Approaches to individuals with challenging behaviors

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Objectives

• Review conditions that may contribute to interpersonal and behavioral difficulties
• Recognizing associated signs and symptoms of these conditions
• Understand basis for challenging behaviors
• Learn skills and strategies to enhance interactions with individuals who have challenging behaviors
Gatekeeper role

General issues

- What behaviors can be managed safely in a public library?
- Awareness of personal and environmental limitations
- First aid model – not diagnosis or treatment
- Hands-off approach
- Safety
Violence and mental illness

• MacArthur Study 1998

Many causes of symptoms and behavioral problems

• Psychiatric disorders
• Alcohol or substance use, intoxication or withdrawal
• Developmental or personality disorders
• Other neurological disorders: dementia, brain injury, etc
Mental disorders are common

- One quarter of the US population have a diagnosable mental disorder in any given year
- About 1 in 17 have a serious mental disorder
- Mental illness is the most common cause of disability in our society

Source: NIMH

Just how common?
Estimated 1 year prevalence in the US population

<table>
<thead>
<tr>
<th>Any diagnosable mental disorder</th>
<th>26%</th>
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<tbody>
<tr>
<td>Serious mental disorder</td>
<td>6%</td>
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<tr>
<td>Personality Disorders</td>
<td>10%</td>
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Relative prevalence of the most common psychiatric disorders

- Depression
- Anxiety Disorders
- Bipolar Disorder
- PTSD
- Schizophrenia

Symptoms & behaviors: spectrum of severity

- Annoying, eccentric or odd
- Disruptive, but not confrontational
- Violations of personal space, property
- Escalation, potential for or actual violence, aggression, injury

Increasing severity
Key Components of the Mental Status Exam

- Appearance and behavior
- Speech
- Mood
- Thought process & content
- Perception
- Cognition
- Insight
- Judgment

Problems that may be associated with psychiatric disorders

- Severe anxiety, phobias, fears
- Obsessions and compulsions
- Suspiciousness, paranoia
- Irritability, anger, hostility
- Loud, restless, inability to sit still
- Difficulty with understanding, remembering, complying with rules
- Socially inappropriate behavior
- Harm to self
Symptom domains that may present challenges

- Attitude/interpersonal style
- Behaviors
- Perceptual distortions
- Cognitive impairments

Examples of how the above may manifest in different disorders...

Depression

- Attitude & behaviors:
  quiet, socially withdrawn, anxious, restless, soft-spoken, non-spontaneous, indecisive

- Perceptual distortions
  Perceives world and self in a negative way, in severe cases can be psychotic

- Cognitive impairments
  Concentration, attention, memory impairments
Mania (bipolar disorder)

- **Attitude & behaviors:**
  Intrusive, talkative, loud, boisterous, high energy, irritable, argumentative, belligerent. Impaired insight and judgment.
  When severe can be agitated and aggressive
- **Perceptual distortions**
  Heightened sensory perceptions, can be psychotic when severe
- **Cognition**
  Easily distracted, poor attention

Schizophrenia

- **Attitude & behavior**
  Social skills may be impaired – odd or inappropriate interactions. May appear disheveled, odd, eccentric; Suspicious, paranoid, grandiose; Communications may be idiosyncratic, disorganized etc
- **Perceptions**
  Hallucinations, delusions, and/or disordered thinking are often features
- **Cognition**
  Difficulties with memory, recognition and processing of emotions
**Obsessive Compulsive Disorder**

- **Attitude & Behavior**
  Repetitive thoughts and acts
  Compulsions: checking, washing, touching
  Anxiety increases markedly if compulsions are resisted
- **Perceptions**
  May have strongly held beliefs that seem illogical
  e.g. fears of contamination
- **Cognition**
  Usually intact

**Post Traumatic Stress Disorder**

- **Attitude & Behavior**
  Fear/agitation can be triggered by environmental cues
  Re-experiencing: may get suddenly anxious or upset for no obvious reason
- **Perceptions**
  Can misperceive people or situations as threat
- **Cognition**
  Narrowed awareness, dissociation
Skills & Approaches

Constraints of managing challenging behaviors in a non-clinical setting

• Less controlled environment
• Little or no knowledge of individual’s history and needs
• No established rapport
• No access to medications or other specialized interventions
• Limited or no training in mental health diagnosis and treatment
Additional factors that contribute to problematic behaviors in the community

• Current mental state
• Environmental Factors

Current mental state

• Frustrations
• Anger
• Stressors
• Depression
• Fear
• Substance intoxication
Environmental Factors

• Frustrations in the environment
• Fears generated by new environment
• Interpersonal conflicts

Situational Awareness: Antecedents to Problematic Behavior

• Pacing
• Anger (expression or verbalizations)
• Fearful looks
• Threatening stance or verbalizations
• Staring
• Extreme isolation/quietness
• Argumentative
• Mumbling
• Refusal to talk to others
Responses which can escalate a situation

- Fear and anger (fight or flight reaction)
- Frustration and anxiety
- Reacting too hastily
- Being punitive or controlling
- Inaccurate assessment
- Dismissive
- Intrusiveness

Responses which can de-escalate a situation

- Acknowledge the behavior exhibited by the individual
- Be supportive and empathic
- Ask individual what would be helpful
- Offer clear simple choices
- Alert other staff to the situation
- Encourage movement to a safe environment
Nonverbal calming techniques

• Ignoring behaviors that don’t require intervention
• Eye contact
• Physical proximity
• Body language (relaxed and comfortable)

Verbal calming techniques

• Ventilation
• Distraction/Redirection
• Reassurance
• Understanding/active listening
• Modeling calm behavior
• Clarifying needs
Questions?