Tip Sheet # 11

Dealing with Difficult Behaviors

Some difficult behaviors of stroke survivors were there before the stroke. Other difficult behaviors may have just happened since the stroke. Whether difficult behaviors started before or after the stroke, they are still very challenging for family caregivers to deal with.

What has happened to the person I used to know?

- Brain damage from a stroke may cause emotional changes such as:
  - Depression
  - Anger
  - Apathy
  - Crying for no reason
- Difficult behaviors may also be caused by brain damage. Some behaviors might be:
  - Losing temper
  - Foul language
  - No appreciation for what you do
  - Poor judgment
- **Don't take changed behaviors personally.** These changes are often from the stroke, not because of you. Survivors might also choose to act this way. It can be very upsetting for a caregiver to deal with a survivor who has these behaviors. This tip sheet gives some possible strategies that you may want to try.

How can I as a caregiver deal with difficult behaviors?

- **Depression –** feeling down or hopeless to the point that the person can't function
  - A person with depression can't just "snap out of it".
  - Talk with a health professional or a counselor about how you can help.
  - Encourage your survivor to do everyday things
    - Get dressed
    - Go out of the house

- Eat regular meals
- Get some exercise – take a walk around the block together. Take the dog outside.
- Help them do things on their own
- Help them feel needed.

- **Anger – hostility or resentment**
  - Anger may appear as criticism. You may feel like there is nothing you can do right. Try not to take the criticism personally. Your survivor is probably angry about his or her situation.
    - Choose a time to talk with your survivor about his or her feelings. Help your survivor see the positive side.
    - Talk with a trusted friend.
    - Counseling may be helpful for you and even your survivor.
  - Some stroke survivors may become very angry without apparent reason.
    - Respond calmly. Say something like "I know you are angry."
    - Try to take the person to a quiet place.
    - Walk away if necessary.
    - After the angry episode, try to figure out what might have caused the anger.
    - Your survivor may not be able to hear or see like they used to. These changes may make it hard for them to understand what is happening.
    - Try to allow the survivor to do some problem-solving on their own as long as the environment is safe.

- **Crying/Laughing –** Sudden outbursts without reason.
  - There may not be an emotion causing this behavior.
  - This behavior may end quickly.
  - Don't draw attention to the crying or laughter.
  - Help your survivor focus on something else.

- **Foul language and behaviors**
  - Stroke can damage the part of the brain that controls how we behave.
  - Because of this damage, some survivors may use words they never would have used in the past.
  - Think of a comment you can make that explains the situation but does not embarrass your survivor. "The stroke seems to make that word come out sometimes."
  - For inappropriate sexual behaviors or undressing in public, see **Tip Sheet #15 Love, Affection, and Sexuality Issues.**

- **Apathy – sitting around without any energy**, not caring about what is happening
  - Withdrawing may be your survivor's way of coping.
  - Encourage your survivor to do a simple task such as pulling a few weeds or putting something on the table. Be safe in choosing activities and be careful to avoid a fall.
  - Focus on what he or she has accomplished rather than urging him or her to do more.
  - Once a person starts moving around a little or starts doing something, they may cheer up.
  - Some survivors may wait for someone to do things for them.
    - If the therapist or doctor has said your survivor is able to do things, encourage the survivor to do them.
    - "Doing for" someone when they are capable of doing for themselves doesn't help with their recovery.
    - Rather than nagging and complaining, arrange things so your survivor can complete a task and leave the room.

When do I need to contact a professional about difficult behaviors?

- If your survivor is depressed, the doctor needs to know.
- If your survivor has become extremely distressed or violently angry, call your doctor.
- New or different behaviors need to be reported to the doctor.

Where do I find out more information about handling difficult behaviors my survivor may have?

- Call the American Stroke Association's toll-free "Warm-line" at 1-888-478-7653.
- Call the National Stroke Association's toll-free number at 1-800-787-6537.
    - Look up "Hope: A Stroke Recovery Guide" on the website www.stroke.org
- Check with your doctor, rehabilitation nurse, or counselor.
- Read "The 36 Hour Day" for other ideas.
    - Mace, Nancy L. & Rabins, Peter (1999). The 36 Hour Day: A Family Guide to Caring for Persons with Alzheimers Disease. Warner Books. ISBN 0-8018-4034-1
- Check out the following Tip Sheets and the workbook in this notebook.
    - **Tip Sheet #9 Dealing with the Stroke Survivor's Emotions While Providing Care**
    - **Tip Sheet #12. Dealing with the stroke survivor's changed personality.**
    - Workbook toward the beginning of your notebook entitled, **"Skill-Building Tip Sheet #SB6. Stress Management Workbook for Caregivers and Survivors."**

References:

Mace, N.L. & Rabins, P.V. (2017). The 36-Hour Day: A guide to caring for persons with Alzheimer's Disease, Related Dementing Illnesses, and Memory Loss in Later Life. (6th Edition). Baltimore: The John Hopkins University Press.

National Stroke Association. Hope: The Stroke Recovery Guide. Accessed 9-14-2004 at www.stroke.org