

## Managing Challenging Behaviors

*All of us behave differently depending on the situation. If we become upset or confused, we can act in ways that others find challenging. People with dementia are no different. This handout describes some simple techniques to help people with dementia during different types of care activities or when they become upset or confused as a result of the dementia. Try to remember that people with dementia are not purposely trying to be challenging. They are just trying to make sense of their situation, and you can be a key to helping them feel more comfortable, happy and calmer.*

### Bathing

Residents with dementia may forget that they need to bathe. They may feel frightened of bathing or feel uncomfortable having someone help them with such a private task. To make bathing as easy as possible try to:

- Ensure privacy.
- Let the resident touch the water.
- Go slowly.
- Give one instruction at a time.
- If a resident won't cooperate, give a choice: "do you want to take a bath or shower"?
- Schedule baths around upcoming events: when residents have reasons to be clean such as going to church or having visitors, they are often more willing to bathe.
- Consider providing sponge baths.
- Make sure that the temperature is comfortable. Persons with dementia may not be able to detect changes in temperature.

### Dressing

Being comfortably and nicely dressed is important to a resident's sense of well being. With clear suggestions and directions, residents are often able to do a fair amount for themselves. Encourage residents to do as much as possible. Eliminate frustrations by limiting choices and providing items that are easy to fasten. When assisting a resident with dressing:

- Lay articles of clothing out in the order they will be put on.
- Give one simple instruction at a time and wait until the resident is finished before moving on.
- Undress only one part at a time; have the next article of clothing ready to put on.

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*Adapted with permission from Teri, L., Huda, P., Gibbons, L., Young, H., & van Leynseele, J. (2005). STAR: A dementia-specific training program for staff in assisted living residences. Gerontologist, 45, 686-693.*

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## Toileting

Good toileting habits can prevent an array of health and behavioral problems. Some things to consider:

- If the resident begins having trouble with incontinence, take him or her to the bathroom every 2 to 4 hours; do this on a routine basis.
- Make sure the bathroom is clearly marked with a sign (use a picture if s/he doesn't understand signs).
- Provide adequate lighting along the way to the bathroom.

## Eating

Many residents with dementia have difficulty with eating. Here are some ways to prevent such problems:

- Offer one food at a time.
- Provide a relaxing eating area.
- Provide enough fluids; serve Jello, popsicles, juices, and ice cream to increase fluids, and avoid caffeine.

## Angry or Agitated Behavior

Residents can demonstrate angry or agitated behaviors. The best strategy is to prevent these behaviors to begin with. Potential triggers include:

- Too many demands or questions at once
- Too much noise and activity
- Fatigue

You can decrease the behaviors by:

- Completing each demand before moving on to the next
- Speaking slowly and softly
- Taking a break and trying again later

Once the behaviors have begun, there are some ways to potentially stop them. Try to:

- Soothe the resident by trying to see the situation from their view point.
- If possible, remove the resident from the scene of conflict
- Distract or redirect the resident—offer an alternative activity the resident enjoys

Keep your responses kind and supportive during a crisis and remember to give praise and pay attention to the resident at times when he or she is cooperative and pleasant. You will reinforce the resident's behavior when he or she is behaving well and make it more likely that he or she will behave well more often.

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## Paranoia or Suspicious Behavior

About one-third of residents with dementia develop paranoid or suspicious behaviors. It is important not to take these behaviors personally. Be aware of factors that can make paranoia worse.

- Problems with hearing or vision can cause the resident to withdraw or to misunderstand events
- Dim lighting and loud noises
- Changes in daily routine or the environment

When the behavior occurs, don't try to correct or argue with the resident. Instead, try to:

- Use gentle touch when appropriate
- Reassure the resident that he or she is safe and you will take care of him or her.

Some ways to avoid paranoid or suspicious reactions are to:

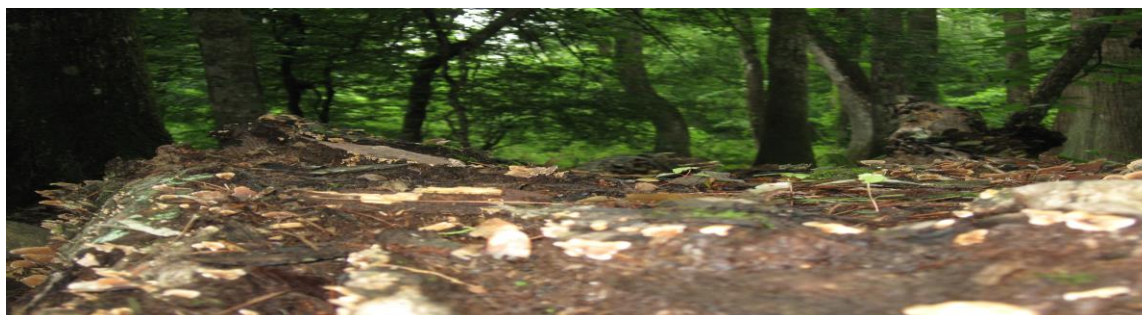
- Maintain a daily routine and minimize changes
- Regulate people contact
- Increase lighting and decrease noise

## Hallucinations and Delusions

Hallucinations are seeing, hearing, smelling, tasting, or feeling, things that aren't there. Some residents with dementia have hallucinations. The most common hallucinations are visual or auditory. Delusions are ideas that are not true.

Both hallucinations and delusions are symptoms of the disease and do not mean that the resident is "going crazy". It is important to remain calm, consistent, and supportive of the resident when hallucinations or delusions occur. The following are some suggestions for managing these symptoms:

- Respond to the fears and the feelings being expressed by saying, "that must be scary" or "it must be difficult."
- Don't argue with the resident about what they are seeing, hearing, or believing.
- Check the environment for glare, shadows, or objects that might be triggering the hallucination or delusion (sometimes events or people on television seem real to residents with dementia; mirrors may also be confusing).
- Don't say, "you are imagining things"—this often just upsets the resident.



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