

Four Steps to Deal with Difficult Elderly Behavior

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Is your parent or elder acting in ways that do not seem like the person you have known – or perhaps in ways that exaggerate difficult behavioral tendencies he or she exhibited all through life? Do you feel at a loss to deal with this, under stress, and at the end of your patience?

You are not alone. This is a VERY COMMON issue faced by caregivers for the elderly.

Here are some commonly encountered elderly behaviors:

- **Resistance to showers and hygiene**
- **Refusal of help; Mom or Dad fired the nursing assistant**
- **Constant complaining – about everything, including you, no matter how hard you try to help**
- **Agitation, anger and verbal aggression**
- **Clinging behavior – Mom calls you 20 times per day, will not let you off the telephone, and says you should feel very guilty for “abandoning her” and not seeing her more often than once per day**
- **Withdrawal from social interaction, and refusal to participate in activities**
- **Failure or refusal to take needed medications**
- **Refusing or failing to eat properly**
- **Paranoia and hallucinations – Dad called the police because he is convinced that his neighbors (or perhaps you) are robbing him**
- **Forgetting; losing things; confusion; wandering**
- **Extreme disorganization and cluttered chaos, while refusing help**
- **Repetitiveness**
- **Fabrication and pretending; is Mom or Dad really sick, or just pretending?**
- **Other challenging behaviors – you fill in the blank_____.**

As a caregiver, if you are facing some of these challenging elderly behaviors, or others, chances are you are under extreme stress in trying to learn to deal with them. You may be feeling utterly exhausted, abused and spent after every encounter with this behavior. Typically, as the son or daughter or close family member, you are almost always the target of your loved one’s aggression or other antics, because you are there. At first, you probably do not understand what is happening. You may feel angry in reaction to your elder’s aggressive or argumentative words or behaviors, and find yourself constantly in unthinking, reactive arguments with him.¹ Or, you may feel ashamed. Instinctively, you may feel you must hide the way your loved one is acting. You make excuses for her. Yet, the more you keep all of this to yourself, the more stressful your life becomes – until the load becomes intolerable. Your caregiving situation may seem to be spiraling out of control.

Does any of this sound familiar to you? You are not alone. Struggling to cope with challenging senior behaviors is often *the 600 pound gorilla in the life of the caregiver* – the most difficult part of

¹ We sometimes use “he” and “him” and other times use “she” and “her” to refer to your elderly loved one of either gender, in order to avoid constant repetition of the awkward phrases “he or she” and “him or her.”

caregiving, until you learn how to deal with these behaviors. Difficult elderly behaviors are very common. They may just be a normal expression of the frustration your elder feels in facing the challenges of aging, or a symptom of unmet emotional or psychological needs. But, such behaviors are also, in fact, among the prime symptoms that your loved one may be suffering from depression (so common in the elderly), or another physical ailment, such as a thyroid condition or urinary tract infection (also very common), which makes him or her irritable. Or, these behaviors may be a significant symptom that your loved one may be in the early – or not so early – stages of Alzheimer’s/ Dementia.

The statistics are staggering. In the United States, more than 50% of persons over age 85 suffer from some form of Dementia, the most common form of which is Alzheimer’s. And, untold more cases may go undiagnosed because the symptoms are not recognized. Most people associate memory loss with Alzheimer’s/ Dementia. Fewer people understand that behavioral issues are also a VERY common indicator of developing Dementia. For medical information about Alzheimer’s/ Dementia, see the section of HelpingYouCare.com on [Alzheimer’s/ Dementia](#) and our [Bookstore](#), which has a section dedicated to books on this pervasive disease.

However, even beyond the Alzheimer’s/ Dementia context, “difficult elderly behavior” is probably THE most common challenge and source of extreme stress for caregivers. Very often this is the thorn that induces caregivers to seek needed help. That is why we dedicate an entire section of HelpingYouCare.com™ to [How to Deal with Difficult Elderly Behavior](#). It contains both scholarly studies and links to other resources that may help you find practical, creative, and effective solutions to cope with this pervasive and recurring challenge in constructive and effective ways.

Addressing these difficult behavioral issues you face must have top priority in order for you to be an effective caregiver. There are helpful steps you can take to deal with this constructively and effectively, in ways that respect the dignity of your elder loved one and address the underlying needs or conditions that may be causing this behavior, while preserving your own health and sanity.

As a place to start, here is our summary of the four steps that experts generally advise caregivers to take in coping with difficult elderly behavior:

1. Get A Professional Diagnosis Of The Likely Cause Of The Behavior, And Treat It.

First, try to isolate the cause of the behavior, and address it. Consult appropriate geriatric experts for a thorough physical and psychological exam of your elder. Look first for treatable physical causes. Is there an infection, such as a urinary tract infection, which is known to cause irritable behavior? A physical illness such as a thyroid condition, also known to produce depression-like behavioral symptoms? An injury, or recent cataclysmic and disorienting emotional event (such as death of a spouse), that has caused temporary delirium or emotional imbalance? A psychological pattern of behavior, such as depression, that may need treating? Is there an irritant in the physical or social environment that is upsetting your loved one, which can be changed or avoided? Or, is your loved one’s behavior an early or mid-stage symptom of Alzheimer’s or another dementia? Once you isolate the likely causes, with medical advice, take steps to treat them.

2. Learn to Behave in Helpful Ways as the Caregiver.

Educate yourself to understand and react properly to the behavior, so that you are not aggravating it and making it worse. Review the scientific studies and practical articles cited on HelpingYouCare.com™, regarding the success of appropriate non-medication, behavioral methods of dealing with challenging elderly behavior. Common advice includes:

- Don't argue with your loved one; this will only make it worse. It is not important to convince her that she is wrong.
- Attempt to distract the person from repetitive or hostile communication or behavior or from paranoid delusions, by changing the subject and re-directing his attention to something positive that may absorb him.
- Don't take aggressive or complaining behavior personally; it is not about you, but rather about some physical problem or unmet needs, fears, emotions, or cognitive issues your elder has and may not be able to express in other ways.
- Focus on understanding and meeting your loved one's underlying physical and emotional needs and validating her feelings, not necessarily on the content of any communication or difficult behavior.
- Realize that your loved one probably cannot help it; despite how it may seem, he probably is not trying to be difficult just to irritate you.
- To address noncompliance with required hygiene (showers, etc.) or other scheduled requirements of daily living, don't push and order him. Try to give him a sense that he still has some control over his life, by perhaps suggesting two alternative times or other choices for him to make. Speak clearly and simply, suggesting one small step at a time, so that the chore does not seem overwhelming; *but don't be patronizing or treat him as a child.*
- To address fears preventing your loved one from socializing, start small. Lovingly try to coax him one small step at a time. Keep the interaction short, at first.
- Be soothing, loving, compassionate, and patient. Natural (and non-threatening) embracing and touching to show your love and affection usually are helpful.
- Keep a record and learn what triggers the problem behaviors; then take steps to avoid these situations recurring.
- Accept and respect the person as she is. *Treat your loved one with respect, and don't patronize, talk "baby talk" or treat her as a child.*
- Each person is a unique individual, and even experts advise that dealing with day to day issues often requires creativity. There are no "one size fits all" formulas. As a caregiver, you must "learn on the job" the best ways to deal with your own elderly loved one. The most important basic guideline is to act with love and extreme patience.

Learn to deal effectively and constructively with the challenging behaviors by the way you behave and react to them. This may be your most important step as a caregiver. On HelpingYouCare.com™ we will present articles, books, and other resources with practical information to help you understand and address the likely underlying reasons for the behaviors

and learn the most helpful techniques, behaviors, and approaches you can use to deal with them in a way that soothes and diminishes, rather than exacerbates, the problem behaviors.

3. Try Other Non-Medication Therapies.

Try other methods that have proved successful in calming and reducing difficult elderly behaviors, short of medications. These include regular exercise and physical therapy for your elder (under a doctor's supervision); music therapy; pet therapy; talk therapy; introducing inspiring, calming and positive thoughts and meditations; and involving your elder in daily activities that are absorbing and stimulating to him.

4. Obtain Good Medical Advice, and Second Opinions, about Potential Medications.

If behavioral and other methods do not work – or in extreme cases, immediately – it may be necessary, with expert advice, to turn to medication. In some cases medications are necessary in order to alleviate the problem in a way that will reduce suffering by your elder and yourself and help your loved one live a quality life. But, moderation is a virtue when it comes to medication.

Increasingly more is being written about over-medication of the “difficult elderly” in nursing homes and other institutions, in order to control their behavior. This is a serious medical, ethical, and humanitarian problem. All humane and thinking persons abhor the over-use of medications to control behavior of the elderly, or anyone else. However, sometimes a light dose of the proper medication, prescribed by a competent physician or psychiatrist after a full examination and diagnosis, is the humane and necessary measure. Behavioral issues often are symptoms of physical issues that may require treatment by medications.

The use of medication is a decision to be made with the advice of your doctor. We recommend getting at least two opinions, and placing stock in those medical professionals who openly adhere to the view that “less medication is better,” and who welcome your getting a second opinion --- particularly when it comes to prescriptions for potent psychotropic medications that can produce an extraordinary and dizzying array of side-effects.

Be wary of any medical or psychiatric professional who after a five minute visit with your elder, immediately prescribes moderate to heavy doses of multiple medications of these types. Be particularly wary if he balks or declines to treat your elder if you indicate you would like to obtain a second opinion on the proposed medications. These are strong signs that you may have encountered one of those “doctor-feel-goods” who view the nursing home or assisted living facility where your elder resides, not your elderly loved one, as their primary client. Many such doctors with psychiatric specialties travel from nursing home to nursing home to see hundreds of elderly “difficult” patients on site. By prescribing excessive medications that keep these elderly “under control” (and basically in a perpetual daze), these “doctors” make the nursing home staff's work easier, and thereby receive more referrals of elderly patients – with Medicare footing the bill.

As caregivers, many of us have seen or heard about unfortunate cases like these. Please participate in the Editorials & Advocacy section of HelpingYouCare.comTM, where we address these and other issues of our health care system that need reform. Being aware of these issues can help you as a caregiver. Many excellent doctors and specialists are there to provide

competent help for your elderly loved one, and part of your role as a caregiver is to help find them and manage and coordinate the care your loved one is receiving.

Through a combination of the above steps, you will succeed in alleviating the challenging elderly behaviors you have been facing. This is key to reaching the sense of reasonable control over your caregiving situation which will reduce your stress and enable you to be a better and more loving caregiver, to the benefit of both your elderly loved one and yourself.

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