

# Family Connect

## Understanding and Managing Aggression

### The Facts

- Behavioral symptoms of aggression are common in physically and mentally frail older adults.
- These symptoms are often misunderstood and mismanaged. It is important to accurately assess underlying social, psychological, personal, and medical needs to effectively manage aggression.
- Both behavioral and pharmaceutical interventions are often needed to provide comfort.

### Providing Care Can Trigger Aggression

Most physical aggression occurs while personal care is being given to cognitively impaired individuals. Aggression commonly occurs as a reaction to a perceived threat, **not** as an attempt to injure the caregiver. Aggressive behaviors may be reduced or eliminated by adjusting care routines.

Aggression during personal care is often related to:

- Lack of attention to personal needs or preferences
- Touch or invasion of personal space
- Fear of unwanted intimacy
- Frustration related to declining abilities
- Discomfort, pain, or fear of pain
- Loss of personal control or choice
- Unfamiliar routine or procedure

*Understanding the experience from the person's perspective is very important when looking for ways to comfort and soothe.*

### Assessment

- Many factors can trigger aggressive behaviors, including mental health, physical health, medication side effects, social and family interaction, life history, and personality.
- To understand the cause(s) of aggressive behavior, healthcare providers may perform a comprehensive assessment:
  - Current symptoms (onset, duration, intensity, changes)
  - Medical history and physical exam
  - Psychiatric history and mental status exam
  - Current and previous medications
  - Lab tests, electrocardiogram, CT scan, MRI
- Identify, assess, and treat medical problems that may be causing behavioral problems.
- Include, or rule out, other conditions that interact with or trigger behaviors.
- Know that the following experiences may affect a person's perspective:
  - Loss of power and control
  - Unwanted dependency
  - Loss of meaning and purpose in life

## Common Risk Factors for Aggressive Behaviors

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### **Cognitive impairment due to dementia**

- Frustration with progressive loss of function
- Inability to express feelings, needs, and sensations
- Decreased inhibitions, late-day fatigue, pain, or overstimulation leading to disproportionate responses to events (sundowning, catastrophic reactions)

### **Other psychiatric illnesses**

- Delirium, depression, bipolar disorder, schizophrenia, paranoid disorder, and other disorders causing psychotic symptoms

### **Sensory impairment**

- Impaired hearing and/or vision; communication difficulty; misinterpretation of events

### **Inappropriate sensory stimulation**

- Overstimulation (e.g., noise, confusion, too many people) can overwhelm and frustrate individuals
- Misinterpreted stimuli (e.g., radio, TV, mirrors) may threaten or frustrate individuals

### **Lifetime use of aggression as a coping mechanism**

### **Unmet psychological needs**

- Isolation or loneliness (possibly causing illusions or delusions)
- Perceived invasion of privacy or personal space
- Changes to long-standing patterns of behavior

### **Sleep disturbance**

- Reduced hours or poor quality of sleep

### **Health and medical conditions**

- Pain, discomfort, hunger, thirst, or fatigue
- Constipation, urinary tract infections, other GI problems
- Other conditions: acute hypoxia (lack of oxygen to the brain); infections; electrolyte disturbances; endocrine, cardiovascular, renal, and neurological disorders

## Ten Principles of Behavior Management

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1. Know the person behind the disease and individualize care.
2. Understand that no two people or situations (even with the same person) are the same.
3. Focus on the person, not the task.
4. Pause to assess the person and the situation.
5. Break tasks into steps, allowing the person to do what they can do individually.
6. Respond to the person's emotions; do not argue.
7. Use the person's agenda.
8. Slow down; follow the person's lead.
9. Redirect the person using a positive approach.
10. If things are not going well, leave and try again later.

## The ABC Model

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A three-step method of approaching behavior symptoms.

### Identify the target BEHAVIOR to be changed

- Describe the behavior completely, precisely, and accurately using measurable terms.
- Identify the frequency, duration, and intensity of the behavior. Does it occur with other behaviors?
- Think about for whom the behavior is a problem (e.g., the person, family)

### Investigate the possible ANTECEDENT conditions of the target behavior

Triggers to behavior may include:

- **Internal** factors: sensations, feelings, and experiences (e.g., pain, hunger, fear, etc.)
- **External** factors: physical or social environment (e.g., noise, too many people, confusing surroundings, demands to function beyond their abilities)

### Examine and describe the possible CONSEQUENCES

Consider the possible consequences that occur after the behavior occurs:

- Who responds to the behavior and how do they react?
- What does the person with dementia do next?
- Are reactions making the behavior worse or better?
- What alternative reactions are possible?

### Make a Plan:

- ✓ Set an achievable, realistic BEHAVIORAL goal.
- ✓ Change the ANTECEDENT conditions to reduce likelihood of recurrence.
- ✓ Change the CONSEQUENCES for the targeted behavior.
- ✓ Evaluate to determine whether any or all of the plan worked.

*Taking more time during personal care may help save time by avoiding emotional or physical conflict.*

## Medication Management: Considerations

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- Non-pharmacological approaches should always be considered first unless:
  - There is danger.
  - The person has a high level of distress.
  - There are clear symptoms for which medication is an effective solution (e.g., depression, psychosis).
- Establish specific goals for the person that may include:
  - Resolving delusions.
  - Decreasing the frequency of hitting.
  - Reducing disruptive vocalizations.
- Identify desired outcomes first to help with decision making.
- Medication should be selected to minimize side effects in relation to the person's symptoms.
- Medication should be started at the lowest possible dose and slowly increased if necessary.
- Carefully monitor improvement in symptoms while watching for problematic side effects.

*Speak with your provider or pharmacist about symptoms and medication options.*