

## Module 5: Managing Challenging Behaviors



As a Caregiver, your life has been changed considerably by your new role. The Veteran that you care for may seem like a different person from the one you knew before his/her injury. Some injuries, particularly injuries to the brain can cause changes in behavior. The Veteran may behave impulsively and/or express frustration and anger by behaving aggressively at times. It is important to remember that his/her feelings, behaviors, thoughts and beliefs may not be personally directed at you and may not be caused by anything you did or did not do.

In this module we will discuss some challenging behaviors and strategies to help you cope as well as what you can do to help the Veteran that you care for.

## Coping Tools to Consider

Combat Veterans can suffer wounds that not only impact their lives; but also the lives of the people and family around them; symptoms of stress, depression or anger are not unusual. You as a Caregiver need to learn about these symptoms and to manage your responses to them as well as get the help you need.



Everyone experiences anger from time to time. Anger is a natural emotion, which can be felt more often or more intensely especially by combat Veterans. When a person feels vulnerable, anger can allow them to feel more in control. What matters isn't getting angry, but rather, how the anger is handled.

The following are some coping tools, you may want to consider:

**Find or create a support group** of other family members and friends who may be dealing with the same or similar situations. Talking about your feelings, frustrations and fears with someone else can help ease your burden and give you the knowledge that you are not alone.

You may want to seek **counseling** for yourself independent of any therapy in which you may be involved in with the Veteran.

You do have the choice and ability to control your own responses to the Veteran's behavior. **Stay calm** in the face of outbursts and aggressive behavior.

**Try not to over-react** to statements and behaviors. If the Veteran is aggressive or in an outburst, do not over react by yelling or escalating your behavior. Speak calmly but firmly without raising your voice or using an excited tone of voice. Sometimes, you may need to speak slowly and let the Veteran know he/she is in distress. If his/her behavior begins to get worse, then you may need to slowly walk away telling the Veteran that you are walking away until he/she calms down.

**Avoid challenging** the Veteran's thinking when she/he is obviously in a highly agitated state. If the Veteran's anger is at a frightening level, stay safe and keep your children safe. Back away and keep a safe distance. Get help immediately if you sense that the Veteran is a danger to himself/herself or others.

Do **try to redirect** his/her focus by helping him/her attend to something else.

A Veteran who has lost independence in any form, due to an injury in the line of duty, may find this hard to accept. Imagine needing someone's help to bathe or to tie your shoe or not be able to think and express ideas clearly. This can be very frustrating. The following are ways you, the Caregiver can minimize some of the frustration the Veteran may be feeling:

- ★ Keep things simple.
- ★ Minimize the amount of things that can distract the Veteran while engaged in an activity.
- ★ Keep the noise down.
- ★ Allow the Veteran plenty of time to do tasks.
- ★ Keep a daily routine. Change can increase frustration.
- ★ Find tasks that the Veteran can do with little help. This will promote feelings of independence.
- ★ Change activities if the Veteran becomes frustrated.

### Communicating with the Veteran

If the Veteran is having difficulty expressing thoughts and ideas, the following techniques may be helpful:

- ★ Tell the Veteran when you do not understand what he/ she said. Ask him/her to repeat it again more slowly.
- ★ Use a consistent cue or gesture to let him/her know you did not understand. For example, cup your hand over your ear as a reminder to speak louder.
- ★ Help the Veteran start a conversation by asking a leading question such as, "What do you think about ...?"
- ★ Encourage the Veteran to talk about topics of interest or familiar topics.
- ★ Ask open-ended questions (e.g., questions that cannot be answered with a "yes" or "no"), such as, "Tell me more about your day."
- ★ Give your full attention to the conversation.



## Depression

Sometimes people will say that they are sad or feel down and will refer to it as feeling depressed. Usually these feelings resolve within a few days. If the symptoms continue or become worse, they could be a sign of clinical depression.

The two most common symptoms of clinical depression are:

- ★ Feeling sad or hopeless nearly every day for at least 2 weeks.
- ★ Losing interest in or not getting pleasure from most daily activities nearly every day for at least 2 weeks.

Depression is a treatable illness. Anyone can become depressed but it is important for people with depression to seek treatment. Family history and stressful life events can contribute to the development of depression. It is easier to treat if recognized early. If you are concerned that the Veteran you care for may be depressed contact the Primary Care Team at your VAMC.



## Tips to Manage Depression

If the Veteran is working with the Treatment Team, using medication as prescribed and participating in recommended therapy, the following approaches can also be helpful:

- ★ **Regular physical activity.** Studies show improved mood as a result of physical activity.
- ★ **Sufficient sleep.** A good night's sleep can help mood and stress levels. Avoid sleeping pills unless your doctor prescribes them.
- ★ **Stress management.** Too much stress can help trigger depression. Some ways to relieve stress include: meditation, watching funny movies or doing enjoyable activities. Getting regular exercise also relieves stress.

Avoid substance misuse such as: drinking alcohol, using illegal drugs, or taking medicines that have not been prescribed for the Veteran. Having a substance abuse problem makes treating depression more difficult as both problems need to be treated.

### How the Caregiver Can Help?

It is important that you work in collaboration with the Veteran's Primary Care and/or Treatment Team. As a Caregiver, you are an essential partner the Veteran's recovery.

- ★ Offer emotional support, understanding, patience and encouragement.
- ★ Talk with the Veteran and listen carefully.
- ★ Acknowledge feelings, point out realities and offer hope.
- ★ Be patient, depression does not go away overnight; it takes time to get better.
- ★ Involve the Veteran in activities outside the house (e.g., walks, shopping, movies, religious services, volunteering). If she/he declines, keep making gentle suggestions but don't insist.

### Signs that a Veteran with Depression May Need Immediate Professional Attention

If the Veteran is depressed and has any of the following signs or symptoms, this suggests a crisis situation with risk for suicide. It is an emergency situation.

- ★ Talking, reading, writing or drawing about suicide, death or killing someone else.
- ★ Psychotic symptoms (being out of touch with reality, hearing or seeing things that aren't real).
- ★ Speaking in a bizarre way that is not usual.
- ★ Trying to get guns or pills or other ways to cause self-harm.



## Suicide Prevention

Suicide is the taking of one's own life on purpose. There may be warning signs before a suicide. People thinking about suicide are often depressed, anxious or have low self-esteem. They are often clinically depressed, anxious or agitated. There may be problems with sleep and changes in the eating habits of someone who is suicidal. A Veteran who is suicidal may stop paying attention to hygiene and appearance, and may withdraw from family and friends. Usually people who are suicidal feel hopeless, helpless and worthless, and have no sense of life purpose. Suicide may seem like the only solution for what they are feeling and the only way out.

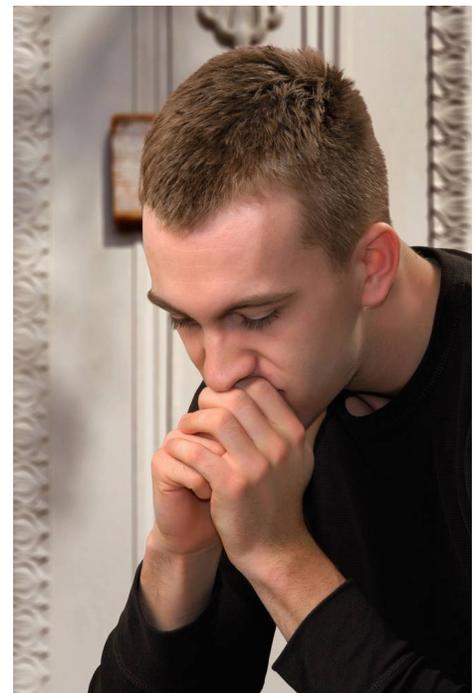
### Suicide Warning Signs

Watch for these key suicide warning signs, and provide the Veterans Crisis Line number (1-800-273-8255, press 1) to anyone who exhibits these warning signs:

- ★ Talking about wanting to hurt or kill oneself.
- ★ Trying to get pills, guns or other ways to harm oneself.
- ★ Talking or writing about death, dying or suicide.
- ★ Hopelessness.
- ★ Rage, uncontrolled anger, seeking revenge.
- ★ Acting in a reckless or risky way.
- ★ Feeling trapped, like there is no way out.
- ★ Saying or feeling there's no reason for living.

### Suicide Risk Factors

Risk factors refer to the traits, situations and life events that have been shown in research to increase the risk of suicide, compared with people who do not have such traits or history. Generally, Veterans who are male, white, younger than 25, have less than a high school education and E-01 to E-02 rank have a higher risk of committing suicide.



### Other Risk Factors Include:

- ★ History of past suicide attempts or problems with violence or extreme anger.
- ★ Family history of suicide, violence, mental illness or substance abuse.
- ★ Being around others who have attempted suicide.
- ★ Chronic medical problems, including chronic pain or mental illness.
- ★ Recent or threatened severe loss (especially a marriage or relationship).
- ★ Humiliating events or failure.
- ★ History of imprisonment.
- ★ Difficult times like holidays or anniversaries.
- ★ Problems adjusting to new life circumstances.
- ★ Poor social and coping skills.
- ★ Drug and alcohol abuse.

### Personal or Environmental Protective Factors

Protective factors are skills, strengths or resources that help people deal more effectively with stressful events. Protective factors help a person bounce back from problems and balance risk factors for suicide. Protective factors can be in the person or in their environment.



### Personal and Environmental Protective Factors Checklist

Take stock of the protective factors in the Veteran you care for.

Yes No

- Believing in the value of life and that suicide is wrong.
- Good social skills, such as making decisions, solving problems and managing anger.
- Feeling connected to friends and family.
- Hope for the future; optimism.
- Following doctors' orders and advice.
- Strong sense of self-worth or self-esteem or determination.
- Ability to cope and adapt (resiliency).
- Ability to control impulses.
- Reasons for living.
- Being married or a parent.
- Being sober.
- Strong relationships, particularly with family members and/or significant other.
- Chances to be involved in family projects and activities.
- A safe and stable environment.
- No access to guns, pills or other means to harm self.
- Responsibilities to others.
- Pets.



### Things Someone Thinking About Suicide May Say

- ★ “It would be better if I wasn’t here.”
- ★ “You would be better off without me.”
- ★ “I want out.”
- ★ “I’m going away on a real long trip.”
- ★ “You don’t have to worry about me anymore.”
- ★ “I just want to go to sleep and never wake up.”
- ★ “Don’t worry if you don’t see me for a while.”
- ★ “There is no way out.”



### Possible Suicide Warning Signs

A Veteran who is thinking about suicide may demonstrate these behaviors. Do any of these apply to the Veteran you care for?

Yes No

- |                          |                          |   |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | Talk about feeling trapped – like there is no way out of a situation.   |
| <input type="checkbox"/> | <input type="checkbox"/> | Talk of a suicide plan or make a serious attempt.   |
| <input type="checkbox"/> | <input type="checkbox"/> | Talk, write or draw pictures about death, dying or suicide.   |
| <input type="checkbox"/> | <input type="checkbox"/> | Talk about suicide in a vague or indirect way.  |
| <input type="checkbox"/> | <input type="checkbox"/> | Give away things that are special.  |
| <input type="checkbox"/> | <input type="checkbox"/> | Put affairs in order, tie up loose ends or make out a will.   |
| <input type="checkbox"/> | <input type="checkbox"/> | Try to get guns, pills or other means of harming oneself.   |
| <input type="checkbox"/> | <input type="checkbox"/> | Call old friends, particularly military friends, to say goodbye.  |
| <input type="checkbox"/> | <input type="checkbox"/> | Clean a weapon that they may have as a souvenir.  |
| <input type="checkbox"/> | <input type="checkbox"/> | Become obsessed with news coverage of the war, or the military channel.   |
| <input type="checkbox"/> | <input type="checkbox"/> | Talk about how honorable it is to be a soldier.   |
| <input type="checkbox"/> | <input type="checkbox"/> | Become overprotective of children and the home.   |
| <input type="checkbox"/> | <input type="checkbox"/> | Act recklessly or violently, such as punching holes in walls, getting into fights.  |
| <input type="checkbox"/> | <input type="checkbox"/> | Suddenly change, for example changing from being very sad to being very calm or appearing to be happy, as if suddenly everything is okay. |
| <input type="checkbox"/> | <input type="checkbox"/> | Use more alcohol, tobacco, or pain pills.   |



## What Should You Do if You Think the Veteran is Considering Suicide?

- ★ Trust your instincts that the Veteran may be in trouble.
- ★ Talk with the Veteran about your concerns.
- ★ Listen to what the Veteran says.
- ★ Ask direct questions without being judgmental

*"Are you thinking about killing yourself?"*

*"Have you ever tried to hurt yourself before?"*

*"Do you think you might try to hurt yourself today?"*

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- ★ Find out whether the Veteran has a suicide plan. The more detailed the plan, the greater the risk:

*"Have you thought about ways that you might hurt yourself?"*

*"Do you have pills or a gun?"*

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Do not leave the Veteran alone.  
Do not swear to secrecy.  
Do not act shocked or judgmental.  
Do not counsel the Veteran yourself.  
Get professional help, even if the Veteran resists.

## Suicide Prevention Resources for Veterans and Their Families

The VA is committed to addressing the issue of suicide among our Veterans and offers a network of support available to those who have served our country. VA provides a confidential 24/7 Veterans Crisis Line for Veterans in crisis and their families. Trained VA professionals are available at all times to assist Veterans and their family members. Veterans and their families do not have to be enrolled in VA to use the free, confidential Veterans Crisis Line.

### *Veterans Crisis Line 1-800-273-8255*

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Veterans Crisis Line|Hotline and Online Chat at: <http://www.Veteranscrisisline.net>

Locate Your Local Suicide Prevention Coordinator at:

<http://www.Veteranscrisisline.net/GetHelp/>

Each VA Medical Center has a suicide prevention coordinator to make sure Veterans receive needed counseling and services. Calls from the Lifeline are referred to those coordinators.

DoD/VA Suicide Outreach: Resources for Suicide Prevention at:

<http://www.suicideoutreach.org/>

This site is a comprehensive resource- you will find ready access to hotlines, treatments, professional resources, forums and multiple media designed to link you to others. This site supports all Service Branches, the National Guard and the Reserves, our Veterans, families and providers.

Medal of Honor Recipients: Speak Out! Save Lives at:

<http://www.medalofhonorspeakout.org/>

Our nation's greatest heroes – Medal of Honor recipients – speak out to save lives by encouraging America's military to seek help when adjusting to life after combat.



## Substance Abuse (Alcohol and Drugs)

Substance abuse is a major concern among Veterans returning from combat. Prescription drug abuse doubled among U.S. military personnel from 2002 to 2005 and almost tripled between 2005 and 2008. If you believe that substance use or abuse has become a problem for the Veteran then it is worth discussing with a health professional.



If the Veteran has had a TBI or has any mental health issue such as PTSD or depression, substance abuse will further impair their thinking. While intoxication may provide immediate relief of symptoms such as anxiety, it may start and/or worsen symptoms of several kinds of mental illnesses that are already present and may lead to using alcohol or drugs more persistently.

Opioid pain killers and medications known as benzodiazepines (e.g., Valium) when taken with alcohol, work together to create greater negative effects than if taken alone, posing risks for function, impulsive behavior, serious overdose and possibly death. In addition, painkillers that combine acetaminophen and narcotics, such as Vicodin, could cause severe liver damage when mixed with alcohol.

### Signs of Drug Misuse

If you as a Caregiver suspect that the Veteran is using illegal drugs or misusing medications that are prescribed, the following are common signs and symptoms:

- ★ Intoxication, incoherency, bloodshot eyes or dilated pupils, smell of substances and other physical indications that the person is under the influence.
- ★ Loss of interest in hobbies, sports and other favorite activities.
- ★ Changed sleeping patterns: up all night and sleeping all day.
- ★ Mood swings; irritable and grumpy and then suddenly happy and bright.
- ★ A sudden change in personality. A few keys signs to watch for are: lying, moodiness, oversensitivity, forgetfulness and a sudden lack of motivation.
- ★ Carelessness about personal grooming.

## Signs of Alcohol Misuse

Possible signs of alcohol misuse include:

- ★ Continuing to drink even though the Veteran's alcohol use is causing problems in your relationship.
- ★ Drinking more than intended—the Veteran may want to quit drinking, but can't.
- ★ The Veteran has given up other activities, including physical rehabilitation, because of alcohol.
- ★ Downplaying the negative consequences of drinking.
- ★ Complaining that family and friends are exaggerating the problem.
- ★ Blaming drinking or drinking-related problems on others.



## Taking Care of Yourself and Your Family

Often, Caregivers, family and friends feel the need to cover for the person with the drinking problem. Pretending that nothing is wrong and hiding away all of your fears and anger can cause you more stress.

- ★ Seek counseling for yourself and family in order to help you manage the stress of your relationship with the Veteran and to prepare you for helping him/her change.
- ★ Get assertive: learn effective communication skills.
- ★ Build a support network: speak to supportive people in your community about ways to get help.
- ★ Protect yourself as alcohol and drugs can increase the likelihood of aggression. If you are experiencing domestic violence, take action to protect yourself by calling your local law enforcement.

## Gaining Trust with the Veteran

Unfortunately, Veterans are often reluctant to discuss misuse of prescribed and non-prescribed substances during their recovery. Ways that you can help include:

- ★ Establish open and honest communication with the Veteran.
- ★ Develop a family support network to provide stability around the Veteran.
- ★ Limit the Veteran's access to alcohol and prescription drugs, particularly to opioid pain relievers and benzodiazepine anti-anxiety medications.
- ★ Stay in contact and coordinate with members of the Healthcare Team.

## Substance Abuse Resources

Resources where the Caregiver and other family member can get help with dealing with addiction in their family:

- ★ Speak with the existing Primary Care Team
- ★ Contact the OEF/OIF/OND Program at your local VA Medical Center
- ★ Substance Abuse and Mental Health Services Administration (SAMHSA) at:  
Website: <http://www.samhsa.gov/vets>
- ★ Call 1-800-827-1000, VA's general information hotline
- ★ Al-Anon Family Groups at: <http://www.al-anon.org>
- ★ Nar-Anon Family Groups at: <http://www.nar-anon.org>

