Behavior Change in Dementia



Olga Pina age 71, walked into the living room of her home where her husband was in conversation with a social worker. She became agitated and pointing her finger at her husband exclaimed with great distress to the social work "Please get this strange woman out of my house!"

Brad Cummings age 68, picked up the telephone in his home and dialed 9-1-1 and for the fourth time that week claimed that his caregiving daughter was stealing from him and holding him hostage.

Mable Jones age 73, would get out of bed at 3am and begin taking items out of her chest of drawers and place them on the bed, then return the items back to their drawers. She would repeat this sequence over and over for hours.

Dementia behaviors are difficult to understand and a challenge for caregivers to manage. This paper is intended to help caregivers understand the nature of dementia behaviors and tips on how to respond to them.

To understand dementia behaviors requires a basic understanding of dementia. What is dementia? Dementia is a medical term used to describe symptoms of impaired brain functioning caused by a neurological condition such as Alzheimer's disease, Parkinson's disease, traumatic brain injuries and other disorders. Most common symptoms of dementia include memory loss, confusion, impaired thinking and judgement.

To further understand dementia behaviors, it helps to review basics of neurology:

- Neurology is the branch of medicine concerned with the structure, function, and diseases
 of the brain and nervous system.
- The nervous system supports capacity to think, plan, organize, carry out actions and interpret the world around us.
- The nervous system also supports the functions of breathing, digestion and motor skills.

What is Behavior?

Behavior is a response to a triggering event or situation. For example, stepping outside in the rain without a raincoat or umbrella, I feel cold and wet and begin to shiver. The situation is interpreted as uncomfortable, which makes me annoyed. Because of this, I return to grab a coat and umbrella. The act of returning to grab a coat and umbrella is the behavior. Therefore, meaning of a behavior can be understood by paying attention to the sequence of "Event, Thought, Feeling = Behavior." This sequence is referred to as the Cognitive Behavioral Response Cycle.

The Cognitive Behavioral Response Cycle teaches us that behavior is not random or accidental, but purposeful. A person with dementia may have lost their ability to express themselves, unable to find the right words to communicate their thoughts and feelings. Dementia behaviors therefore replace words for attempting to communicate a need.

Understanding Dementia Behavior

- The environment of a person with dementia is continuously changing in their mind.
- Person's with dementia are always trying to adapt to their changing environment.
- Impaired brain functioning interrupts normal ways thinking, interpreting and understanding the environment.
- Dementia behaviors communicate attempts to make sense out of confusion.
- Dementia behaviors are not infantile, regressive, or intended to be disruptive.

Additional Factors that Influence Dementia Behavior

- The environment of a person with dementia is continuously changing in their mind.
- Person's with dementia are always trying to adapt to their changing environment.
- Impaired brain functioning interrupts normal ways thinking, interpreting and understanding the environment.
- Dementia behaviors communicate attempts to make sense out of confusion.
- Dementia behaviors are not infantile, regressive, or intended to be disruptive.

Problem-Solving Approach

Understanding dementia behavior is like putting pieces of a jigsaw puzzle together. Caregivers often find themselves in the role of detective, spending concentrated time observing, recording and analyzing behavior. A problem-solving approach to understanding behavior consists of a step by step process, beginning with the question:

"Why is the behavior happening?"

- What happened just before and right after the behavior?
- What changed around the person before and right after the behavior?
- Is the person responding to internal stress (thoughts, a memory, physical pain, onset of illness) or external stress (change in routine, place, time of day/night, weather, noise, introduction of something new)

- How might the person be interpreting the stressor (their thoughts)?
- What is the feeling state observed with the behavior?
- How might the behavior be "their way of coping" to a stressor?
- What need may the behavior attempt to communicate?
- How are you responding to the person and their behavior (calm, comforting, or frustrated and impatient?

Behavior Log

Keeping a log of challenging behaviors helps to uncover patterns. Tracking information about who, what, where, when and how, leads to the next step in the problem-solving process, "what is being communicated?" Does the log indicate the person is bored, looking for something to do, overstimulated, hungry, thirsty, warm/hot/cold, fearful, lost, feeling alone, insecure, tired, sleepy, feeling ill with stomachache, headache, body aches?

Sample Behavior Log (Spencer/White, 2015)

When	Who Was There	Where & What Was Going On	What Was the Behavior	What I tried & What Happened
Sat. 3 PM	l was with Ann	Watching TV with me in my office while I read a book.	Anger, agitation	I yelled, she yelled back and tried to hit me.
Sun. 4 PM	l was with Ann	In my office, Ann sitting on sofa, I moved to work at my desk.	Ann became upset and started pacing.	I ignored her; Ann became more agitated.
Mon. 4 PM	I was with Ann	l was taking a nap in our bedroom	Ann became upset and yelled at me because I would not get up.	I asked Ann to lie down with me. I stroked her back and she calmed down.

Responding to Dementia Behavior

The final step in the problem-solving process is analyzing the actions of the caregiver. How caregivers respond is critically important. Responding to dementia behavior with a calming and supportive presence helps reduce the risk of escalation. At times, a soothing physical

response may be all that is needed; a gentle touch, holding hands, an embrace, sitting beside the person. When speaking to a person with dementia, it is important to speak in an adult voice, speaking slowly, pausing between sentences. Speak in short, simple sentences and repeat them. Avoid asking complex questions. Validate do not contradict. Reasoning provokes more confusion and increases anxiety. Go with the person's thinking, enter their story and support the telling of their story. Attempting to pull them into your reality is not helpful and will make the work of managing dementia behaviors more difficult.

Reference:

Beth Spencer & Laurie White, Coping with Behavior Change in Dementia; March 2015

For information about caregiver services, call:

Del Mar Caregiver Resource Center | 1-800-624-8304

Or visit: www.delmarcaregiver.org

This paper was prepared by Sam Trevino, MSW, LCSW, Health Services Manager for Health Projects Center (HPC). HPC is a nonprofit organization that administers the Del Mar Caregiver Resource Center.

For more information about HPC please visit www.hpcn.org