

# **Managing Behavioral Symptoms**

*Understanding the ABC chain and becoming a behavioral detective*

# What is a Behavior?

As your relative's illness progresses, you might begin to notice changes in their behavior. Examples of this include:

- Wandering or pacing
- Following you around the house
- Asking the same question or telling the same story repeatedly
- Rummaging
- Resisting activities of daily living, like bathing, grooming, or eating
- Passive behaviors, like withdrawal

These behaviors can be difficult to manage, and it's normal to feel overwhelmed and stressed when they occur. However, it's important to remember that these behaviors are the result of changes in your relative's brain. **They are not intentional.** If your relative does not have any behaviors you find stressful, spend today focusing on managing your *own* behaviors or reactions to the person you're caring for (ie: yelling at your loved one when you feel frustrated).

# Defining and Describing a Behavior

## A behavior is:

- 1. An action:** something specific that a person does. For example: pulling everything out of a closet and not putting it back
- 2. Observable to the senses:** something you can see, hear, feel, smell, or taste. For example: you can hear your relative pacing in the middle of the night when they should be asleep
- 3. Something we want to increase, or decrease:** for example, you may want to increase the amount of healthy food your relative eats, or decrease episodes of wandering.
- 4. Measurable:** a good description of a behavior allows us to record how many times and for how long the behavior occurred. For example, “For 3 out of 5 afternoons this week, my mom spent one hour yelling at the TV.”

## A behavior is NOT:

1. Within your loved one’s control.
2. Something you can assume or infer
3. An emotion

**Always ask yourself:** why do I want this behavior to stop? Is this a battle I want to choose? Many people with memory loss engage in behaviors that, while odd, are not harmful to themselves or anyone else (ie: putting ketchup on cake). Attempting to change these behaviors will prevent you from conserving your energy for more important “battles.”

## Activity

Now take a few moments to respond to the questions below. If your relative does not have any behaviors you'd like to manage, think about your own behavior.

1. What are the top 3 behaviors your relative does that upset you?

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2. Out of these 3 behaviors, which one causes you the most stress?

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## Step 1: Ruling out Medical Problems

Before trying to change behaviors, it's important to make sure that they're not related to a medical problem. Common medical problems that can affect behavior include:

- 1. Illness or Medical Conditions:** people with memory loss cannot always effectively communicate pain or discomfort (ie: musculoskeletal pain, constipation, hunger), and certain illnesses can organically impact cognition (ie: urinary tract infections, fevers)
- 2. Medication Side Effects:** some medications can impact mood, appetite, sleep patterns, GI function, attention span, and more.
- 3. Sensory Impairments:** if your relative cannot see or hear properly, their cognition will likely be worse.

It is important that these conditions be adequately diagnosed and treated by your relative's primary care doctor, or by a specialist.

Remember, **always** contact your relative's doctor if there is any **sudden** change in your relative's functioning.

## **Step 2: Do Some Detective Work and Create Your ABC Chain**

**Most behaviors have a purpose.** For example:

- If your relative cannot find the right words to describe pain or discomfort, they may yell when you try to get them out of bed.
- If your relative is bored but is unable to pick an activity on their own, they might pace through the house.

There are often several reasons why a behavior occurs, and these may change over time and from person to person. For people with memory problems, there are at least 5 major causes for difficult behaviors:

- 1.** To gain attention
- 2.** To increase sensory stimulation
- 3.** To obtain access to objects
- 4.** To escape or avoid something unpleasant
- 5.** To respond to an internal emotional state (fear, anxiety, etc.) or physical state (hunger, fatigue, etc.)

So how do we figure out which one(s) you're dealing with? On the next page, we'll learn the ABC chain and what each step entails.

# The A-B-C Chain

**A** stands for **antecedents**, or what happens before the behavior occurs.

Examples of antecedents are:

- A demand that is placed on someone (ie: “time to take a shower,” or “please eat what’s on your plate”)
- Things outside of our control that can affect a person for a long period of time (ie: time of day, day of the week, or season)
- Problematic communication between caregiver and care recipient
- A life transition or major event (ie: moving to a new house, a fall or hospitalization)
- Environmental factors (ie: noise, sights, physical space)
- Cues and triggers that are specific to your relative (ie: a briefcase sitting in the hall may remind them of work, or a wedding on a TV show may remind them of a deceased spouse)

**B** stands for **behavior**: what your relative does, or what you do.

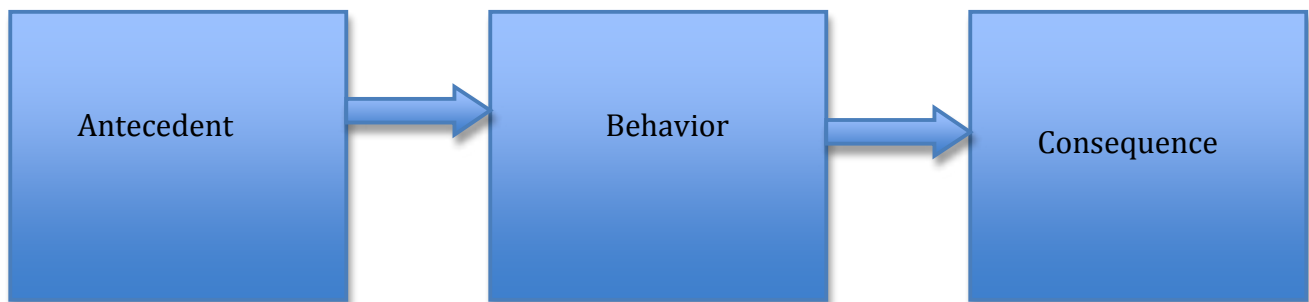
**C** stands for **consequences**, or reactions that occur after the behavior, such as what you or your relative does next, or how each of you feels.

Consequences are important to pay attention to because depending on how you react to a situation, you may increase or decrease a behavior.

**However**, a person with memory problems may have difficulty learning new information, which also means difficulty understanding action and reaction, as well as “right and wrong.” For example, let’s say that every time your relative refuses to shower you “take away” their dessert. The next day, it’s likely that they won’t remember that the consequence for not showering is no dessert.

The only things you as a caregiver have control over are antecedents and consequences - not your loved one's ultimate behavior. There may also be times when you can't alter the antecedent, or environment (ie: we cannot control when it gets light and dark outside). During these times, changing how *you* react to the behavior can prevent the situation from getting worse.

You also have control over how you reward your relative's "good" behaviors. Your relative may not be able to connect the reward to how they behave in the future, but providing a reward will improve both of your moods. Try to choose a specific reward that you give *only* when a desired behavior occurs.





## **Detective Work to Determine Triggers**

Sometimes an antecedent is obvious, and sometimes you have to do some digging. In this case, it's best if you can be as specific as possible. For example, we could say a behavior usually happens at home. But what room in the home? Is there a specific part of the room where it tends to occur?

Some questions you can use to get started are:

- Who is around before or during the behavior?
- Where does the behavior occur?
- What time of day does the behavior occur?
- Is there a time when the behavior does **not** occur?
- What have you tried so far to manage the behavior?

### **Let's try an example:**

Every morning at 8 AM, Jim gets the car keys from the hook near the door and tells his wife Sue, "I'm going for a drive!" Sue reminds him that he no longer has a license, and he responds by yelling "I don't know what you're talking about!" He spends the next hour pacing by the door, muttering and getting increasingly anxious, while Sue occasionally pops by to say, "I don't know why you're behaving this way – it won't change anything."

# Activity

Take a moment to think about your relative's behavior that you identified earlier and fill out the following A-B-C chart.

Day/time	People present	Environmental triggers	Antecedent	Behavior	Consequences

## Ideas for soothing Anxiety & Agitation

- **Music therapy:** Play music from your loved one's childhood/early adulthood, or generally soothing music such as classical or jazz. Or, sing songs together.
- **A weighted blanket:** available at most home stores. Make sure to get the correct weight for your loved one.
- **Aromatherapy:** Use calming scents, such as lavender
- **Something to touch:** Give your loved one kinetic sand, "slime," a fidget spinner, a "fiddle muff," or a stuffed pet.
- **Gentle touch:** If your loved one will tolerate this, try giving them a hand or shoulder massage. Make sure to approach them from their front.
- **Deep breathing:** Lead your loved one in a few signal breaths or some gentle stretching
- **Virtual Reality:** Try a guided train ride or 'hike' through the mountains via Youtube. An example is the 4K Relaxation Channel:  
<https://www.youtube.com/channel/UCg72Hd6UZAgPBAUZplnmPM>  
or a virtual coffee shop:  
[https://www.youtube.com/watch?v=co\\_ejQQcrwI](https://www.youtube.com/watch?v=co_ejQQcrwI)

## **Relaxation Activity: The Power of Music**

Music can help you create a moment of stillness and presence, especially if you struggle to use some of the other mindfulness techniques we've learned so far. As we'll learn in our chapter on activity engagement, music can also have powerful calming properties for your relative. As we listen to a short song, you can try a few things:

- Simply sit quietly and appreciate the music
- Try to pick out one instrument or vocal part and track it throughout the song
- Focus on the lyrics – what thoughts and feelings do they bring up for you?
- Use your deep breathing method to breathe in and out with the rhythm of the music