

Changing Needs

Session M24

Introductions

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Program Coordinator providing employment, housing and outreach services to individuals with complex needs for over 20 years. This would include individuals with a diagnosis of Acquired Brain Injury, Developmental Disability, Mental Health & Substance Use, Fetal Alcohol Spectrum Disorder and/or Autism

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Lookout Society provides housing and health solutions to a disadvantaged population struggling with homelessness as well as physical disabilities and mental health/substance use concerns.

Agenda

Introductions

Definitions - states and traits that can cause a change in behavior

Observable (problem) behaviors

What to do if....

Community Supports

Q&A

What behaviours?

Angry outbursts

Emotional lability (ups and downs)

Memory problems: forgetting to pay bills, leaving the stove on

Poor impulse control

Poor judgement and/or insight

Blank stare

Poor grooming/smelling of urine

Gait problems, different types of tremor

What is meant by changing needs?

Tenants whose behaviours - and needs - may change due to

- Dementia
- Brain injury
- FAS/FASD
- Mental Health
- Substance Use

What are all these things?

- Brain injury - traumatic brain injury causing cognitive problems, personality changes, emotional lability, loss of impulse control
- Dementia - progressive memory loss from any number of medical conditions incl. strokes, alcohol, Alzheimer's. May be associated with emotional lability, may fluctuate
- Mental Health (decompensated or off meds) - Schizophrenia, bipolar, personality disorder, Tourette's syndrome
- Substance Use - alcohol, crystal methamphetamine, cocaine, cannabis; drug-related criminal activity
- FAS/FASD

Dementia

a chronic or persistent disorder of the mental processes caused by brain disease or injury and marked by memory disorders, personality changes, and impaired reasoning.

Not just in the elderly!
In the elderly: strokes,
hypertension, Alzheimer's

Korsakoff's syndrome: related to
chronic heavy alcohol use
and malnutrition

Pseudodementia: depression,
Parkinson's syndrome,
anxiety disorder

Brain Injury

Changes in behaviour due to a new or past brain injury

Cognitive difficulties:
memory, organizational skills, carrying through on tasks

Depression

Emotional lability: angry outbursts, tearfulness

Loss of impulse control

Confusion

Poor insight and/or judgment

FAS/FASD

Changes in behaviours due to
FAS/FASD

Vulnerable and easily taken
advantage of
Lack of problem solving skills
Memory deficits - may appear to
lie but filling in the blanks
when can't remember
Impulsive unsafe behaviours
Challenge with any kind of
change
Difficulty reading & responding
to social cues
Sensory sensitivity

Mental Health

Changes in behavior due to changes in mental health

Severe depression with low mood and inability to carry out ADL's

Severe anxiety with excessive worry, often associated with memory loss, inability to carry out ADL's (agoraphobia)

Psychosis: paranoia, hallucinations, bizarre ideas, "break from reality". May be related to major mental illness (when off medications), alcohol withdrawal, or substance use

Hoarding Disorder: fire and safety issues

Substance Use

And Concurrent Disorders

Changes in behavior that are the result of substance use or withdrawal

Psychosis or anxiety: intoxication with crystal meth, cocaine, crack cocaine, cannabis (esp youth under 25); withdrawal from alcohol (DT's)

Violent behavior or language: alcohol, stimulants (CM), drug dealing

Opiates: overdose risk

Depression: "crash" when coming down from stimulants

Cannabis: depression, grow-ops

Dementia from alcohol use

Many substance users have MH problems and vice-versa (CCD)

What can we do?

1. Talk to client - in a safe way, use the language of diplomacy

“A gentle answer turns away wrath, but a harsh word stirs up anger” (Proverbs 15:1)

2. If Joe is open suggest a visit to his doctor

If not open to discussion or exploration go to step 3.

3. If known, talk to Joe's family or other supports

4. If no family and no known supports in place?????

What are your ideas?

Using the post-its provided write your support ideas then pass to front.