

# FIVE COMMON RESPONSIVE BEHAVIOURS

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## 1. REPETITION

Some people with dementia have repetitive behaviours such as asking the same question again and again or constantly rubbing their hands together. Although these behaviours appear fairly harmless, they are exhausting for caregivers. Repetitive questions, in particular, can be extremely draining.

These repetitive behaviours are often due to the changes in memory that result from the dementia. The person does not remember that they just asked a particular question. In other cases, the questions or behaviours may reflect feelings of insecurity. A person who keeps asking, "When is John coming?" may be experiencing loneliness or loss. Repetitive behaviours may also indicate that certain physical needs are not being met. For example, a person with dementia who keeps fiddling with their clothing may be expressing the need to go to the bathroom.

Although it may not be possible to eliminate repetitive behaviours, the following suggestions may help respond to them.

### What Should I Do?

- **Use distraction.** Involve the person in an activity that they enjoy, go for a walk, or offer a snack.
- **Carefully consider the question** the person is asking and respond to the emotion being expressed. Avoid telling the person that they have already asked the question as this may be upsetting.
- **Speak calmly** when answering the question, even if you have already answered it ten times.
- **Help cue the person's memory** by posting calendars, notices of meal times (if person can still read), or signs to help the person orient themselves to the environment (for example, the word "toilet" or a picture of a toilet on the bathroom door).
- **For repetitive actions**, such as tapping or wringing of hands, try giving the person something to occupy their hands. Offer a doll, some string, a face cloth, or a soft ball.
- **Fit the repetitive action into the normal household chores.** The person may enjoy dusting the same area over and over again.

**Some events or objects** in the person's home may trigger their repetitive behaviour. For example, when the person sees coats, hats and gloves, they may react by repeating statements about going home. Be alert for these triggers. Observe the behaviour and keep notes.

## 2. WANDERING

Wandering is a concern to many caregivers as the individual may become lost or wander into a dangerous situation. Sometimes wandering is a result of boredom or searching for something familiar. Helping the person to connect with items and objects that are familiar to them (e.g., photos, personal items) can be helpful. (Alzheimer Society Canada, 2000). Some other suggestions are listed below.

### What Should I Do?

- **Secure** gates and doors.
- **ID** shoe tag or bracelet with phone number and address
- **Pocket cards** stay clam and don't walk away
- **Maintain** regular routines.
- **Provide physical activity** to help reduce the person's need to wander.
- **Provide opportunities** for mental stimulation.
- **Provide reassurance** about where they are

If wandering is a recurring concern, you may want to consider signing up with the **Alzheimer Wandering Registry**. The person with dementia receives a medic alert bracelet or identification tag that identifies him or her and their condition. The person's contact information is stored with the police department or RCMP. This helps to increase the chances of a safe and quick return if the person is found wandering or lost. Contact the Alzheimer Society for more information.

## 3. ANGER

People with dementia may become angry for reasons that are not immediately obvious to the caregiver. This may be due in part to the sense of grief and loss that the person is experiencing as their world slowly becomes less and less familiar. It may also be due to fear of a situation or a person that they find threatening. Because of the brain damage caused by dementia, the person may also have less control over their emotions and behaviour and may become angry more easily.

As the disease progresses, the person with dementia finds it increasingly difficult to express emotions (such as anger) in appropriate ways. Aggression may occur in a physical form (e.g. hitting, slapping, biting, twisting an arm, punching) or a verbal form (e.g. shouting, name-calling). Aggressive behaviour may happen quite suddenly, without any apparent reason, or it may follow a stressful event.

Aggressive incidents are upsetting for both the person with dementia and the caregiver.

### What Should I Do?

- **Watch the person for signs of increasing anxiety.** The first sign of increasing anxiety and potentially aggressive behaviour is an increase in movement.
  - **See if you can find an immediate cause:**
    - Are they afraid of something that just happened?
    - Are they fearful of what they're about to do?
    - Do they need reassurance?
    - Are they being overloaded with stimulation or demands?
  - **Respond in a supportive manner.** Reassurance / gentle voice. Try to determine what the person's need is and provide care to meet that need.
  - **Reduce noise and activity levels.** Try to keep a balance between restful and active periods.
  - **Maintain a consistent daily routine.** Avoid changes to both routine and environment.
  - **When communicating, avoid arguing.** Avoid expressing anger or irritation, either verbally or non-verbally (body language). Speak slowly and use repetition.
  - **Make sure activities are broken down** into manageable steps and that instruction is given clearly.
  - **Switch their focus and occupy them.** They will probably forget why they were feeling angry or upset.
  - **Approach from front, at same eye level and slowly.** Tell them first what you will do to avoid startling them.
  - **Use touch carefully.** As it may provoke further agitated behaviour.
  - **Use distraction.** Go to another room, leave the situation, try another activity or topic of discussion.
- \* Remember, if you sense that you are in danger, leave the room and call for help.

## 4. SOCIALLY INAPPROPRIATE BEHAVIOUR

People who have been diagnosed with a dementia can lose the ability to remember how to respond and behave in a socially acceptable manner. A person with this disease gradually forgets these social rules of conduct and may behave in ways that seem increasingly odd and inappropriate to other people. Most often, the person with dementia is not aware that they are breaking social rules. The behaviour may occur because they can't find the right word to express themselves or can't maintain a train of thought or simply lose self-control or inhibition.

### What Should I Do?

- **Stay calm.** Don't overreact, and don't argue, regardless of how extreme the behaviour may be. If you show distress, you may create distress in the person.
- **Be positive and reassuring.** Avoid drawing attention to his or her error.
- **If possible, distract them with conversation.** Gently lead them away from the room and correct the error. For example, if they arrive in the living room without their pants on, take them back to the bedroom and have them finish dressing. Don't make an issue of it.
- **Don't scold or punish.** They are not aware that their behaviour doesn't "fit". Lecturing or trying to get them to relearn the correct behaviour isn't going to work. It will only cause them (and you) distress.

## 5. SEXUAL BEHAVIOUR

Sexual desire can be expressed in many ways: touching, intercourse, masturbation, fondling of the genitals, display of the genitals, and physical and verbal advances to others.

The desire for and interest in sexual expression does not decrease as we age. When a person develops dementia, their sex drive may increase or decrease. If they have a partner, sexual expression may continue unchanged. However, problems may arise if they have no partner or if their partner's sex drive doesn't match their own. The situation for the "healthy" partner may become difficult to manage. In some cases, the partner with dementia will not remember having just had intercourse.

### What Should I Do?

- **When the person shows some form of sexual desire**, they may be trying to express another unrelated need.
  - If he opens his zipper or removes his clothing, does he need to use the toilet?
  - If a woman raises her skirt, is she looking for a bathroom?
  - Could the behaviour be a request for attention?
  - Are they lonely or bored?
  - Did they misinterpret the touch or approach of a caregiver?
- **If the sexual expression** is indeed a need to express sexual desire, it is probably best to give them some privacy. They can then satisfy their needs without getting in anyone's way. Don't judge or scold.
- **If sexual satisfaction is not possible**, try to distract them to another activity that they will enjoy.
- **If you are the object of the sexual desire**, don't get upset. Stay calm. Keep your sense of humour. Try to distract them into another, non-sexual activity.
- **If they make sexual advances to a visitor or stranger**, try to distract them. Take them away from the situation. Explain the circumstances to the visitor or stranger. Perhaps you need to leave the person alone in their room so that they can satisfy their sexual need by masturbating.
- **Avoid approaching the person in ways that might be misunderstood**, such as sitting hip to hip on the bed, putting your arm around their waist, stroking their knee.

Information adapted from: Alzheimer Society of Canada. 2002. Day to day. [Brochures].