

Taking a New Look at Dementia Behaviours: Adjusting Perspectives

Behaviour is not simply a neurobiological symptom of disease. It is a complex response to the interaction of many variables that include the person's current cognitive abilities, psychosocial and cultural history, physiological and emotional needs, and physical and social environments.

A lack of understanding about what the root causes of dementia behaviours, or to simply dismiss it as "part of the dementia", will not result in appropriate intervention. It is critical that care providers understand the meaning of behaviour, look to identify what triggers it, what risks it poses and to whom, and to intervene in a timely and appropriate manner.

The behaviours associated with word dementia have been termed problematic, disturbing, difficult, inappropriate and challenging. This negative terminology that emphasizes the behaviour from the caregiver's point of view is being replaced with the more neutral and person-centred term responsive behaviours, in recognition that most behaviour is a response to a cue or trigger that the person experiences.

Today, behaviours in dementia are being recognized as a form of communication, rather than random, unpredictable or meaningless events that arise from disease. It is helpful to view behaviours as the person's best attempt to respond to their current situation.

When health care providers focus on the individual's perspective, and see behaviour as a form of communication and coping strategy rather than a problem to be managed, a more person-centred approach to care delivery can be achieved.

What's Needed?

The evidence indicates that successful management of BPSD requires care providers to understand and accommodate BPSD, not control them. This means making adjustments in our viewpoint of what lies behind behaviours, our use of language, and using care approaches that are person-centred and tailored to the individual with an emphasis on remaining abilities and strengths.