (29)
* Doing work-related business, such as answering emails (30)
* Taking a voice memo (31)
* Using camera for note-taking or taking a screenshot (taking pictures of information you need to remember) (32)
* Other (please specify): (33) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Now we would like to ask you some questions about characteristics of the care recipient (the person you take care of).

Please answer the following questions about the person for whom you are providing care (or you are the primary caregiver or care manager).   
  
  
Q12 What is his/her year of birth?

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Q13 What is the country of his/her birth?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Q14 What is his/her gender?

* Female (1)
* Male (2)
* Non-binary (3)

Q15 Does she/he have children?

* Yes (1)
* No (2)

Q16 If he/she has children, what are the ages of his/her children?

Now we would like to ask some questions about your attitude towards technological devices.

Q17 Are you currently using a technological device to keep track of your care recipient's comings and goings and find them if they get lost? We are only asking about devices that DO NOT require any operation or input from the care recipient, such as requiring them to push a panic button or answer a telephone. We are interested in knowing if you have used something like a smartwatch/phone or other wearable or carried tracker that can transmit the recipient's location without any input from the care recipient. Select the option Yes if you are currently using such a device or No if you are not.

* Yes (1)
* No (2)

Skip To: End of Block If Are you currently using a technological device to keep track of your care recipient's comings and... = Yes

Q18 In the coming three months, how likely or unlikely will you be to use a technological device to track your care recipient’s comings and goings and find them if they get lost?

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Very unlikely (1) | Moderately unlikely (2) | Slightly unlikely (3) | Neither likely nor unlikely (4) | Slightly likely (5) | Moderately likely (6) | Very likely (7) |
| Your Rating (1) |  |  |  |  |  |  |  |

Q19 Do you agree or disagree with the statement that “I plan to use a technological device in the coming three months to track my care recipient’s comings and goings and find them if they get lost”?

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Strongly disagree (1) | disagree (2) | Somewhat disagree (3) | Neither agree nor disagree (4) | Somewhat agree (5) | Agree (6) | Strongly agree (7) |
| Your Rating (1) |  |  |  |  |  |  |  |

Q20 Do you intend to use a technological device in the coming three months to track your care recipient’s comings and goings and find them if they get lost?

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Very unlikely (1) | Moderately unlikely (2) | Slightly unlikely (3) | Neither likely nor unlikely (4) | Slightly likely (5) | Moderately likely (6) | Extremely likely (7) |
| Your Rating (1) |  |  |  |  |  |  |  |

Q21 Please select the statement which best describes your family member's current ability or behavior. Use the following scale to respond to the items below:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Never or unable (1) | Seldom (2) | Sometimes (3) | Usually (4) | Always (5) |
| He/she runs off (1) |  |  |  |  |  |
| While walking alone, he/she walks beyond intended destination (2) |  |  |  |  |  |
| He/she attempts to go outside (3) |  |  |  |  |  |
| He/she stands at the outdoor wanting to go out (4) |  |  |  |  |  |
| He/she attempts to find or go to familiar locations, even unrealistic ones (5) |  |  |  |  |  |
| He/she attempts to leave his/her own area (6) |  |  |  |  |  |
| He/she gets lost outside the house (7) |  |  |  |  |  |
| He/she enters private or unauthorized areas (8) |  |  |  |  |  |

Q22 In the past week, on how many days did you personally have to deal with the following behavior of your care recipient?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Never (1) | 1-2 Days (2) | 3-4 Days (3) | 5 or More days (4) | Always (5) |
| Keep you up at night (1) |  |  |  |  |  |
| Repeat questions/stories (2) |  |  |  |  |  |
| Try to dress the wrong way (3) |  |  |  |  |  |
| Have a bowel or bladder "accident" (4) |  |  |  |  |  |
| Hide belongings and forget about them (5) |  |  |  |  |  |
| Cry easily (6) |  |  |  |  |  |
| Act depressed or downhearted (7) |  |  |  |  |  |
| Cling to you or follow you around (8) |  |  |  |  |  |
| Become restless or agitated (9) |  |  |  |  |  |
| Become irritable or angry (10) |  |  |  |  |  |
| Swear or use foul language (11) |  |  |  |  |  |
| Become suspicious, or believe someone is going to harm (him/her) (12) |  |  |  |  |  |
| Threaten people (13) |  |  |  |  |  |
| Show sexual behavior or interests at wrong time/place (14) |  |  |  |  |  |

Now we would like to ask you some questions about care patterns related to wandering or home safety.

Q23 Are you at least somewhat concerned about your care recipient wandering or getting lost?

* Yes (1)
* No (2)

Q24 Are you at least somewhat concerned about your care recipient getting into trouble if left alone, or have you had such concerns in the past?

* Yes (1)
* No (2)

Q25 What kind of technological device do you use for keeping track of your care recipient’s coming and goings or to find them if they get lost (e.g. GPS tracking watch, smartphone, etc.)? You may list more than one device.

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Q26 For this technological device that you are using to keep track of your care recipient's comings and goings or to find them if they get lost , please indicate how you feel about the items below.  If you are using more than one device, think about the one you most rely on.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Strongly disagree (1) | Disagree (2) | Somewhat disagree (3) | Neither agree nor disagree (4) | Somewhat agree (5) | Agree (6) | Strongly agree (7) |
| This device enables me to accomplish caregiving tasks more quickly. (1) |  |  |  |  |  |  |  |
| This device has improved my quality of caregiving work. (2) |  |  |  |  |  |  |  |
| This device makes it easier to do my caregiving job. (3) |  |  |  |  |  |  |  |
| This device has improved my caregiving productivity/efficiency. (4) |  |  |  |  |  |  |  |
| This device gives me greater control over my caregiving job. (5) |  |  |  |  |  |  |  |
| This device enhances my effectiveness on the caregiving job. (6) |  |  |  |  |  |  |  |

Q27 For this technological device that you are using to keep track of your care recipient's comings and goings, or to find them if they get lost, please indicate how you feel about the items below.  If you are using more than one device, think about the one you most rely on.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Strongly disagree (1) | Disagree (2) | Somewhat disagree (3) | Neither agree nor disagree (4) | Somewhat agree (5) | Agree (6) | Strongly agree (7) |
| My interaction with the device has been clear and understandable. (1) |  |  |  |  |  |  |  |
| Overall, this device is easy to use. (2) |  |  |  |  |  |  |  |
| Learning to operate this device was easy for me. (3) |  |  |  |  |  |  |  |
| I rarely become confused when I use this device. (4) |  |  |  |  |  |  |  |
| I rarely make errors when using this device. (5) |  |  |  |  |  |  |  |
| I am rarely frustrated when using this device. (6) |  |  |  |  |  |  |  |

Q28 For this technological device that you are using to keep track of your care recipient's comings and goings or to find them if they get lost, please indicate how you feel about the items below.  If you are using more than one device, think about the one you most rely on.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Strongly disagree (1) | Disagree (2) | Somewhat disagree (3) | Neither agree nor disagree (4) | Somewhat agree (5) | Agree (6) | Strongly agree (7) |
| I'm confident in using a tracking device to track my care recipient. (1) |  |  |  |  |  |  |  |
| I feel comfortable using such a device on my own. (2) |  |  |  |  |  |  |  |
| If I want to, I can easily operate such a device on my own. (3) |  |  |  |  |  |  |  |
| I can use such a device even if no one is around to help me. (4) |  |  |  |  |  |  |  |

Q29 For this technological device that you are using to keep track of your care recipient's comings and goings or to find them if they get lost, please indicate how you feel about the items below.  If you are using more than one device, think about the one you most rely on.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Strongly disagree (1) | Disagree (2) | Somewhat disagree (3) | Neither agree nor disagree (4) | Somewhat agree (5) | Agree (6) | Strongly agree (7) |
| Most people who are important to me think that I should use technological devices to track my care recipient. (1) |  |  |  |  |  |  |  |
| Most people whose opinions I value would approve of my using technological devices to track my care recipient. (2) |  |  |  |  |  |  |  |
| Most people I respect and admire will use technological devices to track their care recipient. (3) |  |  |  |  |  |  |  |
| Most people like me will use technological devices to track their care recipient. (4) |  |  |  |  |  |  |  |

Q30 For you, using a technological device to track your care recipient or find them if they get lost is

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | 1 (1) | 2 (2) | 3 (3) | 4 (4) | 5 (5) | 6 (6) | 7 (7) |  |
| Bad |  |  |  |  |  |  |  | Good |
| Pleasant |  |  |  |  |  |  |  | Unpleasant |
| Harmful |  |  |  |  |  |  |  | Beneficial |
| Desirable |  |  |  |  |  |  |  | Undesirable |

Q31 I do not currently use a technological device like a GPS tracking watch or smartphone to keep track of my care recipient’s comings and goings or find them if they get lost because... (select any reasons that explain why you do not currently use such a device). Again, we are only interested in the reasons why you do not currently use a device that can work without any input from the care recipient.

* I respect the care recipient’s privacy (1)
* I don’t want to “spy” on my care recipient (2)
* I respect the care recipient’s autonomy (3)
* The care recipient can’t really give his/her consent to use this technology (4)
* I think that these devices do not work very well (5)
* I don't think my care recipient would agree to wear or carry one of these (6)
* I would be worried that the battery would run out (7)
* I would be worried that the device would not be accurate (8)
* I don’t think I could learn how to use a device like this (9)
* I don’t have anyone to help me set it up (10)
* I think new technologies like this are quite pricey (11)
* New technologies like this that are available today are too expensive (12)
* I consider adopting a new technology like this to be a big-ticket item. (13)
* I am satisfied with the methods I already use (14)
* My care recipient would not agree to use such a device (15)
* I am not concerned that my care recipient will wander away or become lost (16)

Q32 Please indicate for the items below what you think it might be like to use a technological device to keep track of your care recipient's comings and goings or to find them if they get lost.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Strongly disagree (1) | Disagree (2) | Somewhat disagree (3) | Neither agree nor disagree (4) | Somewhat agree (5) | Agree (6) | Strongly agree (7) |
| I think that such a device would enable me to accomplish caregiving tasks more quickly. (1) |  |  |  |  |  |  |  |
| I think such a device would improve my quality of caregiving work. (2) |  |  |  |  |  |  |  |
| I think such a device would make it easier to do my caregiving job. (3) |  |  |  |  |  |  |  |
| I think such a device would improve my caregiving productivity/efficiency. (4) |  |  |  |  |  |  |  |
| I think such a device would give me greater control over my caregiving job. (5) |  |  |  |  |  |  |  |
| I think such a device would enhance my effectiveness on the caregiving job. (6) |  |  |  |  |  |  |  |
| I believe my interaction with such a device would be clear and understandable. (7) |  |  |  |  |  |  |  |
| I believe such a device would be easy to use in general. (8) |  |  |  |  |  |  |  |
| I believe learning to operate such a device would be easy for me. (9) |  |  |  |  |  |  |  |
| I believe I would rarely become confused when I used such a device. (10) |  |  |  |  |  |  |  |
| I believe I would rarely make errors when using such a device. (11) |  |  |  |  |  |  |  |
| I believe I would rarely be frustrated when using such a device. (12) |  |  |  |  |  |  |  |

Q33 Please respond to the following items about using technological devices to keep track of your care recipient's comings and goings and find them if they get lost.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Strongly disagree (1) | Disagree (2) | Somewhat disagree (3) | Neither agree nor disagree (4) | Somewhat agree (5) | Agree (6) | Strongly agree (7) |
| Most people who are important to me think that I should use technological devices to keep track of my care recipient's comings and goings and find them if they get lost (1) |  |  |  |  |  |  |  |
| Most people whose opinions I value would approve of my using technological devices to keep track of my care recipient's comings and goings and find them if they get lost (2) |  |  |  |  |  |  |  |
| Most people I respect and admire would use technological devices to keep track of their care recipient's comings and goings and find them if they get lost (3) |  |  |  |  |  |  |  |
| Most people like me would use technological devices to keep track of their care recipient's comings and goings and find them if they get lost (4) |  |  |  |  |  |  |  |

Q34 For you, using technological devices to keep track of your care recipients comings and goings and find them if they get lost is:

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | 1 (1) | 2 (2) | 3 (3) | 4 (4) | 5 (5) | 6 (6) | 7 (7) |  |
| Bad |  |  |  |  |  |  |  | Good |
| Pleasant |  |  |  |  |  |  |  | Unpleasant |
| Harmful |  |  |  |  |  |  |  | Beneficial |
| Desirable |  |  |  |  |  |  |  | Undesirable |