

Orange Juice Tossing

A woman with advanced dementia was residing in a nursing home. She spoke only Russian, and staff spoke only English. When staff would try to take away her food tray after meals, she would throw orange juice at them. She was very accurate. Make her stop.

Who is this person? Checking with the staff and family, it was found that this woman was very independent, and had run a household all of her life.

Making use of abilities that remain. She could hold things, had good vision (note the accuracy of her throwing), and could read (in Russian, once this was checked).

Gather the evidence. Why is this happening? We guessed that it could be because she did not want to have her food tray taken away without giving her permission first. This is an issue of giving choice back to the person with dementia. To take it away without asking (in Russian, so that she could understand) could have been interpreted as an attack on her independence and dignity (like when a waiter or waitress takes away food from you at a restaurant before you are finished).

Use the formula. Going through the formula, we decided that the best approach was to change the environment. We needed to find a way for staff members to ask permission to take away her food so that the resident would understand what they were saying.

Solution. The challenge was how to enable staff who did not speak English to be able to say, “Are you finished?” in Russian. To do this, we created a sign that had a phonetic version of the phrase printed in English – Wee Zah **Kohn** Chee Lee (accent on the syllable KOHN). The sign was placed in the dining room so that staff could see it when they went to get the woman’s food tray. If they said this phrase and she said, “Nyeht,” staff members would back away. If she said, “Dah,” they would take the tray and read another phrase – Spah **See** Bah, which is “thank you” in Russian. This approach enabled staff to give the woman choice, and involved only tweaks in both the physical and social environments. This also kept orange juice out of staff members’ hair.

CLUE: What would make you angry at a waiter in a restaurant?

I Know You're In There

A woman with dementia moved into her daughter's home. The woman kept going to a locked door and trying to open it. She would bang on the door and yell, "I know you're in there!" When her daughter would tell her, "Mom, that's just a closet with some cleaning things in it," her mother would say, "You're lying!" What should the daughter do?

Who is this person? Not much information is given here. It appears that this location is associated with a person and an event in the mother's past that was unpleasant.

Making use of abilities that remain. She can walk and she can see. In addition, she can speak and give answers. An important thing to determine is if she can still read. If so, printed information can help with finding a solution.

Gather the evidence. In this case, a location in the environment consistently seems to upset her. Was there a similar location where she used to live that was associated with an unpleasant event? Why this location? Does she do this with other closed doors, or just this one? Ask her who is in the closet. Open the door, show her the contents of the closet, and observe how she reacts.

Use the formula. If this behavior has a sudden onset, it might be useful to check to see if the older woman has an infection or other physical problem. A check to insure that she does not have a UTI might be useful.

Solution. Get the cleaning things out of the closet and take off the closet door. See what happens. If this does not solve the problem, does the older woman now go to other locked doors? Does she continue to go around the house searching for the person who used to hide in the closet if you take off the door? If so, it might help to know who she is looking for. Is there a way to externally store the information that the person she is angry at and looking for is not there (like an obituary – real or not – put in a memory book)?

CLUE: Who is supposed to be in the closet?

You Solve the Case

The Pill

A man with dementia calls his daughter on her cell phone and says, “Do you know if I took my pill yet today?” This is happening more and more frequently. What should she do?

Who is this person? Is this a person who normally is anxious? Is he anxious about anything else?

Making use of abilities that remain. He has the motor and cognitive skills necessary to make a phone call.

Gather the evidence. How often does this happen? When is it most likely to happen?

Use the formula. It appears that the problem is a combination of anxiety about not taking the medication and a need to have that information. To be sure, you can ask “What do you think, dad?” to see if he is seeking information or if he is seeking one of “the usual suspects” of reassurance, attention, or social contact.

Solution. Create a checklist and have him practice putting a check next to the time that he takes the medication. You can have him sign his name if that helps reassure him that it was done. You can use spaced retrieval to give him practice with this procedure. In addition, you can program a timer or alarms to tell him when to take the medication, and use spaced retrieval to let him learn to associate the sound of the timer or alarms with taking medication.

CLUE: If the question is asked frequently, what is the first thing that the daughter should say after the question is asked, and why?

I Hate Her

An older woman with dementia was living in her home, but there were safety issues. Her family hired a very nice home health aide to come into the woman's home to help with cooking and some personal care. The woman, however, said that she hated the aide, and wanted her out of the house. What should be done?

Who is this person? Is this a woman who always has valued her independence? Does the presence of an aide represent a threat to her independence? Did you ask the woman WHY she hates the aide?

Making use of abilities that remain. She seems to have mobility, cognitive capacity and the ability to communicate. She can see (but how good is her vision?).

Gather the evidence. Does she feel this way about family members who try to help her? Is it specific to this aide? Did it start immediately when the aide first arrived? Has the family tried to have other aides work with her before? If so, did she react to them in the same way?

Use the formula. It looks like this could be either a social environment issue or something about the specific aide. The information obtained when the woman is asked why she hates the aide might help clarify this issue.

Solution. If it is an issue of independence, can the presence of the aide be reframed? Can you say that the aide is there to learn how to do things, and wants the older woman to help her learn how to help people? Can the aide do more to offer choice when offering to provide help to give the older woman a greater sense of control? Is the older woman cognitively intact enough to use a social contract (guarantee of being able to stay in her home in exchange for allowing the aide to help)? Is there something about the aide's physical appearance that brings out an old negative association? If so, try asking the aide to change things in her physical appearance (hair; makeup; what she wears) to see if this changes the reaction.

CLUE: How was the aide's presence explained to the older woman?

Don't Water the Plants

An older man moved into his son and daughter-in-law's home. Shortly afterwards, his daughter-in-law noticed that someone (probably her father-in-law) was urinating in pots containing large indoor trees. What should she do?

Who is this person? What is the older man's background? Was urinating on trees out of doors a previous habit? What are the surroundings around the indoor trees (are there outdoor scenes to make him think he is outdoors)? Is he independent?

Making use of abilities that remain. It appears that he is mobile, and has some degree of independence. Can he read?

Gather the evidence. Have you asked him if he is urinating on the indoor trees? If so, what was his answer? What time does this happen? Is he also urinating in the toilet? Have you asked him to show you where the toilet is? If so, what did he say?

Use the formula. Does he have an infection? How is his eyesight? Is he bored? What things occupy his time and attention? Can he read? Does he follow written directions? (If so, will he follow directions such as "Please do not water the trees?") Is he angry about having to move into a new place?

Solution. The first thing is to make sure that he knows where the bathroom is, and to provide environmental supports (contrast between toilet and floor, labeling the door of the toilet if that helps, etc.) for using it. Written directions such as "Please do not water the trees" may help, along with putting doilies around the base of the trees (as a type of "man repellent"). Is this a conscious act? If so, talking about it might help. Is this a form of rebellion? If so, giving him meaningful activity and a role in the family might address his resentment.

CLUE: Where is his bathroom, and does he use it?

You Solve the Case

The Cleaning Lady

An older woman with dementia moved into her daughter's home, and now wants to help around the house. But when she "cleans things up," she puts things away and they cannot be found again. What should the daughter do?

Who is this person? It appears as if the older woman has always wanted to be useful and has done housework for many years. However, she now is in a new environment. It also appears that she does not like to ask for help.

Making use of abilities that remain. The older woman is mobile, can grasp objects, has good motor skills and procedural memories, and knows routines regarding housework.

Gather the evidence. What specific tasks is she doing when she "cleans things up?" Where does this take place? Where is she mistakenly putting things away – is there a pattern? Can she read? Can she follow written directions?

Use the formula. Is she bored? If environmental supports are given, such as words or pictures to show where to put things away, can she use the supports successfully?

Solution. Can she be provided constructive activities at the times that she tries to "help"? Can she work as a team with the daughter? Can the mother use external aids to successfully complete the tasks and put things away in the right places? If the mother could do this, would the daughter still have a problem with the mother doing housework (who owns the problem)?

CLUE: Why does she put things away in the wrong place?

You Solve the Case

I'm Bored!

A man with early-stage dementia complains that he is bored and that there is nothing for him to do. He was a business executive, and says that he does not want to be with “a bunch of sick old people” at a senior center or adult day health care center. What should the family do?

Who is this person? This is a person who had a great deal of responsibility, and who managed other persons. He probably does not want to do anything to challenge his self-image as a highly competent and capable individual. He is not interested in taking part in any activity that he would believe to be “trivial” or “beneath him.”

Making use of abilities that remain. Is he mobile? Can he read? How are his social skills? Can he converse? Can he give directions? Can he handle materials without any problems?

Gather the evidence. Did he ever help organize or take part in charitable events? When did he feel most important or “at his best?”

Use the formula. When is he NOT bored? Is this a case of under-stimulation in his environment? Who does he consider to be his “social equals?”

Solution. He could be a volunteer at an adult day center or assisted living program, and run activities for persons with dementia. This would give him a role that is meaningful, as well as being helpful to clients and staff. This is a version of the “tai-chi defense,” where we would use his belief that he is different from clients with dementia and give him a badge with “volunteer” on it. In fact, he would be a volunteer. This allows him to come to the center while preserving his sense of being different. The role allows him to have a position of responsibility. Once he begins to interact with clients with dementia, he may begin to see them as persons. However, this only happens if he comes to the center, and letting him have a role that lets him believe that he is different is a means to get him to the center.

CLUE: What role at the center would make sense to this man?

You Solve the Case

What!?!

An older woman with dementia also is hard of hearing. She is taking part in a group exercise program. She has a personal aide, who tries to tell her what the group exercise leader is asking the group to do. The older woman shouts out, "What?" "What did you say?" This is very disruptive for the group. What should the aide do?

Who is this person? She appears to want to be with other people, and has a support system that allows her to have a personal aide.

Making use of abilities that remain. As stated in the CLUE, she can read. An important thing to find out is if she can follow directions, especially written directions.

Gather the evidence. It appears that the aide is attempting to use an ability that is impaired (hearing) to communicate information to the person with dementia. This isn't working.

Use the formula. It appears that the major issue is a physical one – the older woman cannot hear well. In addition, the aide is attempting to ask the older woman to use an impaired ability, rather than using abilities that remain.

Solution. In this situation, the aide was given a card which said "Watch her. Do what she does." The aide was asked to show the card to the older woman, and then point to the exercise leader. The older woman read the card, looked at the leader, and began to do what the leader was doing.

CLUE: The older woman's vision is fine.

I'm Not Your Mother

A man with dementia is living in the home of his son and daughter-in-law. When the man's daughter comes to visit, he calls her by her mother's name. This is very distressing to the daughter. What should she do?

Who is this person? The gentleman appears to have at least moderate stage dementia. However, when he calls the daughter by her mother's name, the choice of names is not random. It is the name of someone who is very familiar to him. Also, if the daughter strongly resembles her mother, and if her father believes that he is younger than he actually is (see "The Backward Time Machine" section of the book), his behavior actually makes a lot of sense. Also, how good is his vision?

Making use of abilities that remain. He can read (see the CLUE). Also, he still can speak.

Gather the evidence. Does this happen for other persons that the man knows, or only with the daughter? Does this happen every time she comes over? Ask him how old he believes he is.

Use the formula. It is understandable that this is distressing to the daughter. Does she know why this might be happening? How does she interpret her father's behavior? Can he learn using spaced retrieval?

Solution. There are several things to try. One would be to have the daughter wear a name tag which has something like "Jamie" and "Your Daughter" to see what happens when he reads this. If this helps him call his daughter by her name, this might be the solution. But some family members find this approach too emotionally painful, even if the approach works. Another approach would be to see if using spaced retrieval might help him call his daughter by the correct name. It might be helpful to suggest that the daughter always wear a particular piece of clothing, like a scarf, every time she visits so that this environmental cue can help him associate the piece of clothing with his daughter's name.

CLUE: The man can read.

You Solve the Case

Doing God's Work

A man who had been the pastor of his church began to attend an adult day health care center. The family dresses him up in his best outfit, takes him to the center, and tells him that they will return at 4:30. In the morning, he comes in, has coffee and reads from the newspaper. The gentleman is fine and a pleasant individual. But at 11 o'clock in the morning, he gets ready to leave the center. When staff members say that he should stay, he tells them that it is time for him to go to church and to attend to his people. When the staff members tell him that he does not have to go to church, the man gets angry and tells them that they are in league with the devil. He threatens to hit them if they do not let him go. What should the staff members do?

Who is this person? It appears that this man was a very dedicated preacher, and has a strong sense of responsibility to his congregation.

Making use of abilities that remain. This gentleman appears to be in good physical condition and has good social skills.

Gather the evidence. It would be very useful to ask the man where he needs to go and why. He seems to be the type of person who could give a coherent answer.

Use the formula. Two issues arise. First, staff and family need information and education about why this might be happening and how to deal with this situation,. Also, environmental interventions are needed to allow the older man to know what day it is NOT.

Solution. The key is to find a way for the gentleman to conclude for himself that today is not Sunday. There are a number of options for this. One is for the family to NOT dress him in "Sunday clothes" when he is going to the center. The other is to put a sign next to the door which says "Today is ____ (Monday; Tuesday; etc.)" so that he will see the sign when he gets ready to leave the center. Then the staff members can just point to the sign to let him know what day it is. Also, this lets the sign convey the information, rather than trying to argue with the man about what day it is.

CLUE: Why does he think it is Sunday?

You Solve the Case

Hand to Mouth

A woman with advanced dementia lives in the home of her extended family, and has begun trying to eat all of her food with her hands. What should the family members do?

Who is this person? What was she like before she had dementia? Was she very careful and neat when she ate, or not?

Making use of abilities that remain. Can she answer questions? Can she speak? Can she read? If so, can she follow printed directions? Can she use a template (if so, can she use a template for a table setting, with outlines of where knife and fork and spoon should go)? Can she name utensils? Can she drink with a straw? Can she imitate if you demonstrate how to use utensils?

Gather the evidence. Does she have arthritis (does it hurt to use utensils)? Can she hold utensils that are designed to assist persons with arthritis? Does she grimace when she holds utensils? When did this behavior begin? Was its onset gradual or sudden? Will she use a spoon for soup? Will she use a tea spoon to stir tea before she drinks it? Does she try to eat liquids or nonsolid foods with her hands, too? What happens when you give her a spoon or a fork?

Use the formula. Is there undiagnosed pain (is it less painful to eat with her hands than to use utensils)? Can she recognize utensils? Is she rushing to finish the meal so that she can leave the table (is the dining situation over- or under-stimulating)? Does she seem upset when she is eating? Can she follow verbal directions (like "Show me how you use a fork.")?

Solution. The solution will depend on the cause. I have seen the use of a template to give guidance as to where to put the fork or knife when it is not being held to help persons like this, both in the U.S. and in Europe. If a template does not help, and you have tried everything else, can she be sustained with finger food? If she can keep up a good diet with finger food and liquids she can drink, as with a straw, let her eat that way. (Who's problem is it?)

CLUE: The older woman can hold things.

Take it Back

A daughter comes to visit her mother, who lives in an assisted living facility. The daughter takes the mother out to eat at a restaurant. She orders for the mother, and when the food comes to the table, the mother becomes very agitated and they eventually must leave before the meal can be eaten. What should the daughter do when she goes out to eat with her mother?

Who is this person? Did the mother go to restaurants in the past? If not, the new environment could be a cause of agitation. If she did go to restaurants in the past, something that has changed in the mother might be a cause of agitation. How did she handle stress before she had dementia?

Making use of abilities that remain. Can she read? If so, can she read the menu? Can she read the name of the restaurant? Can she recognize different foods (ones she likes and ones she does not like)? Would it be better to take her to a cafeteria?

Gather the evidence. She is agitated by the dining experience. Did you ask her what was bothering her?

Use the formula. If the cause is not physical, it could be a case of overstimulation. Is the restaurant noisy? Is the lighting too low or too bright? Can she see what she is asked to read on the menu? If she is given 2-choice options, does this calm her down? Is she alright when served small portions (like in the case of Way Too Many Shrimp)?

Solution. Give the older woman choices of where to go, and ask her to write down her choice so that you both can refer to it. Come at a time when the restaurant is not too crowded or noisy. Can a friend of hers join you (if the presence of company produces a good effect)? Give 2-choice options. Call ahead to make sure that the restaurant serves some foods that the older woman likes. Tip the waiter or waitress in advance and insure that you get a quiet table. If none of these things work, consider having a picnic with take-out food instead of eating at a restaurant.

CLUE: The older woman is anxious when she enters the restaurant.