The power of theatre

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Brain power: managing the emotional impact on staff

Tina Kukstas and Jan Furniaux explain how mind management techniques can help care staff manage their emotional responses to supporting people with dementia.

In this article we want to share some developments in the understanding of how the brain works, and identify ways to support staff to have a positive impact on their own well-being and thus their ability to offer person-centred care. The content of this article is significantly informed by the work of Steve Peters, specifically the mind management model presented in his best-selling book, *The chimp paradox* (2012). Steve Peters is a consultant psychiatrist with a special interest in brain function.

We also want to share how we have applied these ideas to the training and support of staff who support people living with dementia in Gloucestershire. In our view, the emotional well-being of care staff has a direct impact on the quality of care offered.

Context
Supporting and caring for people with dementia is challenging for both relatives and friends as well as for care staff. There is evidence to suggest that supporting a person with dementia for significant periods increases the risks of depression for informal carers and causes emotional exhaustion or 'burn out' for formal carers (Garman et al 2002; May et al 2009; Milwain 2009). There is a high turnover of staff in the dementia sector of care provision with associated cost and quality pressures, which could be mitigated by a conscious and proactive strategy to support staff in this complex area of practice.

The health community’s understanding of how the brain works has gathered pace over the last decade, leading to the development of theories which suggest that the ability to manage emotions effectively is essential for maintaining well-being, particularly in circumstances where the ‘carer brain’ is subject to stressors (Milwain 2009).

The process of thinking, feeling and behaviour
Steve Peters (2012) describes the brain as having three distinct parts that work together to create how a person will respond to feelings, impressions and instincts: the chimp, the human and the computer.

The part of the brain which deals with emotion, referred to as the ‘chimp’ by Peters, (2012) is located in the amygdala as part of the limbic system of the brain. This structure is sometimes referred to as the ‘emotional brain’: it triggers emotions that in turn drive the behaviour of a person and may do so as a ‘reaction in the moment’. The frontal lobe of the brain manages these emotions and is often tagged as being responsible for a person’s personality, referred to as the ‘human’ by Peters (2012).

Peters (2012) refers to the parietal, occipital and temporal lobes of the brain as the ‘computer’ – an information storage system which the ‘chimp’ and ‘human’ both draw on. This simplistic explanation of brain structure and function echoes the classic early work of Sigmund Freud who described core brain functions within a scientific framework of the id, ego and super-ego. The contemporary work of Steve Peters and others has redefined this theory in the context of the complex modern world and enables access to physiological and psychological explanations of brain function.

The emotional management of strong emotions
Emotions are necessary to express thoughts and feelings as well as to respond to situations which can be life threatening. When strong emotions are triggered, the amygdala (the chimp) and the frontal brain (the human) work out how to respond. When doing so, both the type and manner of response to the trigger will depend on the skill of the ‘human’ to manage the ‘chimp’ and the accessible information stored in the ‘computer’.

Given this context, a brain that is practised in managing strong emotions with prepared key messages and strategies to manage their ‘chimp’ has more chance of being successful. Other factors such as tiredness, excessive emotional demands, lack of nutrition, pain and the impact of alcohol can have a direct impact on the brain’s ability to manage emotions (May et al 2009; Milwain 2009).
high likelihood that the person with dementia will be misunderstood.

A typical example might be where the person with dementia is frightened by their environment, struggling to make sense of where they are and who the people are around them and consequently physically resists staff who are attempting to support them with personal care tasks. The person with dementia may then be labelled as ‘aggressive’ and the care worker may adjust their behaviour and ongoing communication with the person based on this experience. This single event has the potential to trigger emotionally charged reactions in the future for both the person with dementia and the ‘chimp’ part of the staff member’s brain (which has been activated to respond).

The impact on the brain of paid carers

The frontal area of the brain is ‘energy hungry’ (Milwain 2009). Using the analogy of a mobile phone, the brain utilises energy at a fast rate and only has a certain ‘battery life’ before shutting down: when the resource available is used up, the brain will not work effectively until ‘re-charged’. A mobile phone will need to be connected to a power source; the frontal lobe of the brain will need to rest. Tom Kitwood (1997) recognised this crucial interplay between the well-being of staff and the well-being of people with dementia. He commented that, “There is a close connection between the personhood of clients and that of the staff.”

In addition to the management of emotions, the frontal lobe of a staff member has other key tasks which are essential for person-centred approaches such as creative thinking, reading the body language of others, empathising and coordinating multiple tasks (Milwain 2009; Peters 2012). When a member of staff no longer has the ability to think creatively and with empathy, this can lead to poor engagement and an inability to respond with person-centred approaches. In extreme circumstances, a staff member’s reduced ability to manage their own emotional responses may increase the potential for abusive culture and practice to develop.

Improved knowledge of how the cortex of the brain interacts with other brain structures can provide an insight into how and why the work of supporting people with dementia has such a high potential for emotional exhaustion. Many training initiatives on dementia include a strong ‘focus on feelings’ message which encourages staff to consider the feelings and emotions (of the person with dementia) and to support the person in managing them (Loveday 2014).

A focus on staff experiences of their own feelings and emotions is often missing from training programmes. The evidence suggests that as people become exposed to interactions which are emotionally challenging, the potential for self-management reduces (Milwain 2009; Peters 2012). In our view education, training and the opportunity to discuss and practise self-management skills can enable staff to manage their own strong emotions which may be experienced during caring interactions.

Information that is programmed into the brain through experience and training is a key factor that informs our responses when we are stressed. Steve Peters (2012) describes this information as being held in the brain’s ‘computer’ (the cortex) and suggests that where helpful information is stored in this area of the brain, then reasoned responses will be triggered with little effort required. Steve Peters (2012) describes these responses as ‘autopilots’.

Having automatic key messages secured and stored in the brain provides a way to manage ‘chimp’ (emotional) responses as these stored messages will trigger a faster reaction than the ‘chimp’ (emotional) response. For example, if a stored message is ‘people with dementia may be frustrated and frightened during care tasks’ then an automatic response to a person who becomes angry during care tasks will be to respond to a person who is frightened, thereby using soft language and a reassuring manner.

Conversely, if the staff member has not received person-centred training, the stored message may be that ‘the person with dementia is trying to be awkward and difficult’ – the staff member may then respond in a manner which is not helpful to the person with dementia.

What can managers do to support the emotional well-being of staff?

Research on brain functioning and recent literature on the emotional impact of caring suggests that the support for dementia staff needs to focus on the following areas: structured support, access to regular breaks and training in mind management.

For staff working with people with dementia, regular supervision will enable several supportive measures:

- Allowing staff the opportunity to be recognised and validated for the work they are doing. The opportunity to receive positive messages from an expert practitioner/manager who is a member of staff to consider to be ‘significant’ will feed an inner driver in the brain that seeks recognition from people who are considered important. Steve Peters (2012) refers to this in the context of ‘feeding the chimp bananas’.
- Enabling staff to vocalise potentially strong feelings in a safe environment. Steve Peters (2012) refers to this as ‘exercising the chimp’. It is essential that this is an environment where the person can speak freely without being judged on the content of what they might say.
- Offering the opportunity for reflection on situations that may have been stressful and challenging in practice.

(See summary in Box 1 above.)

It is important to ensure that staff have access to regular breaks during sustained periods of delivering care and support. Resting the brain to recover the ability to be effective is essential. Unlike physical exhaustion, emotional exhaustion is not obvious. A person who does not have the opportunity to rest their brain is at risk of an ‘explosion of feelings’ when it becomes impossible to manage emotions due to the exhaustion of the frontal lobe. Elizabeth Milwain (2009) refers to these as ‘amygda1a moments’.

In practice in Gloucestershire

In Gloucestershire, we have utilised the theories developed by Steve Peters and Elizabeth Milwain to inform innovative aspects of our well-established Dementia Training and Education Strategy in the
The Strategy now includes a Dementia Lead Programme for managers across the health and social care workforce. This programme has provided an opportunity to develop one of the workshops to include ideas which link theories of mind management to inform and guide managers in relation to the emotional well-being of their workforce, challenging them to re-assess the systems currently in place. This new workshop has been subject to written evaluation by the attending managers which suggests that the content of the session (particularly the acquisition of new knowledge relating to emotional exhaustion), triggers a re-consideration of staff support.

Conclusion

As discussed, the provision of dementia training often includes topic areas such as 'understanding and responding to behaviour that challenges'. The information within programmes is usually focused on training staff to "understand the person with dementia's perspective and focus on their feelings" (Loveday 2014).

In conclusion, training in mind management can provide staff with the opportunity to gain knowledge about how to manage their own expressed emotions. In turn, they can learn how to respond in a positive, automatic way to the expressed emotions of people with dementia. Inclusion of training material in mind management would empower staff to manage their emotional well-being and be alert to preventing emotional exhaustion by 'feeding, exercising and boxing their chimp' (Peters 2012). This approach can also provide staff with permission to explore their own emotions and validate the complex work that they undertake on a daily basis.

References


Map of Medicine (2009) Royal College of Physicians. Available at: www.rcplondon.ac.uk/resources/map-medicine


