



Gofal Cymdeithasol **Cymru**
Social Care **Wales**

Changes in people's behaviour - mental health

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Go to <https://socialcare.wales/resources-guidance/improving-care-and-support/people-with-dementia/changes-in-peoples-behaviour-mental-health> for the latest version.

People may have a history of mental illness or experience it for the first time, in addition to their dementia. In the same way as we need to treat physical illnesses and pain, we must treat underlying mental health conditions too.

An introduction to changes in people's mental health

If there are any concerns about a person's mental health, seek professional advice. Reassurance, distraction or being socially and mentally engaged in activities may help. Medication may help in other cases.

What is anxiety?

Anxiety is common in people with dementia and can affect people at any stage of the condition.

- While anyone can be anxious in certain situations, anxiety is a mental health issue when the person is feeling anxious over a period of time, in situations we wouldn't expect, and/or it's affecting their quality of life
- Anxiety is the body's flight or fight reaction and it may be expressed by changes in behaviour
- The person may become agitated or fearful, perhaps they seek constant reassurance from you or follow you or family carer around.

What is depression?

Depression is a common mental disorder which impacts upon a person's feelings, behaviour and thoughts.

- It can have a range of symptoms, including low mood, tearfulness, irritability, a lack of interest and pleasure, changes to appetite, sleep and energy levels
- These symptoms can impact how a person with dementia behaves, and often comes hand-in-hand with dementia
- As many of the symptoms of depression overlap the symptoms of dementia, it often gets missed and therefore people do not receive the treatment required
- Depression can lead to suicidal thoughts. Any concerns must be reported immediately.

What is psychosis?

Psychosis describes the distortion of a person's perception of reality, often accompanied by delusions and/or hallucinations.

- A delusion is an irrational unfounded belief for example that people are living in the loft, or their partner is being unfaithful
- Hallucinations are seeing, hearing, smelling, sensing things other people can't
- Typical visual hallucinations include seeing small animals or children
- It's important to realise that these experiences are very real to the person and may be distressing, so arguing with them or telling them that it is not real often makes the person more distressed.

Understanding why someone is distressed

This section helps you think about distress and how it can affect a person with dementia.

When we're distressed, uncomfortable or in pain it affects how we behave. It may not always be possible for a person with dementia to explain what is upsetting or hurting them – it's our job to try and find out.

You might notice someone starts to behave differently and not know why. Here are some of the [changes you may see and what they could mean](#).

Here are some tips on [how to approach a situation with empathy and understanding](#).

You may find people ask questions that are difficult to know how to answer. Here are some [tips on why someone may ask those questions and how you can respond](#).

These checklists have been developed to help you think about the experiences of a person living with dementia and why they might be demonstrating different behaviours that are unusual for them or out of character. They will support you to think about the meaning (communication) of the behaviour and enable you to explore how we can support and meet their needs.

Once you have observed and explored the behaviour or situation, take a look at the relevant section on these pages for tips and advice. [Checklist for care homes](#) and [checklist own home](#).

A Happy Box is also a good way of relieving distress. [Here's advice on how to create a happy box](#).

There may be another reason someone is behaving differently, could it be due to delirium? If a person is unwell and their behaviour has changed, consider

delirium. See guidance on [don't discount delirium](#) and [NICE's social care quick guide to recognising and preventing delirium](#).

Alcohol issues

In their 2010 report, the Institute of Alcohol Studies found that 60 per cent of older people admitted to hospital for confusion, falls at home, chest infections and heart failure may have unrecognised alcohol problems.

- Older people are more often solitary drinkers and it is often 'hidden' or overlooked by health care professionals
- The effects of alcohol are widely reported, but these will be more noticeable in an older person and can result in anxiety, depression and poor sleep, liver and kidney problems, self-neglect and/or malnutrition, memory problems, confusion, poor balance and falls.

Useful resources

Find out more about the role of mental health in dementia care.

[Prevent the risk of Delirium by adopting Delirium 10](#)

[The link between alcoholism and dementia](#)

We want your feedback

Help us to improve the Dementia resource for care professionals by telling us what you think about it in our short [four question survey](#).