

Unintentional Emotional Abuse: How to Strengthen Relationships in Dementia Care

Workshop Handout from January 20, 2026 facilitated by
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Dementia is a syndrome that can be caused by a number of diseases which over time destroy nerve cells and damage the brain, typically leading to deterioration in cognitive function (i.e. the ability to process thought) beyond what might be expected from the usual consequences of biological ageing.



Common symptoms include:

- ✿ Memory impairment
- ✿ Thinking impairment
- ✿ Judgement problems
- ✿ Communication problems
- ✿ Personality changes

It's important to know what is causing a person's symptoms of dementia.

Treatable:

- Depression
 - Thyroid
 - Vitamin B12 Deficiency
 - Delirium
 - Lyme Disease
 - Certain medications
 - Mixing or over medicated
 - Normal pressure hydrocephalus
- ...and many more

Non-Curable:

- Alzheimer's Disease
 - Vascular Dementia
 - Frontotemporal Dementia
 - Huntington's Disease
 - Parkinson's Disease
 - Lewy Body Dementia
 - Primary Progressive Aphasia
 - Stroke
 - HIV-AIDS
 - Creutzfeldt-Jakob Disease
- ...and many more

It's not always easy caring for someone living with symptoms of dementia.

Common Dementia-Related Changes in a Person Living with Symptoms of Dementia

- ✿ Forgetfulness
- ✿ Emotional fluctuations
- ✿ Anxious behaviour
- ✿ Agitation
- ✿ Aggression
- ✿ Misperceptions
- ✿ Paranoid behaviour
- ✿ Denial (Anosognosia)

World Elder Abuse Awareness Day & Alzheimer Awareness Month – Great opportunity to gain more knowledge!

Studies show that older **adults with dementia are at higher risk of abuse** due to cognitive decline, difficulty communicating, behavioural changes, and dependency on caregivers for daily activities.

Types of Elder Abuse:

1. **Physical Abuse:** Inflicting pain or injury through hitting, pushing, or restraining.
2. **Neglect:** Failure to provide basic needs such as food, medication, and personal care.
3. **Financial Exploitation:** Misuse of an older adult's funds, property, or resources.
4. **Sexual Abuse:** Any non-consensual sexual act or behavior.
5. **Institutional Abuse:** Mistreatment occurring in care facilities due to systemic issues like understaffing or lack of training.
6. **Emotional/Psychological Abuse:** Actions or words meant to intimidate, hurt, humiliate, isolate, or control someone emotionally or psychologically.

Examples:

- Yelling, threatening, as well as using a threatening tone
- Blaming, humiliating or shaming the person
- Using degrading or infantilizing language
- Deliberate isolation or ignoring
- Withholding affection or emotional support

Possible reasons why emotional abuse occurs:

- ✿ Frustration or resentment
- ✿ Power and control
- ✿ An abusive mindset
- ✿ Lack of empathy or emotional regulation
- ✿ Poor training / lack of education

Unintentional Emotional Abuse: Emotional harm caused without malicious intent, often stemming from stress, misunderstanding, burnout, or lack of awareness about dementia behaviours & communication needs.

Examples:

- Speaking harshly due to exhaustion
- Correcting or arguing with someone who is confused
- Laughing at odd behaviour out of discomfort
- Ignoring repeated questions or requests
- Showing irritation with care tasks

4 Reasons Why Emotional Abuse is Often Unrecognized in Dementia Care

1. Cognitive Impairment Masks Reactions

- 🌸 The person may not be able to articulate or report emotional harm clearly.
- 🌸 The person may not remember specific instances or be believed if they do.

2. Normalization of Frustrated Responses

- 🌸 Caregivers may excuse their tone or actions as “just part of the job” or “they don’t understand anyway.”
- 🌸 Stress responses (eye-rolling, ignoring, abruptness) are often dismissed as minor.

3. Lack of Awareness

- 🌸 Many caregivers don’t realize that certain reactions can feel hurtful or threatening to someone with dementia.
- 🌸 Some may be unaware that people with dementia still deeply feel emotional shifts, even when comprehension is impaired.

4. Focus on Physical, Not Emotional Care

- 🌸 Systems may prioritize physical needs such as feeding, bathing, and safety - while ***emotional wellbeing*** is under-supported or not tracked.

Root Causes of Unintentional Emotional Abuse:

- ❁ Caregiver stress, burnout, lack of training
- ❁ Cultural and generational norms around communication
- ❁ Misunderstandings of dementia symptoms and behaviours
- ❁ Barriers to empathy when communication is difficult (e.g. Non-verbal; poor judgement)

We can strengthen relationships & trust with the person with dementia by:

- ✓ Using strategies for compassionate, dementia-informed communication (Verbal & Non-verbal)
- ✓ Responding to dementia symptoms and behaviours with empathy (4 Steps)

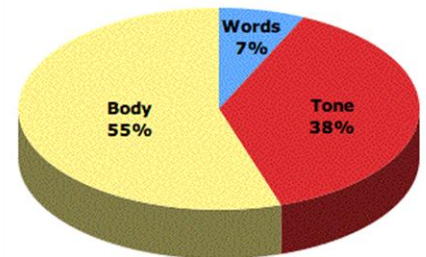
Communication Tips

Verbal:

- ❁ Use short, simple sentences (Reduce your words)
- ❁ Slow down your speech
- ❁ Ask one question at a time - wait for a response
- ❁ Ask questions - simple yes or no
- ❁ Use a pleasant tone of voice

Non-Verbal:

- ❁ Nod your head “yes” often (Avoid shaking “no”)
- ❁ Give lots of visual cues (Pointing; gestures; notes)
- ❁ Use lots of positive facial & hand expressions
- ❁ Try not to rush the person at any time.



4 Quick Steps to Help De-escalate Conflict Using Empathy

Take a deep breath

- 1. Validation** (State their feelings, “*I notice you’re upset.*”)
- 2. Show You Care** (With hand on your heart, “*I’m sorry you feel this way. I want to help you. I’m your friend.*”)
- 3. Offer Solutions** (Soon/later. “*Let me look into that. I’ll get back to you.*” It’s okay to use Therapeutic Reasoning™)
- 4. Redirect/Distract** (Change topic; offer an activity; movie; objects; play music; sing; etc.)

Practice:

Take a deep breath

1. **Validation** _____
2. **Show you care** _____
3. **Offer solutions** _____
4. **Redirect/Distract** _____

Take a deep breath

How we can strengthen the relationship with the Caregiver?

The goal is to **protect the person living with dementia while preserving the relationship**, not assigning blame.

- ✓ **1. Encourage Support**
 - Normalize the need for support groups, counselling, or education.
 - Remind them that needing help does not mean failure.
 - Look for ways to lighten their load: respite, shared tasks, scheduled breaks.
- ✓ **2. Acknowledge** that caregiving is stressful and can be overwhelming.
- ✓ **3. Introduce dementia education** as support, not correction.
 - Many caregivers simply don't realize the impact of tone, non-verbal, verbal or rushed interactions. (*Share articles, short videos, or invite them to a webinar you're attending.*)

What You Can Do to Address Any Potential Abuse Cases:

- ✿ **Build Relationships:** Develop trust and rapport with older adults. Incorporate good communication.
- ✿ **Encourage Caregiver Support to Prevent Abuse:** Be understanding & supportive; refer to respite service.
- ✿ **Observe:** Look for patterns of injuries, changes in behaviour, or caregiver interactions that raise concern.
- ✿ **Report:** Know the legal and ethical obligations for reporting suspected abuse to authorities.

Common Caregiver Challenges:

- 🌸 Cognitive & Behavioural Challenges
- 🌸 Emotional & Psychological Challenges
- 🌸 Practical Caregiving Challenges
- 🌸 Financial & Legal Challenges
- 🌸 Lack of Support or Resources

Karen's Top 3 Caregiver Survival Tips:

1. Take “me breaks” / Time off
2. Talk it out
3. Never stop learning



Key Takeaways:

- 🌸 Unintentional abuse toward those with dementia is **disturbingly common**, especially in the form of psychological or verbal harm by overwhelmed caregivers.
- 🌸 Major contributing factors include **caregiver burden, mental health struggles, aggression/behaviours, and lack of training/education or support.**
- 🌸 Interventions that alleviate caregiver strain such as respite services (time off), mental health support (talk it out) and education on dementia including behavioural strategies, are all essential to reduce abuse risk.

Helpful Resources in BC:

1. Alzheimer Society of B.C. www.alzheimer.ca/bc

- **First Link® Dementia Helpline:**
1-800-936-6033 (Mon–Fri, 9am–8pm)
Multilingual support available.
- **Support groups** (in-person and virtual) for caregivers
- Free **education workshops** and webinars
- Resource navigation & dementia information

Stay in touch! E-mail: Info@DementiaSolutions.ca www.DementiaSolutions.ca

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2. Family Caregivers of BC (FCBC) www.familycaregiversbc.ca

- **Caregiver Support Line:**
1-877-520-3267 (Mon–Fri, 8:30am–4:00pm)
- 1-on-1 coaching for caregivers
- Monthly **caregiver connection circles** and webinars
- Practical tools, guides, and advocacy resources

3. Health Authority Dementia Services

Depending on your region in BC, local health authorities offer care planning, home support, and dementia-specific programs:

- **Fraser Health:** fraserhealth.ca
- **Vancouver Coastal Health:** vch.ca
- **Island Health:** islandhealth.ca
- **Interior Health:** interiorhealth.ca
- **Northern Health:** northernhealth.ca

Ask your local **Home and Community Care office** for dementia care coordination and respite options.

4. The Public Trustee's Office at (604) 660-4444 or visit [Public Guardian and Trustee of British Columbia](http://www.trustee.bc.ca/). <http://www.trustee.bc.ca/>

5. BC Seniors' Guide www.gov.bc.ca/seniorsguide

- A comprehensive government-produced resource for seniors and caregivers
 - Covers health care, legal planning, financial help, and housing
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- **6. BC CRN** www.bccrns.ca
 - Great resources on elder abuse and neglect!

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How We Help at Dementia Solutions

- Private Consultation & Support (Free initial 20-minute phone/Zoom consultation)
- Family Support Membership (Ongoing guidance; knowledge & resources)
- Support Groups for Caregivers (Free: 2nd Thursday of the month – 7pm PST)
- Dementia Education for Staff & Community (Virtual; in-person; online)

Learn more by visiting our website at:
www.DementiaSolutions.ca

Wishing you only the best! Stay well! Karen :)