Addressing Challenging Behavior

Presentation

by

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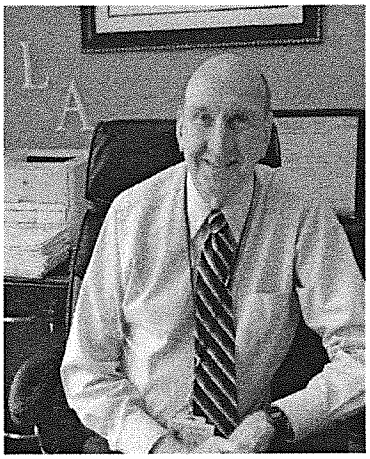
About the Presenter



Ervin Munro has a Master's degree in School Psychology and a Bachelor's degree in Education from the University of Wisconsin-Whitewater. He has worked in the human services field for over 35 years as a licensed school psychologist, educator, Director of Social Services, operations manager, and case manager in a variety of settings.

Mr. Munro has worked with numerous populations including homeless persons, persons with mental illnesses, substance users/abusers, elderly, homeless and runaway youth, immigrants, and persons affected by HIV/AIDS. In addition to serving as a school psychologist and educator, some of his accomplishments include Co-founder and Co-chair of the Case Management Task Force of Los Angeles County, as well as Co-founder of AIDS Project Los Angeles where he served as the first Acting Executive Director. Mr. Munro has worked as a private Consultant and Trainer for numerous social service agencies and has received several awards and commendations for his workshops.

His responsibilities with SRO Housing include overseeing and directing the daily operations and management of all supportive-housing programs, including case management for homeless and low-income individuals with specialty services for persons with physical disabilities, persons with HIV/AIDS, veterans, persons with mental illnesses, dual-diagnosed individuals, people in recovery, and the elderly. Other services include socialization/recreation programs, transportation services, money management, food services (congregate meals and home-delivered meals), special events, and community activities.

Mr. Munro was the recipient of the National 2011 "Distinguished Alumni Award for Community/Regional Service" from the University of Wisconsin-Whitewater. He was a presenter at the 2013 Case Management Conference in Atlantic City, NJ and is a member of the Board of Directors for the National Association of Case Management.

Is it a Behavior or a Label?

Please put a "B" or an "L" in front of each of the following words:

___ depressed

___ mean

___ shouting

___ angry

___ smoking

___ slamming doors

___ disrespectful

___ argumentative

___ eating

___ disrobing

___ fighting

___ outrageous

___ disruptive

___ jerk

___ crying

___ obnoxious

___ rude

___ uncooperative

___ washing hands

___ kicking

___ ridiculous

___ laughing

___ arguing

___ stealing

___ irritating

___ pounding fist on door

___ promiscuous

___ lazy

___ running

___ spitting

___ drunk

___ runs in and out

___ crazy

___ talking loudly

___ old

___ discourteous

___ happy

___ sad

___ filthy

___ liberal-minded

What is Behavior?

In general, **behavior** is only two things. Either the person "said" something or "did" something. Most everything else that we use to describe behavior is really labeling behavior rather than identifying behavior. **Behavior** is observable and measurable.

Labels are the conclusions we draw from observing behavior, e.g. if I observe someone moving slowly, holding her head down, and talking slowly with slurred words, I may say, "She is depressed." When in fact, she may be over-medicated, ill, tired, emotionally distraught, under the influence, etc. We don't know what is causing her to behave in the manner she is, only that she is moving slowly, holding her head down, and talking slowly with slurred words.

Remember, a behavior is observable and measurable. If you can't see it or hear it, it probably doesn't exist. A label is a conclusion you have made about an observation. For example, if we say, the client fell down three times in a ten-minute period, that "behavior" is observable and measurable. However, if we say the person was "drunk", that is not observable or measurable. Therefore, "drunk" is a label. From this description, we do not know what caused the person to fall down. S/he may or may not be drunk.

Sometimes, we also personalize and emotionalize behavior. For example, a client may walk down the hallway and spit on the floor. The Janitor just finished mopping the floor and becomes very angry, throws his mop on the floor, and starts yelling at the client, calling him a series of bad things.

The Janitor may have **personalized** the client's behavior if he felt that the client did this "despicable" act just to spite him. It is as if the client woke up this morning and thought, "I'm going to go downstairs and spit on the floor in front of the Janitor just to make him angry today." The Janitor acts as if this event occurred exclusively for him.

The fact that the Janitor also reacted angrily to the event means that he **emotionalized** the behavior/event. He chose the feelings he wanted in order to respond to the event. We are in charge of our own feelings. The Janitor could have selected other responses/feelings such as ignoring the behavior, reporting the behavior to the Case Manager, cleaning up the mess and moving on, reporting it to the Housing Manager, etc. However, he chose to react to the behavior and he chose negative feelings.

Behavior – anything that an organism does involving action and response to stimulation.

Webster's Ninth New Collegiate Dictionary

Examples of
Acting-Out Behaviors

Directed toward others:	Directed toward self:
• Shouting	Crying
• Verbal Abuse	Using Drugs
• Slamming Doors	Self-Abuse
• Fighting	Over-eating
• Disrobing	Under-eating
• Smoking (Non-Compliant)	Smoking
• Arguing	Alcohol Abuse
• Breaking Things	Talking to Self
• Clutter	Self-mutilation
• Writing on Walls	
• Defecating	
• Suicide Threats	Suicide Threats
• Homicide Threats	
• Promiscuity	Promiscuity
• Setting Fires	
• Stealing	
• Not Paying Rent	
• Sexual Harassment	
• Refusing Meds	Refusing Meds
• Not Washing	Not Washing

When reporting behaviors, define them in **observable and measurable** terms, e.g. instead of saying, "He's disruptive or obnoxious", you might say "He yelled at the participants twice during our community meeting." or "He started an argument three times this week with different clients." Avoid using any labels such as he is "rude". Ask yourself, "What did the person say or do that brought me to this conclusion?" That is the information you need to record.

Manipulative Behaviors

Definition:

1. Behaviors that result in a request that is inappropriate to the relationship.
2. Requests that continue despite attempts to say no or set limits.
3. Behaviors that hook:
    a. Create enough discomfort in the receiver that the receiver will do anything to stop it.
    b. Behaviors that flatter or feel good.
    c. Behaviors that instill guilt. Feel-sorry-for-me behaviors.

Why People Manipulate:

1. Learned behavior is repeated because it works.
2. Less threatening than a direct request or expressions of need.

General Points:

1. Manipulative people are not bad people. Separating the behavior from the individual helps to understand the behavior without judging it.
2. Everyone exhibits manipulative behaviors at some point.
3. If behavior doesn't "hook" you, it ceases to manipulate.

How To Handle Manipulative Behaviors

Assess:

1. Are you being manipulated?
    a. Is the behavior inappropriate to the relationship?
    b. Does the behavior continue despite requests to stop?

2. How is the behavior affecting you? How does it make you feel?
    a. Is your own discomfort (or comfort) interfering with your judgment?

3. Assess for:
    a. Substance Abuse
    b. Dementia/Psychiatric Disorder
    c. Violent Behavior

Set Limits:

1. Make an observation of the behavior; then confront the behavior directly, friendly and politely.
2. Explain the rules and/or options clearly.
3. Encourage the person to take responsibility for his/her actions.
4. Make clear the consequences if unacceptable behavior continues or if the person losses control.
5. Make it clear that the behavior, not the person or person's feelings, is unacceptable. You can validate the feelings or person without condoning the behavior.
6. Set limits that are fair and appropriate. Try not to fall into the role of a punitive or permissive figure.
7. Don't over-stimulate or further aggravate the person by:
    a. Becoming very emotional yourself (anger, hostility, panic, condescension, defensiveness, etc.)
    b. Touching or make threatening gestures.
    c. Talking too much, too loud, or using words the person doesn't understand.

Some Possible Causes of Difficult Behavior

There are many reasons why difficult behavior may occur in clients. Sometimes the behavior may be related to changes taking place in the brain. In other instances, there may be events or factors in the environment triggering the behavior. Some behavior is a learned response of how one gets their needs met. It can be helpful for Case Mangers to try and understand why a client is behaving in a particular way. Determining the cause or behavior trigger may lead to possible solutions to the behavior or preventative techniques to keep the behavior from happen in the first place.

The following is a list of four categories of possible causes of difficult behaviors:

Causes Related to the Person's Physical and Emotional Health

1. **Effects of medications.** Medication can cause confusion, sudden changes in a person's level of functioning, falling, drowsiness, a sudden increase in agitation, strange mouth or hand movements, sleepiness, depression, and many other side effects.

2. **Impaired vision or hearing.** Both problems can affect a person's ability to communicate and may lead to inadvertent non-compliance.

3. **Chronic and acute illness.** Some individuals may endure sudden and ongoing medical problems that can affect their overall mood and irritability.

4. **Dehydration.** Many clients do not get or retain enough fluid. Symptoms of dehydration may include dizziness, confusion, delusion, refusal to drink, skin that appears dry, flushing, fever, and rapid pulse.

5. **Depression.** Symptoms of depression include impaired concentration, memory loss, apathy, and sleep disturbances.

6. **Fatigue.** Disturbed sleep patterns can cause angry or agitated behavior.

7. **Physical Discomfort.** Pain, hunger, being to cold or to hot, or not having one's immediate needs met can increase difficult behavior.

8. **Dementia.** People with dementia suffer from a progressive brain damage that can affect their behavior.

9. **Mental Illness.** Learning the symptoms of a mental health diagnosis can aid the Case Manager in understanding why a client may act in a certain way. Some symptoms may beyond the client's control.

10. **Substance Use.** Use and misuse of substance can alter a client's behavior and mood.

Causes Related to the Environment

1. **Excessive stimulation.** Difficulties can occur when there is too much going on in the environment for the person to absorb. They may have reached a saturation point and may not be able to cope with the stress and respond with anger and frustration.

2. **Unstructured environment. If clients are** cognitively impaired, they may encounter more problems with negotiating the environment. When daily routines to access agency services continuously changes, individuals are more likely to become agitated or frustrated.

3. **Poor sensory environment.** Infections can impair an individual's ability to hear, see, feel, taste, and smell. These changes can interfere with clear communication, the client's ability for treatment plan adherence and behavior.

4. **Unfamiliar environment.** An environment that is new or unfamiliar is more likely to be confusing. As individuals attempt to negotiate the environment an encounter barriers, frustration and lack of follow-through often occur.

Causes Related to the Task

1. **Task too complicated.** Sometimes we ask clients to do tasks that are too overwhelming and difficult for them, although they may seem simple to us. Breaking a task down into small, concrete steps can help a client complete the task successfully.

2. **Too many steps combined.** Make sure the client is doing one small step at a time. Breaking steps down into small steps but them lumping them all together can complicate the task. Each step needs to have a recognizable completion point before the person moves on to the next step.

3. **Task not modified for increasing impairments.** As a person's functioning declines, the Case Manager may have to involve others or do the first few steps to get the person started. Eventually the Case Manager or care takers may have to do most of the steps. However, it is important to try to keep the client involved in doing as many as the steps possible on his/her own.

Cause Related to Communication

1. **No one is understood.** Communication between the Case Manager and the client is an extremely important and sometimes a difficult part of the helping process. Many times clients get angry or agitated because they do not understand what is expected of them. Or, they may be frustrated with their inability to be understood.

What is a Relationship?

Relationships are established in a variety of ways, e.g. employer/employee, partners, husband/wife, boyfriend/girlfriend, roommates, client/case manager, physician/patient, friends, colleagues, etc. These "adult-to-adult" relationships are based on two primary elements: honesty and mutuality.

What do these two words mean in terms of a relationship? Let's examine each and see how a violation of either element may seriously compromise the relationship.

1. Mutuality – means that **the relationship (adult-to-adult) between the two parties must be viewed as equal** as possible, i.e. neither party is considered to be inferior or superior to the other. Although we may be in different stations of life, each party strives to provide mutual regard and respect for the other. This is a very difficult process and often is violated through the use of words, condescending remarks, attitudes, behavior, body positions, and other methods. Let's look at just a few examples that violate mutuality:

a. Standing over another and talking down to him/her.

b. Doing for others what they can do for themselves (especially without their permission), e.g. "Here, let me help you with that." or "Here, let me do that for you." Every time we do this, we relinquish the right of others to do for themselves—to make their own decisions. Further, we are teaching dependency and stifling self-reliance; assuming the other person is helpless; giving the message that we are better or can do better; assuming a role of control or superiority, etc. Help is NOT always helpful. Beware of the "helper" (controller, manipulator, etc.) who is always there to "take care of you".

c. Using words that the other person does not understand.

d. Speaking to another in a condescending manner… "Well, I know how you are."

e. Making decisions on behalf of others.

f. Making assumptions about another person.

g. Using any kind of manipulative behaviors.

These are only a few examples of the violation of mutuality that we may exercise every day. Each time we do this, we compromise the integrity of the relationship. Often times the other person is not aware of any identifiable violation—they just know it doesn't feel right. This frequently happens when control and superiority is disguised as "helping" the other person. "I'm doing this for your benefit."—see what a nice person I am.

In addition to assuming an equal (adult-to-adult) relationship with the other person, mutuality means that there is **a free flow of information between the two parties involved**. If either party withholds information (or provides too much information), there is an imbalance in the

relationship and mutuality is violated. If, for example, I fail to give you pertinent information so that I may have better control of a situation, I have violated mutuality. If I ask you a lot of questions about yourself and fail to give you any information about myself, I have created an information imbalance. This creates discomfort and violates mutuality.

2. Honesty – means that **the information shared between the two parties involved must be without distortion or deception.**

Distortion

If either party distorts the information for their own gain, they have violated mutuality. For example, I may want to befriend you. So I tell you some things about myself including a few "white" lies. Later, you ask me about a certain situation I had told you—one of my little white lies. Now I have two choices: either continue the lie and attempt to remember all of the details or tell the truth. If I continue the lie, not only do I have to live with my own dishonesty, sooner or later my details are not going to match up. If I tell the truth, I have seriously undermined your trust in me. Distortion of information is a very dangerous game in a relationship and should be avoided at all costs.

Deception

Sometimes we might want to deceive the person we are establishing a relationship with. We might have a "hidden agenda" and therefore give out information, or take actions, with an "intent" that is different from what the other person understands. For example, you may want to have sex with someone; so you invite the person to go out with you to a dinner, a movie and/or some drinks. The hidden agenda is that afterwards, the person will feel obligated to go home with you.

Or perhaps, you want to give a false image of who you really are. Therefore, you may provide information in such a manner as to mislead the person. This too is deceptive and violates the element of honesty.

False relationships.

A violation of either element (mutuality and honesty) will seriously compromise the integrity of a relationship. If a relationship is to continue in good-standing, it will always be necessary to go back and fix any violations. A relationship that continues in the presence of a violated element is not a positive, healthy relationship.

An unhealthy relationship may be the result of a forced necessity, a fear, an illusion, a false hope, or something else but it is not a positive, healthy relationship. Perhaps a person has a strong need for love and will suffer through emotional and/or physical abuse to be with another person; perhaps there is a need to have money available; perhaps there are children involved in the relationship; perhaps there is the fear of losing one's job; perhaps a client is fearful they will lose their services; perhaps one person knows something that is detrimental to another and holds it over his/her head. The possibilities are unlimited. In any case, if you are in a false relationship, do whatever is necessary to remedy the situation as soon as possible.

One-Way vs. Two-Way Communication

Communication is simply the exchange of information between individuals. It happens in many different ways from simple smiles, to gestures, body positions, words we say (or not say), touch, things we write, drawings, paintings, music, etc. In general, we do a fairly good job of effectively communicating with each other considering all of the possibilities there are for misinterpretation. However, for any of us who feel we have been misunderstood or just haven't been heard, we know how difficult communication can sometimes be. However, with a little practice, we can improve our communication skills. First, let's talk about two common methods of "verbal" communication—one-way and two-way communication.

One-Way Communication

Speaker ----------(talks <u>at</u>)----------→ Listener

One-way communication is when we talk "at" people. It is often used in casual, social conversation. This type of communication does not require the listener to necessarily respond to the speaker in any substantive manner. The listener may respond on an intermittent basis by simply smiling, nodding, giving short expressions (oh, huh, really, exactly, no kidding, etc.) and looking at the speaker. This method of listening is often referred to as "passive listening". For example, if we ask a person "What's happening?", they will often continue to talk "at" us as long as we give short, intermittent responses of some sort. One-way communication is an effective type of social conversation which allows the speaker to vent or share information. However, sometimes the person may want help addressing a particular concern or problem. When entering into the problem-solving/decision-making process, using two-way communication is usually a more effective method.

Two-Way Communication

Speaker <----------(talks <u>with</u>)----------→ Listener

Two-way communication is a much more complex process and demands a great deal more from the listener. This method of communication is often referred to as "active listening" because it actively engages both the speaker <u>and</u> the listener. Two-way communication means we are talking "with" each other rather than "at" each other.

Responsibilities of the Listener

There are two primary responsibilities of the listener during two-way communication:

1. To try to understand the speaker from his/her vantage point, and
2. To communicate back to the speaker what we think we heard or understand.

```
                                        (Filters)
          |-------------------------------------------------////-------------->|
Speaker   |   (To try to understand the speaker from his/her vantage point)     |
          |                                                                     |
          |                                                                     |   Listener
          |                    Communication Loop                               |
          |                                                                     |
          |                                                                     |
          | (To communicate back to the speaker what you think you heard or understand) |
          |  <-------////-------------------------------------------------------|
                 (Filters)
```

Filters

Attempting to meet these two responsibilities is a very difficult process. Our knowledge and experiences are very different from that of the speaker. As the speaker talks to us, we attempt to relate to the person by comparing the information provided to our own knowledge and experiences. The speaker's words pass through our "filters" that represent our own knowledge and experiences. These filters are all of the things that make us up, i.e. our values, race, gender, age, belief systems, ethnicity, language, sexual orientation, geographic upbringing, political affiliations, religious/spiritual beliefs, education, and all our experiences—both good and bad. As a consequence, the information provided by the speaker becomes distorted as we attempt to relate our experiences to the words being said. These filters that are used during the communication process are often referred to as "interference factors". It is critical that the listener is aware of this interference and makes every attempt to hear what the speaker is saying, from his/her vantage point, and avoid converting the speaker's words into our own experience. This is a very difficult feat.

It is often times said that "no two people ever read the same book" or that "no two people ever watch the same movie". As we read a book, we relate to the written words using our own knowledge and experiences—our own personal references. Each person's response to the words will be different. Consequently, we are reading the book from a different vantage point than another person. In fact, we know as we grow and develop, that if we read the same book a few years later, it will be different. This is because our knowledge and experiences have changed over time and we now reference the words differently.

Understanding the Other Person

Attempting **to understand another person from his/her vantage point** is an extremely difficult process and we could never reach a true understanding of the other person's situation. Even persons who have had "common experiences" have had very different experiences. It would be impossible for us to have had the same experience. Think about such things as going to a concert, experiencing an earthquake, driving a car for the first time, going to school, getting married, drinking with friends, the death of a parent, flying in an airplane, etc. None of these experiences could be the same for every person. Those who have had common experiences often make assumptions about the other person's experience. Making assumptions is a reckless approach to communication and it often leads us away from understanding the other person. Our attempt as a listener should be to try to get inside the person and see the world through his/her eyes—not ours. Most importantly, **"Do not make assumptions"** about the other person's experiences.

Communicating our Understandings to a Person

If trying to understand isn't hard enough, after we've heard what the speaker told us, we now have **to communicate back to the person what we think we heard or understand**. We might say something to the effect, "So what you're telling me is that _____" or "Let me see if I understand what you are saying. You're telling me _____. Is that right?" Often times the speaker will respond, "No, no, no that's not what I'm saying. What I'm trying to say is _____". Consequently, we may have to keep repeating the information back and forth to each other until we come to a common agreement on what is being said. Repeating this information back to the speaker is critical to ensure we are on the same frequency. If we don't verify what the speaker is saying, or make assumptions, we may be completely off base and not know the difference. This is not helpful to the speaker, nor the listener, and it leads to much confusion. Not only do <u>we</u> have filters that interfere with the communication process, so does the speaker. This too has to be taken into consideration. It's amazing that we can communicate at all with so much interference going on and so many possibilities for misunderstanding. Some how we manage to bungle through the process—although not always very effectively.

Notes:

PROBLEM-SOLVING/DECISION-MAKING PROCESS

STAGE 1	STAGE 2	STAGE 3	STAGE 4	STAGE 5
WHAT	*HOW*	*WHAT*	*HOW*	*WHAT*
Define the situation.	Determine the emotional response to the situation.	List options/ alternatives/ possibilities/ideas to address situation.	Assess the response to each alternative/ option/ possibility.	Select the best alternative to address the situation.
"What's happening?" **What's going on?"** *"What do you need?"* **What's on your mind?"** *"What would you like to talk about?"*	*"How are you feeling?"* **How does that make you feel?"** *How are you doing?"* **"How did you deal with that?"**	*"What have you done about it already?"* **"What do you see as a possibility?"** *"If you could change anything what would you do?"* **"What do you think would work in this situation?"**	*"How do you feel about that idea?"* **"How does that possibility work for you?"** *"How does this option differ from that one?"* **"How do you think this alternative will work in your situation?"**	*"What would you like to do about it?'* **"What do you think is the best option for you?"** *"What alternative are you most comfortable with?"* **"What would you like to try in your situation?"**
Defining Situation		Exploring Options		Selecting Alternative

The alternatives selected become the "goals" that the person chooses to take in order to resolve the situation.

Problem-Solving/Decision-Making (PSDM)

by

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Often times friends, partners, family members, and others may be casually talking with you about various matters when all of a sudden they begin telling you about an undefined situation/problem. The person may begin by saying, "I have a really big problem and I know you can help me. You're a smart, compassionate person and I know you can fix my problem." You have no idea what the person is talking about.

Because of these kinds of scenarios, a structured problem-solving/decision-making (PSDM) process has been developed so that you can assist others to more easily define their situations and focus on solving the problem(s) at hand.

Stage 1

When using the PSDM process, you begin by asking a "what" question. This question can be framed anyway that you feel comfortable, e.g. What's happening? What problem? What's going on?, etc. It doesn't make any difference how you ask the question, as long as it begins with a "what." This stage of the Problem-Solving/Decision-Making process, is referred to as the "head" stage (above-the-shoulders functioning). The person is asked to define the situation for you and this becomes the "issue" at hand.

Stage 2

After the problem has been clearly defined, now assess how the person is doing relative to the situation. You might ask, How are you doing now? or How does that situation make you feel?, etc. Again, the question can be asked in many different ways as long as it begins with "how." This stage is referred to as the "body" stage (below-the-shoulders functioning). This is the expression of how the person "feels" about the situation. It is the emotional response to the situation. The "how" stages always go backwards to the "what" stages, i.e. "what" is the situation and "how" defines the person's feelings about the situation.

Stage 3

Now that the problem or situation has been defined, as well as the feeling(s) about the situation, you once again ask a "what" question, e.g. What have you thought about in order to address this situation? What do you think you can do about the problem? What do you see as an answer to this situation? Again, it can be asked

many different ways as long as it begins with "what." Now we are back into a "head" stage and the person, in conjunction with you, begins to brainstorm around how to resolve the problem. You are encouraged to write down as many options as possible.

It is critical during this stage (3) that you do NOT judge anything that the person proposes, no matter how absurd it may appear. The idea is to get the person to consider a wide range of possibilities in resolving his/her concern and taking ownership of the situation. If the person is judged, they will simply shut down and refuse to address the problem. This is called the "hump" stage. If you can get the person over the hump, it is downhill from there. People are often hesitant to answer the question, "What do you think you can do to address this situation?" If they answer the question, it infers that they will have to take responsibility for the situation. The person may have been hoping to just drop the problem on you and wait for your answer.

However, we never do for others what they can do for themselves. Every time we do for people what they can do for themselves, we disempower them. Our goal should always be to empower people, aiming toward self-sufficiency. Therefore, it is critical that we work with the person to brainstorm without any form of judgment. Just the process of selecting ideas, no matter how bonkers they are, is moving forward toward problem-solving. The goal is to keep a positive mindset going at all times.

Stage 4

Now that you, in conjunction with the person, have developed a long list of possibilities to address the person's situation, proceed on to another "how" stage. Ask the person how s/he feels about each option and if s/he feels it will work in his/her situation. You might say, How do you feel about this possibility? How does this option feel in terms of addressing the situation? etc. It's as if the person is trying on each option to see how comfortable it feels in terms of addressing his/her problem. It's critical that ONLY the person with the concern/problem defines how s/he feels and not you as they are the only one who knows what's comfortable for them. As the process goes along, the person will discard several of the options as not feeling comfortable. Through this process of elimination, the person will finally come down to one BEST option (with perhaps a few backup options).

Stage 5

After the person has gone through the process of elimination, you might say, "So, we've discussed a lot of possibilities to address your situation. What do you think is the best thing for you to do right now?"

Now you are back to the "what" questions again. The person has to carefully think about the process s/he has just been through and what is the most practical and comfortable option to select. This becomes the plan for the person to solve his/her problem. Now, it's simply a matter of the person implementing the plan.

A **Sample Dialogue** may go something like this.

You – *"So what's happening?"* (Stage 1)
Friend – *"I lost my money and I can't pay the rent."*
You – *"Wow... how are you doing right now?"* (Stage 2)
Friend – *"Not very good... I'm really scared that if I don't pay my rent on time, I'll get an eviction notice."*
You – *"Have you thought about what you can do to get the rent money?"* (Stage 3)
Friend – *"Not really... I need your help."*
You – *"Okay... what HAVE you thought about already and let's see if we can come up with a list of some other possibilities as well."*

You and the other person develop a list of ideas to obtain money for rent.

Friend – *"I could probably call my mom. Maybe I could pawn something until my new check comes. Since it's only $250.00, perhaps I can pawn my TV. I could ask to borrow some money from friends." Others*

You are free to throw in a few options during this process as well as long as it is two or more. You don't want the person to think you are suggesting only one way to address the problem. They must take ownership for the selected idea.

You – *"Wow... it looks like we came up with a lot of possibilities. How do you feel about calling your mom?"*

Go through each alternative and ask the person to try them on. (Stage 4) Eliminate those that they feel may not work or they are uncomfortable with.

Ct. – *"I'm not too sure my sure my mom would give me $250.00 again. I asked her once before."*

You – *"Okay... how do you feel about taking something to the pawn shop?"*
Friend – *"I'm okay with that... I took my TV in there once before."*

After completing this process, ask the person "what" alternative s/he wants to do.

You – *"Well it looks like we've explored a lot of options, what do you think you want to do right now?"* (Stage 5)

Friend – *"I'm going to take my TV to the pawn shop."*

You – *"Okay... great. Let me know how this all works out for you."*

General Information:

The PSDM process takes persons from where they're at and respects the Right to Self-Determination. It is critical that you not impose your values and/or belief systems onto the other person when doing the PSDM process. It is your responsibility only to provide information, education, and support as you facilitate this process. All decisions are to be made exclusively by the other person.

Occasionally, a person may begin in another stage rather than at the beginning of this process. For example, they may begin by expressing how they feel (Stage 2), i.e. "I'm really angry today... I feel like just punching somebody." In those cases, simply acknowledge what the person said (or did) and then go back to Stage 1. The dialogue may go something to this effect... "Wow... I've never seen you so upset as you're telling me right now. What's going on?" Or the person may say, "I'm going to kill myself." (Stage 5) Simply acknowledge what the person said and go back to stage one, e.g. "Whoa... what are you talking about... killing yourself? What's happening?" (Stage 1) Avoid reacting to the statements or making any judgments about the statements. They simply are what they are and should be acknowledged as such.

When facilitating the PSDM process, it is critical that you avoid using a whole set of words that may upset the person, inflame situations, are negative, appear judgmental, appear as if the you imposing your ideas or feelings onto the person, etc.

Words to Avoid When Problem-Solving

Often times in a casual, social conversation, we use words without much thought to their consequences. However, when talking with persons who are attempting to solve problems, the use of certain words becomes more critical. Throughout the problem-solving/decision-making process, it is important that we not inhibit the process by using language that may appear to be judgmental or lead the person to believe that we are imposing our ideas or solutions on them. Therefore, we can enhance the communication process by removing some of our favorite words and phrases. Here are some of the most common:

1. **Why?** - The reason why we don't ask "Why" is because it:

   Infers Judgment, e.g. "Why did you do that? Why did you get into that situation? Why would you want to do that?" Because a trusting relationship is based on honesty and mutuality, it is important that we avoid putting ourselves in a role of superiority by asking judgmental questions. Questions of this nature, often violate mutuality and puts the person on the defensive.

   Demands an Explanation. Even if the person could explain his or her current situation, nothing would have changed about the situation after the explanation. It would still be the same situation several hours later. Avoid your temptation to be voyeuristic and want to know all of the gory details of someone's past. Focus on the present and "define the situation". Although some background history may be necessary to understand a situation, it is not necessary to retrace the entire life history of each and every person in the scenario. This is just plain nosiness. Explanations are not resolutions. Resolutions demand that we process through a problem—not just talk "about" the problem.

   A good substitute for "why" is "for what reason". Although it asks the same question, it doesn't appear as demanding and judgmental, e.g. "For what reason would you choose this possibility as opposed to that one?" Remember to flatten your intonation when asking the question.

2. **...but...-** Using the word "but" to continue the conversation with a person tends to discount what the person has just said, e.g. "Well I hear what you are saying but I think you should...". An alternative is to substitute the word "but" with the word "and", e.g. "I hear what you are saying <u>and</u> I've thought of some other ideas we might consider." or you may simply start another sentence and omit the word "but", e.g. "There may be some other alternatives we can look at also. Let's see if we can talk about this further and add to the list." Whatever you do, try to keep your "but" out of the other person's situation.

3. **I think...** - This expression immediately suggests that you are going to impose your agenda on the speaker. "I think" is often followed by what the person should do. Whose "should" is this? It's yours. By saying "I think", we immediately place ourselves in a superior position—which is a violation of mutuality in the relationship. Avoid providing "I think" responses unless they are specifically solicited. Even then, we need to present our responses with great caution.

4. **You should...** - What does this expression tell you? That's right! It dictates to the speaker what s/he "should do" based on what works for you and your particular values and beliefs. It doesn't, in any way, guarantee that the suggested solution will work for the other person. Yes, and once again, it puts you in the position of knowing everything. What happened to mutuality and processing? Avoid "you should" statements whenever possible.

Every time we give our solutions to others we deny them the right to find their own. **Do not do for others what they can do for themselves.** This takes power away from others and it assumes that they are unable to do for themselves. Be careful not to relinquish the other person's right to choose—keep your quick fixes to yourself and afford the person an opportunity to find his/her own solution. Avoid teaching dependency—rather provide opportunities to empower the person by allowing them to make their own decisions leading toward great self-sufficiency.

5. **I understand** - First of all, we could never fully understand another person's situation. We're not in it. Secondly, it tends to trivialize what the speaker is telling us as if to say, "Yeah, yeah, I know all about that—don't bother me with the details." Also, "I understand" often times means in social conversation to "shut up". Haven't you heard people say, "Yeah, yeah, I understand (person puts his/her hand up in a stop position) but what I think you should do is ...". To avoid giving the person the perception that you are telling him or her to shut up or are not interested in what they are saying, avoid using "I understand". You might say, "Let me see if I'm understanding what you are saying (state your understanding); or, "Help me understand that... can you tell me more about that?" "I think I'm understanding... are you saying such and such?"

6. **That's right** or **that's wrong...** - Once again it puts us in position of judgment; a position of superiority. We want to avoid judging what the speaker is saying and <u>try to understand</u> what s/he is saying from his/her particular vantage point. Judgment only impedes the communication process. It puts the speaker on the defensive and soon s/he will censor the conversation to those things s/he thinks the listener wants to hear. Again, in social situations, we often judge what the person is saying by grunts, verbalizations, facial expressions, body language, etc., e.g. "Really?, I can't believe it!, That's terrible!, That's great!, You're kidding!, How could that have happen!? We might use looks of surprise, frown, throw up our hands, etc. all suggesting we are judging what the person is saying.

   Try to view the person's situation as simply different from yours rather than right or wrong. It is not our responsibility to change the person to be the same as us; nor to believe that our ideas are the only ones that are true and correct. **It is what it is and it will be what it will be.**

7. **Avoid a "preface" or "explanation" to a statement**, e.g. "I'm not a bigot but...; It isn't that I don't mind working with women but..."; or after you've already stuck your foot in your mouth, you state,... "Well, what I was really trying to say was..." These tags on a statement often times indicate that what follows or preceded the tag was not true. Just make the statement without any tags before or after it. If you need to qualify or explain the statement, perhaps it would have been better unsaid.

8. **Avoid using clichés and figurative language** - Very often clichés trivialize what is being said and contribute little to the conversation, e.g. simply say, "yes" instead of repeating words like "yeah, right on, you got it, I hear ya, really, positively, totally, excellent, definitely, affirmative, exactly," etc.

   Some other vogue phrases that take the place of conversation include whatever, like, you know, you know what I mean, to tell the truth, actually, cutting edge, not to worry, no brainer, go for it, fast-track, on the same page, bottom line, drill down, hands-on, on a roll, power-anything, read my lips, world class, no problem (which usually is, thus raising false hope), etc., etc. These phrases are vague and ambiguous, say less annoying, and leave matters to personal interpretation.

9. **Avoid making comments that raise false hopes or give false encouragement.** This is especially true when talking with a person who has a serious illness, has experienced a major trauma, or may have a potentially terminal illness. We would want to avoid statements like "buck up, cheer up, don't worry it will all work out, everything will be better soon ... don't make such a big deal about it". We cannot guarantee the outcome of another person's situation nor do we want to trivialize it by making a mundane "hope" statement.

   The listener's ability to convey the fact that s/he is interested in the person speaking, as well as the problem and its solution, often is proof enough that things may get better just knowing there is support and an empathetic ear.

10. **Avoid labels and group-specific language** – Labels are often used to hurt, judge or distance ourselves from others. Labels don't provide useful information to the other person and it sets up a situation of speculation—often in the negative. What do we mean when we say he's conservative, he's a drug addict, AIDS victim, she's in denial, she's Black, they're Catholics, he's Latino, they're all Jews, homosexuals, he's depressed, nerd, crack head, queer, etc. These "buzzwords" are often times used in an offensive manner and may cause a negative emotional reaction.

    We all belong to different groups, professions, organizations, etc. As a consequence, we often learn a language that is specific to our particular group. However, when we talk with others, they don't necessarily know what we mean by certain words, acronyms, in-house jokes, etc. Attempt to be inclusive in the conversation rather than using language that alienates people.

11. **Avoid starting a sentence with the word "no" or using negatives** – Try to reword your statement to begin with a positive, i.e. tell the person what you CAN do as opposed to what you CAN'T do. Example: "No, we don't do that here. No, I can't help you with that." Instead, the conversation may go something like this, "Oh okay, I hear what you need. (Repeat the need). Let me give you a number where you can talk to someone about that." It's unnecessary to explain what you can't do. It only frustrates the person further and may escalate a situation. Also, avoid saying the usual negative cliché statements, e.g. "No problem; Don't forget…; No, I agree; No, that's a great idea; etc." Substitute with, "I'll take care of it; Please remember; Yes, I agree; Yes, that's a great idea."

12. **Avoid interpreting the conversation** – "Oh yeah, I've heard about that before. I think it's probably because of such and such." People usually want only to share their story with you and they are not necessarily asking that you interrupt every few sentences to offer an explanation to what they are saying. Ask yourself, "For what reason am I doing this?" "What is the purpose of my interpretation/speculation?"

13. **Avoid sharing your own personal stories.** Your responsibility as a listener is to try to understand what the person is telling you from his/her vantage point—not to impose your own personal stories on them. Your stories may confuse the other person and/or complicate the situation even further. Again, ask yourself for what reason are you telling the person this information.

Complaining/Criticizing

Dismissing

Arguing

Assuming a Victim Role

Gossiping

Blaming

Explaining

Offering Excuses

Choosing Negative Feelings

Lose Control

⇦ Reactive

Historical Information

Event/ Situation

Coaching/Counseling

Providing Information/Education

Being Supportive

Developing Action Plans

Assuming Responsibility

Discussing

Cooperating/Collaborating

Choosing Positive Feelings

Gain Control

Proactive ⇨

(Stop, Think, Do)

- Negative Language

+ Positive Language

⟵ *An explanation is not a resolution.* ⟶

Some Possible Remedies to Address Difficult Behaviors

The Importance of Good Communication Skills

Communication is the key to providing quality case management services. Understanding and being understood can help reduce difficult behaviors. The following describe some of the causes of poor communication and some suggestions for better communication.

Your Approach – You Set the Tone

- **Think about how you are presenting yourself.** Are you tense? Frowning? Are you being bossy or controlling? People are extremely aware of non-verbal signals such as facial expression, body tension, and mood. If you are angry, tense, or stressed out, your client is likely to become angry, anxious or annoyed.
- **Try a calm, gentle, mater-of-fact approach.** You set the mood for the interaction. Your relaxed manner may be contagious.
- **Try using touch to help convey your message.** Sometimes touch can show that you care, even when your words don't, or when they are not understood. Some people shy away from being touched. However, most find gentle touching reassuring.
- **Begin your conversation socially.** Gaining the person's trust can often make a task much simpler. One way of doing this is to spend time chatting before approaching the task at hand. For example, you might spend ten minutes talking about weather, family members, or some reassuring topic, to help the person develop a relaxed frame of mind. Again, you are creating a pleasant mood.

Things to Think about When You Speak

- **Talk to the person in a place that is free from distractions.** Such as equipment noise, television, or other conversations.
- **Begin conversations with orienting information.** Identify yourself if necessary, and call the person by name. After creating a relaxed atmosphere, explain what your role is and how you will be working with the person.
- **Look directly at the person and make sure you have his/her attention** before you begin to speak. If you cannot get the person's attention, wait a few minutes and try again. Move slowly. If a person is despondent, try a gentle touch on the arm or hand. If a person is agitated, keep your distance, stay calm, and speak firmly in short, simple, directive sentences.
- **It is important to be at eye level with the person,** especially when talking to people with a hearing or cognitive impairment.
- **Speak slowly and say individual words clearly.** This is particularly important for people with hearing problems or those who are in the later stages of dementia.
- **Use very concrete terms and familiar words.** Individuals may not be able to understand abstract concepts or case management language.

- **Talk in a warm, easy-going, pleasant manner.** Try to use a tone of voice that you would like people to use with you.
- **Keep the pitch of your voice low.** Sometimes when people don't immediately understand, we have the tendency to shout. This may upset the person and make communication more difficult.

Task Development

- **Give choices whenever possible.** Giving choices increases the interaction between you and the client and may help the client feel a sense of control over his/her life.
- **Allow plenty of time for the information to be absorbed.** Give a period of silence after giving a task instruction. Let the client read the task steps you have written in the individual action plan. Allow for questions and restate the task to be completed before the client leaves the office.
- **Repeat instructions exactly the same way.** When a client indicates that s/he does not understand the instruction, do not change how you describe the instructions. This may confuse the client. If the client still does not understand the instruction, you may want to try using different key words, demonstrate, or role-play what you want the person to do.
- **Break the task down into simple steps.** Telling a client that they need to go to the Department of Public Social Services to get General Relief may be very overwhelming. Depending on the client's level of functioning, you may need to start by instructing the client on how s/he will get to the DPSS office. In addition, role-playing, such as asking who they need to talk to once they have made it to the DPSS office, may be helpful. You might want to use a simple map.
- **Modify the steps, as a person becomes more impaired.** You may need to break steps into smaller parts or may need to assign or do more of the steps yourself.
- **Praise sincerely for success.** We all need to hear that we are doing a good job. Praise doesn't need to be long or "gushy" but a simple thank-you or "You handled that very well!" Try catching your client doing something good and acknowledging it.

When You Are Having Trouble Being Understood

- **Be sure you are allowing enough time.** It may seem to you that you have waited a long time for a person to respond. However, persons with impairments often need a great deal of time to process information.
- **Try demonstrating visually what you are saying.** Though not always possible, this technique of doing and saying at the same time is often a very effective way of communication.
- **Think about the complexity of what you are saying.** Can you say it more simply? Is it too many words or too abstract for the person to understand? Can you be more concrete?
- **Change the subject.** If you are both getting frustrated, it may be a good idea to drop it for the moment and try later.

When You Are Having Trouble Understanding

- **Listen actively and carefully to what the person is trying to say.** If you do not understand, apologize and ask the person to repeat it. Let him/her know when you don't understand by repeating or rephrasing it.
- **Try to focus on a word or phrase that makes sense.** Repeat it back to the person and try to help him/her clarify what is being said.
- **Respond to the emotional tone of the statements.** You may not understand what is being said, but you may recognize that it's being said angrily or sadly. Saying "You sound very angry." at least acknowledges the feelings, even if you cannot decipher the words.
- **Try to stay calm and be patient.** Remember the person is not always exhibiting difficult behavior on purpose. Your calmness and patience will help create a caring atmosphere that may calm the situation.

Things Not To Do

- **Do not argue with the person.** This always makes the situation worse. Furthermore, the person you are arguing with may no longer have ability to be rational or logical to the extent you do,
- **Do not be condescending.** It is hard not to use a condescending tone of voice when you are speaking slowly and in short sentences. However, a condescending tone is likely to provoke anger, even if the words are not understood.
- **Do not put other people in danger.** If a client is acting in a threatening manner, get others out of the area to a safe place.
- **Do not talk about people in front of them.** It is easy to fall into the habit of talking about people in front of them when they can no longer communicate well. It is impossible to know how much someone understands, even if they do not speak your language.

When Verbal Communication Fails

- **Try distracting the person.** Sometimes simply diverting the person's attention to other activities such as going for a walk, changing the subject, or offering a snack-may be enough to diffuse an angry or anxious mood.
- **Ignore verbal outbursts** if you cannot think of any positive response. It is much better to ignore angry or agitated statements than to become angry yourself. You might want to try to apologize, let the subject drop, or change the emotional tone of the conversation.
- **Try other forms of communicating.** There are lots of ways of communicating that don't involve words. A gentle touch, providing food or water, or taking a walk can often demonstrate concern more effectively than words. These modes of communication can also help soothe a troubled person and take the edge off difficult moments.

Problem-Solving

When you are faced with difficult behavior or situations, try to understand why this behavior is occurring. What are some of the factors that may be triggering the behavior that you can change? It is important to recognize elements in the environment, the mental or medical situation, or problems of communication that may be contributing to the problem.

1. **When does this problem occur?** It may be helpful to keep a log describing the problem or situation. Jot down the time and what happened. Think about what was going on right before the behavior occurred: Who was involved, who was affected by the behavior, what emotions were being expressed, and how did others respond?
2. **Carefully review the four categories** previously described and try and pinpoint specific cause. Is the problem related to the person's health, the environment, the task or communication?
3. **Develop a list of alternative strategies** for responding to the behavior or situation. Be creative, seek supervision and set limits.
4. **Think about the strategies you have identified.** Decide on the one that you are going to try first. Don't worry if it fails. You are gaining new information about the situation even if your approach does not work.
5. **Problem-solving is a process of trial and error.** There are no simple solutions. You may no sooner solve one problem than another problem develops. You may find that your solutions work sometimes but not at other times. Be flexible!
6. **Reassure the person** after an upsetting situation to let him/her know that you want to understand and care.
7. Remember if the behavior is caused by **organic conditions,** the person is not deliberately trying to be nasty, stubborn or annoying.
8. **Don't try to handle difficult situations alone.** It is okay to ask for help and seek clinical supervision.

Additional strategies for addressing problem behaviors, when the person:

Demonstrates Hostility/Sarcasm

- Keep the interview as friendly as possible.
- Sell the client on telling the truth.
- Set limits that are fair and appropriate, stay focused on the goals.
- Confront the behavior directly, friendly, and politely.
- Explain the rules and/or options clearly.
- Encourage the person to take responsibility for his/her actions.
- Make clear the consequences if unacceptable behavior continues or if the person looses control.
- Make it clear that the behavior, not the person or person's feelings, is unacceptable. You can validate the feelings or person without condoning the behavior.
- Model appropriate behaviors such as respect, good listening, remaining calm.
- Do not over-stimulate or further aggravate the person by:
    a. Becoming very emotional (anger, hostility, panic, condescension, defensiveness, etc.).
    b. Touching or making threatening gestures.

c. Talking to much, too loud, or using words the person does not understand.

- Develop a behavioral or service agreement with the person.

Talks too much

- Ask specific questions rather then vague questions.
- Re-focus the client often.
- Model appropriate behavior.
- Set limits and time frames and stick to them.
- Develop a behavioral or service agreement with the person.

Becomes Restless/Nervous

- Keep the interview friendly.
- Acknowledge non-verbal behavior.
- Give the client space and time to calm down.
- Offer something to drink.
- Reassure confidentiality.
- Explain the process of what you want to accomplish with the client and provide an approximate time frame of completion.

Is in Crisis

- Remain as calm as possible.
- Explore the situation.
- Acknowledge the client's feelings.
- Use calming phrases.
- Explore alternatives.
- Reaffirm that the client is safe with you.
- Protect and assure the safety of the client and other individuals including yourself.
- Call for back-up if necessary (have a plan).

Uses Manipulative Behavior

- Ask highly specific questions.
- Be persistent in a low-key, non-demanding manner.
- Avoid questions that allow for rationalizing.
- Set limits that are fair and appropriate, stay focused on the goals.
- Confront the behavior directly, friendly, and politely.
- Explain the rules and/or options clearly.
- Make clear the consequences if unacceptable behavior continues or if the person looses control.
- Make it clear that the behavior, not the person or person's feelings, is unacceptable. You can validate the feelings or persons without condoning the behavior.
- Model appropriate behaviors such as respect, good listening and remaining calm.
- Do not over-stimulate or further aggravate the person by:
    a. Becoming very emotional (anger, hostility, panic, condescension, defensiveness, etc.).
    b. Touching or making threatening gestures.
    c. Talking too much, too loud, or using words the person does not understand.
- Develop a behavioral or service agreement with the person.

- Remember the underlying motivation of manipulation is survival not defiance.

Non-adherence to Case Management Services

This is a severe impediment to managing client care. The Case Manager can positively affect client participation by providing consistent and regular support and monitoring of the client's progress in achieving the goals of the Individual Action Plan. While the frequency of follow-up contacts should be agreed upon between the client and the Case Manager, it is incumbent on the Case Manager to be consistent and predictable in performing his/her follow-up activities.

Case Managers need to determine on a case-by-case basis whether more frequent contact with a particular client is needed in order to avoid potential dropouts. If after a reasonable effort, the Case Manager has not been able to contact the clients for three months or more, the client's case can be closed and another client can be added to the Case Manager's caseload.

Behavioral/Service Agreement Contracts

Clients exhibit behavioral problems that interfere with case management participation for many reasons. Prevention is always the first method that should be utilized for reducing behavioral problems and are done so by establishing clear boundaries, rules and responsibilities. For those clients who still exhibit behavioral problems, behavioral contracts may be necessary in order to define what behavior needs to change. Continuous behavioral problems including intoxication, threats, harassment, and physical or verbal abuse do not need to be tolerated by case management agencies or staff. If a client is unable to follow the behavioral contract, they should be discharged from case management services.

On September 23, 2007, Casey Client, Case Number 07-145, came in without an appointment to see Case Manager, Sue Langer. Client became verbally abusive with Front Desk staff when he was informed that there would be about a two-hour wait to see his Case Manager. Client was informed that he could schedule an appointment to avoid a long wait in the future. Client proceeded to throw agency brochures all over the waiting area and left the building when Front Desk staff informed him they would call Security if he did not leave.

Sample Case Management Services Agreement Contract

Service Agreement

I, Casey Client, must observe the following guidelines in order to continue to receive case management services at ABC Agency.

1. While at the agency, I will behave in a respectful manner with staff and other clients. Any verbal abuse or aggressive behavior will not be tolerated and I will be asked to leave.

2. In order to see my Case Manager in a timely manner, I must make an appointment. If I am unable to make an appointment by phone, I can come into the agency to do so. If I come in without an appointment, I may have to wait to be seen or may not be able to be seen by my Case Manager that day. If I decide to wait or make an appointment at the agency, I must do so without disturbance.

3. I understand that if I break any part of this Agreement, I will no longer be allowed to return to the agency for case management services. I will be given referrals to meet psychosocial needs, as they are available.

4. If I have any concerns or questions regarding this Agreement, I can discuss it with my Case Manager and the case management supervisor. I have been made aware of and received a copy of the case management services Grievance Procedures.

_____ _____
Client's Signature Date

_____ _____
Case Manager's Signature Date

_____ _____
Supervisor's Signature Date

Methods to De-escalate Volatile Situations

- Avoid reacting to the person
- Listen to the person
- Stay calm
- Speak with a soft, low voice (least audible tone)
- Avoid arguing with the person
- Change the subject
- Avoid disagreeing
- Use non-threatening body language
- Allow time for venting
- Ignore the behavior
- Walk away from the situation
- Attempt to find common ground
- Separate persons
- Avoid extraneous stimulation
- Identify yourself
- Use person's name
- Avoid carrying any objects
- Stay at eye level
- Avoid abstract language or expressions
- Define expectations
- Remain non-judgmental
- Avoid touching person
- Acknowledge the feelings that are being heard or observed
- Define the behavior; avoid labeling the person
- Don't overload – too many words, too fast
- Be assertive, clear, and direct
- Provide a safe place to talk
- Explore options/alternatives with the person
- Keep hands visible
- Avoid an aggressive stance (feet apart, arms crossed)
- Allow person to make own decisions
- Use least amount of words possible
- Be supportive and caring
- Make eye contact

Ten Critical De-Escalation Skills

By Kimberly Olver

Being able to de-escalate one's own and the anger of others is an important skill to have in business. Hopefully, this is not something the reader deals with on a regular basis but unfortunately most people in business encounter either their own anger or the anger of others more frequently than they would like.

In order to be successful at de-escalating anger, a person must understand and become skillful in the following areas.

Prevention Steps:

1. Recognize that anger is a choice of a wide range of behaviors that could be used to get what one needs in a situation. It is a behavior that has benefit for its user, for example anger
    a. Can get people the attention they need
    b. Help them escape things they don't want to do
    c. Help them gain control over another person or situation, or
    d. Pump them up when they are feeling small and insignificant.

2. The person interacting with the angry person must identify his/her own emotions at any given point in time. If the helping person is also experiencing anger, then that person will not be very effective assisting others to manage theirs.

3. When potential interventionists are experiencing anger, they must be able to change what they are doing or thinking to get their emotions under control or seek the assistance they will need to manage the situation.

4. Perform a quick self-assessment. A potential helper must ask the following questions:

    a. Can I avoid criticizing and finding fault with the angry person?
    b. Can I avoid being judgmental?
    c. Can I keep from trying to control the other person into doing something s/he doesn't want to do?
    d. Can I keep myself removed from the conflict?
    e. Can I believe that the people using anger have the right to make decisions and choices about how they meet their needs and that they have within them the ability to make those decisions?
    f. Can I try to see the situation from the angry person's point of view and understand what need or needs he or she is trying to satisfy? And finally,
    g. Can I remember that my job is to place the healing of relationships as my primary concern?

If the listener can't answer these questions in the affirmative, then s/he will need assistance in managing the person who is expressing anger.

5. Recognize early warning signs. Many incidents of anger could be prevented if those who are around a person about to become angry notice the subtle change in the person's behavior.

Quiet people may become agitated; while louder, more outgoing people generally become quiet and introspective. Paying attention to these subtle changes and simply commenting on the change could help the individual talk about things so he or she wouldn't have to become angry.

Prevention goes a long way. However, there still will be times when you don't notice the early warning signs or when your first encounter with the person occurs when they are already in an angry state. Also, it's possible that you will do everything right in this prevention phase and angry people will still choose anger as their best chance for getting what they want. When any of these situations occur, the listener will need to employ one or all of the five de-escalation skills.

Intervention Steps:

1. Active listening is the process of really attempting to hear, acknowledge and understand what a person is saying. It is a genuine attempt to put oneself in the other person's situation. More than anything, this involves LISTENING! Listening means attending not only to the words the other person is saying but also the underlying emotion, as well as, the accompanying body language. By simply providing a sounding board and a willing ear, a person's anger can be dissipated.

2. Acknowledgement occurs when the listener is attempting to sense the emotion underlying the words a person is using and then comments on that emotion. The person may say something like, "You sound really angry right now!" By acknowledging and really trying to understand what the angry person is feeling, that person becomes able to release a lot of the aggression.

3. Agreeing—often when people are angry about something, there is at least 2 % truth in what they are saying. When attempting to diffuse someone's anger, it is important to find that 2 % of truth and agree with it. When someone is angry and the listener attempts to reason with the person, his or her efforts will be largely ineffective. When the listener agrees with the 2% of truth in the angry person's tirade, he or she takes away the resistance and consequently eliminates the fuel for the fire.

4. Apologizing is a good de-escalation skill. I'm not talking about apologizing for an imaginary wrong. I am talking about sincerely apologizing for anything in the situation that was unjust. It's simply a statement acknowledging that something occurred that wasn't right or fair. This can have the effect of letting angry people know that the listener is sincerely sorry for what they are going through and they may cease to direct their anger at the person attempting to help.

5. Inviting criticism is the final of the de-escalation skills. In this instance the listener would simply ask the angry person to voice his or her criticism of the listener or the situation. The person intervening might say something like, "Go ahead. Tell me everything that has you upset. Don't hold anything back. I want to hear everything you are angry about." This invitation will sometimes temporarily intensify the angry emotion but if the listener continues to encourage the person to vent his or her anger and

frustration, eventually, the angry person runs out of complaints. Just let the angry person vent until the anger is spent.

Even when using the above ten skills, there may be a rare occasion when the listener is unsuccessful in the attempts to decrease the other person's anger. The listener's safety should be the primary concern. The listener should not get between the angry person and his or her only means of escape and shouldn't allow the angry person to block the listener's only means of escape.

Anyone intervening in an emotionally charged situation should always have a plan or an established way to get help if needed and remember to always stay calm. An angry person is generally someone capable of getting out of control. When out of control people sense they are intimidating and scaring others, it can increase their sense of power and control, resulting in an escalation of the situation. The helpers must stay calm and act as if they are in control of themselves and the situation.

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Should you want Coaching for Excellence to provide staff development for your employees in de-escalation skills, simply contact Kim at 708-957-6047, e-mail her at Kim@CoachingforExcellence.biz or log on to the website at http://www.coachingforexcellence.biz.

Kim Olver has an undergraduate degree in psychology, a graduate degree in counseling, is a National Certified Counselor and is a licensed professional counselor. Since 1987, Kim has extensively studied the work of Dr. William Glasser's Choice Theory, Reality Therapy and Lead Management. She was certified in Reality Therapy in 1992 and continued her studies to become a certified instructor for the William Glasser Institute. She is an expert at empowering people to navigate the sometimes difficult course of life---teaching them how to get the most out of the circumstances life provides them. Her website, http://www.CoachingforExcellence.biz, offers free chats, assessments, a blog and an eZine, as well as workshops, teleclasses, e-courses, counseling and coaching. Visit her website at http://www.CoachingforExcellence.biz or contact her at (708) 957-6047.

Dealing with Anger – Tips on How to Cope

How many times have you had someone walk into your office red-faced with steam coming out of both ears looking for answers or action on a particular issue? Your initial reaction may be to hide under your desk or lock yourself in the closet, but you'll have to come out for air sometime and that person will still be there. Instead or running for cover, consider these tips to help diffuse anger in others and better manage a difficult situation.

Ways to Diffuse Anger in Others

- Acknowledge that their issue is important to them.
- Treat the person with respect.
- Use reflective listening, paraphrasing their concerns so they know that you're listening.
- Take notes.
- Use humor, if appropriate.
- Don't patronize by using professional jargon.
- Tell them exactly what you are going to do about the problem and follow through. Don't promise more than you can deliver.
- Model the behavior and attitude you want them to exhibit.
- Sit down, lean forward, and maintain and open stance to indicate interest.
- Speak softly and slowly.
- Never raise your voice.
- Make eye contact, but don't stare. Starring can be perceived as aggressive.

Reflective Listening Techniques

- Totally focus on what the person is saying.
- Paraphrase in your own words to check for accuracy.
- Don't think about your own response while the other person is talking.
- Make eye contact.
- Use body language that projects acceptance.
- Use a calm tone of voice and speak slowly.
- Avoid being defensive by explaining your position.
- Don't interrupt.

Some Steps to Follow when Feeling Attacked

- Take time to breathe deeply and to feel yourself relax.
- If the other person generates feelings of fear or anger in you, recognize and accept these feelings.
- Continue to breathe deeply as you continue to relax. This will help buy time, increasing your chances of responding in a calm rather than aggressive way.
- Take time before verbalizing your response. This helps you maintain control of yourself and the situation. (Proactive vs. reactive)
- Affirm your belief in yourself. Accept the fact that there may be some truth in what the other person says. Remember, you don't have to be perfect, be right all the time, or have all the answers.
- See the situation as an opportunity to learn and grow rather than getting defensive. If you allow it, your critic will provide you with more information about yourself and about him or herself.
- Try to put yourself in the other person's position.
- Stay focused on a common solution that benefits you and the other person. Time and energy are wasted proving someone is right or wrong. Keep refocusing this concept during the entire process. This helps diffuse feelings of fear and anger and keeps you focused on problem-solving and often develops mutual trust.

Source: *Building School Communities—Strategies for Leaders,* B.J. Meadows & Marilyn Saltzman, Fulcrum Publishing, Pp. 95-97.

Addressing Challenging Behaviors

1. What does "behavior" refer to?

2. What is "difficult" behavior? (Give some personal examples.)

3. List the four general areas of possible causes of "difficult" behavior and give an example:

   a. _____ _____

   b. _____ _____

   c. _____ _____

   d. _____ _____

4. For what reason do people use "manipulative" behavior?

5. Give some examples of "acting-out" behavior:

   a. _____ _____

   b. _____ _____

   c. _____ _____

   d. _____ _____

   e. _____ _____

6. What are the two primary elements of a positive relationship when working with clients/ residents?

   a. _____

   b. _____

7. List some broad categories of how to address "difficult" behaviors and give an example:

   a. _____ _____

   b. _____ _____

   c. _____ _____

   d. _____ _____

   e. _____ _____

8. List possible intervention steps to help diffuse anger:

   a. _____

   b. _____

   c. _____

   d. _____

   e. _____

9. What are some words to avoid when problem-solving?

   a. _____

   b. _____

   c. _____

   d. _____

   e. _____

True or False:

1. ___ Slamming doors would be considered a "behavior".

2. ___ If we say that a client/resident is "argumentative", that would be considered a label.

3. ___ We "personalize" behavior when we believe that the client/resident did a particular act specifically to spite us, e.g. left candy wrappers laying on the sofa in the lobby.

4. ___ We "emotionalize" behavior when we "react" to another person's behavior, e.g. if a person calls us a name, we react back and start calling him/her names.

5. ___ It is best to stand over clients/residents when you are talking with them so that they know you are in charge.

6. ___ Mutuality in a relationship means that the two parties involved strive to view each other with equal regard and allow for a free flow of information between them.

7. ___ Choosing "anger" (yelling loudly) as a behavior can help people escape from things they don't want to do.

8. ___ During the problem-solving/decision-making process, two-way communication is an effective method of communicating with people.

9. ___ Acknowledgment means that we strive to hear what the person is saying as well as sense the emotion underlying the words the person is using and then comment on their situation.

10. ___ Fatigue may be a cause for acting-out behavior.

11. ___ The goal of "active listening" is to try to understand the other person from his/her vantage point.

12. ___ "Alcohol abuse, talking to self, and over-eating" are examples of acting-out behavior.

13. ___ Over-stimulating a person by talking a lot may escalate a volatile situation.

14. ___ To assess if someone is using manipulative behavior, we may ask, "Does the behavior continue despite requests to stop?"

15. ___ Sitting down, leaning forward, and maintaining an open stance to indicate interest, may help to diffuse anger.

16. ___ Understanding the "feelings" of another person during the problem-solving/decision-making process is not important. Focus only on the problem.

17. ___ An unstructured environment, such as a disruption in agency routine, may be a cause for acting-out behavior.

18. ___ The goal of all staff is to promote self-sufficiency in clients/residents.

19. ___ During the problem-solving/decision-making process, the listener should ask the speaker "why" as often as possible to better understand the situation.

20. ___ Before entering into an "angry" situation, we should ask ourselves, "Can I keep from trying to control the other person; can I avoid trying to coerce him/her into doing something s/he doesn't want to do?"

21. ___ Most people want advice and we should help them with their problems.

22. ___ "Using Silence" is an example of an Interpersonal Technique that may enhance the communication process.

23. ___ When working with a person with a mental illness, we should avoid being offended by strong language.

24. ___ Talking with a person in an environment that is free of distractions my help to de-escalate a volatile situation.

25. ___ We should always try to avoid arguing with a client/resident.

26. ___ A Service Agreement may be one form of addressing "acting-out" behavior.

27. ___ Imposing our personal agendas on a client/resident would be a violation of a positive relationship.

28. ___ We should always avoid using labels when noting the behavior of clients/residents.

29. ___ A good Log Book Entry may be "Resident reported he was ill and had chest pains."

30. ___ A good Progress Note may be "Client never cooperates and makes everyone mad."

31. ___ Starting sentences with "No" or "I think" are usually inappropriate.

32. ___ It is the responsibility of Property Managers and Case Managers to work together to address individual client/resident behaviors.

33. ___ An example of when to refer a resident for supportive services may be when the "resident was observed to be using alcohol and drugs."

34. ___ A cardinal rule of active listening is "Do not make assumptions!"

35. ___ Observing clothes laying on the floor of a resident's unit would not be reason for referring for supportive services.

36. ___ When we do for others what they can do for themselves, we disempower people.

37. ___ Taking time to think about your response is an example of a "proactive" behavior.

38. ___ We should tell clients/residents about our own personal difficulties in life so that they can better relate to us.

39. ___ Making moral judgments about clients/residents and their situations is an example of imposing our personal agendas upon them.

40. ___ The Property Manager is the primary person responsible for addressing resident concerns and resolving various issues.