Challenging behavior – discourse and interaction at residential homes.

An institutional ethnographic intervention in problematic interactions

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The ethnographic **problematic**

The ethnographic problematic recognizes the real interpenetration of the present and immediate with the unknown elsewhere and elsewhen and the strange forms of power that are at once present and absent in the everyday. A problematic is a territory to be discovered, not a question that is concluded in its answer. Exploration opens up an institutional complex, as it is relevant to the problematic. *In opening up an institutional complex it participates in institutional ethnography's more general discoveries of the workings of institutions and the ruling relations in contemporary western societies"*

(Dorothy E. Smith 2005: 41)

Challenging behavior – definitions and discourses.

Challenging behaviour is any kind of behaviour that might threaten, violate or hurt staff members when these are accomplishing their job functions.

People with developmental disorders, dementia, retardation and certain kinds of traumatic brain injuries are not always aware of the effect of their behavior.

Two dominant discourses gives two different reasons for people reacting aggressively:

1. They feel threatened and react out of fear or anxiety.

2. They feel stressed and act impulsively on minor demands.

Brain functions in a neuro-sociological perspective
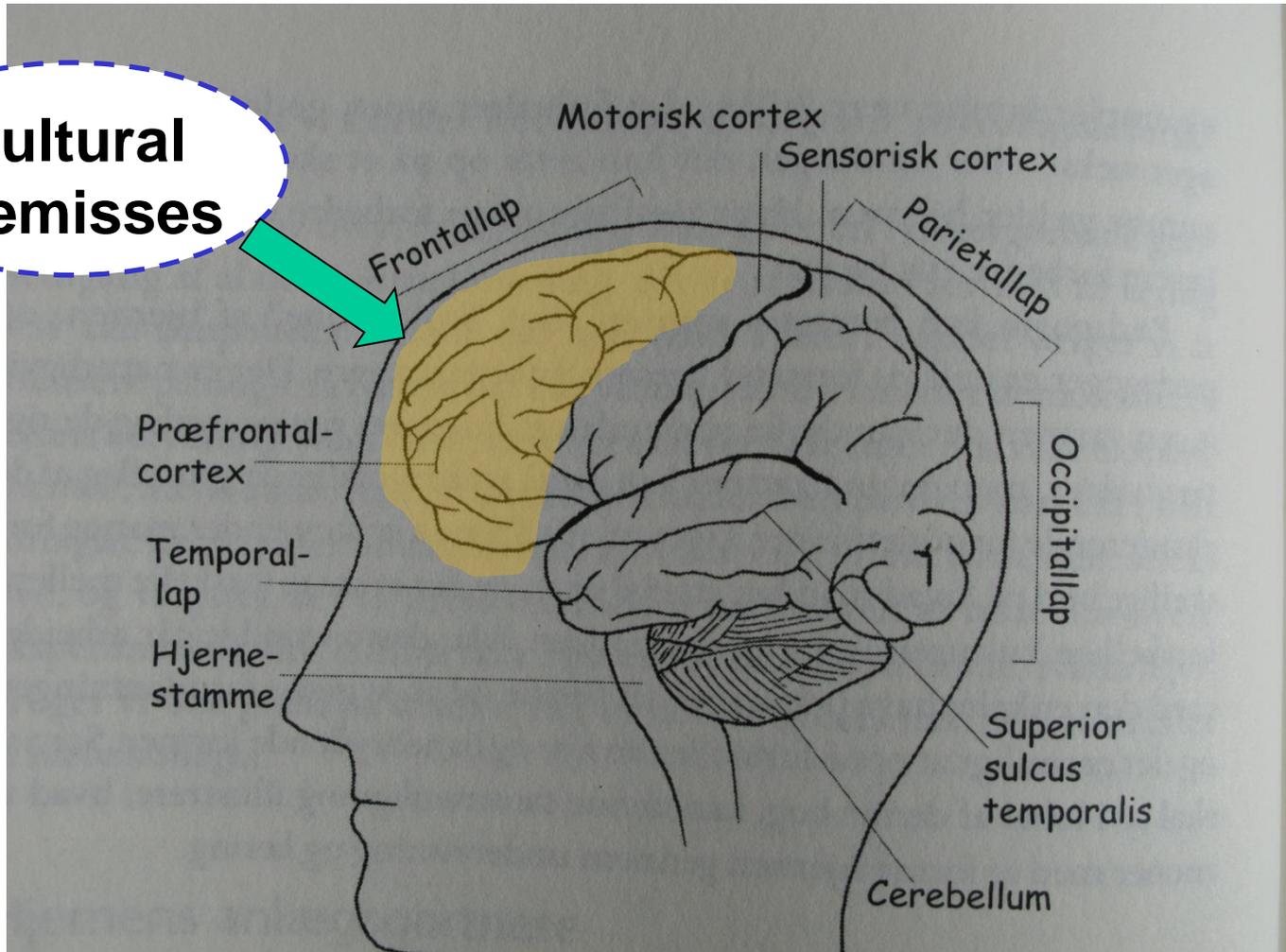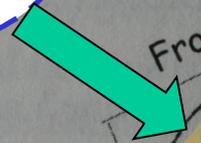
Cognitive issues

1. When the map does not fit with the terrain.

    1. The structure of time and space

    2. The mental map and the factual situation

    3. The reaction referring to the map becomes incomprehensible when looking at the situation.

    4. The black spots of the memory

        1. Black spots hits different elements from the one situation to the other

        2. The feelings goes from sorrow to joy to anger to anxiety.

        3. The significance of the context

2. Maintenance of body language and ability to read it.

3. Maintenance of feelings and sentiments.

4. Maintenance of musical, visual and smell related memories.

5. Maintenance of social expectations.

The emotional implications: Stress, uncertainty, anxiety, anger, sense of guilt, loneliness, nostalgia.

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Challenging behaviour experienced by staff members

2. Have you experienced the following reactions from the residents during the last four weeks ? (% of N=81)					
	Several times a day %	A couple of times a week %	A couple of times every month %	Seldom %	Not at all %	I alt %
Kick	-	15	21	30	34	100
Knocks	6	19	32	23	19	100
Naps/Scratch	3	21	23	26	27	100
Push	4	14	15	32	34	100
Spit on	-	3	6	39	52	100
Bites	-	-	-	24	76	100
Tearing the hair	-	1	6	27	65	100
Tearing the cloth	7	15	34	20	24	100
Being restrained	1	10	10	32	46	100
Throwing objects	4	7	16	40	33	100
Being butted	-	4	3	19	73	100
Choke hold	-	-	-	9	91	100
Sexual touch	-	1	4	14	80	100
Physical threads	4	8	26	29	33	100
Verbal threads	7	26	38	13	16	100
Devaluating expressions	12	29	28	16	15	100
Verbal sexual harassment	-	-	10	26	64	100
Self harming behaviour	4	18	11	27	39	100
Violation of rules	6	14	25	28	27	100
Damage to furniture	3	10	24	36	28	100
Shitting flours and walls	32	23	23	14	8	100
Hurting fellow residents	1	11	28	34	26	100
Inexpedient rituals	32	25	12	22	10	100

Challenging behaviour – professional strategies

Reducing the magnitude of different stimuli.

Making the daily schedule simple and recognisable.

Ensuring that interaction with staff members follows strict guidelines.

Compensational communicative support

1. Keep the conversation going.
2. Maintain the structure of everyday life in time and space.
3. Regulate the movement pattern in social space
4. Support recognition
5. Try to correct the interpretation of social situations (boyfriend/husban)
6. Meta-communication – express the rules of communication
7. To link and refer to what is strongly represented in the memory (nature experience, history, music)

Basic professional skills

1. Being able to decode the expressions of the residents
2. Being able to find the correct balance between needs for caring and autonomy.
3. Being able to master meta-communication:
    1. The professional perspective
    2. The user perspective
    3. A play with different perspectives
    4. Humour

Shielding

1. Protect the residents from hurting other residents
2. Protect the residents from being hurt by other residents
3. Protect residents from overwhelming stimuli
4. Protect residents from memories that gives them stress
5. Protect residents from complicated choices

The difficult decision between shielding, motivation, autonomy and self-determination

Professional ecology

9. How is your situation in general in relation to the residents? (% af N=81)						
	Allmost allways %	Often %	Somme times %	Seldom %	Never %	total %
How often do you feel mentally stressed?	-	10	46	40	5	100
How often do you think: "I cannot make it any more"?	-	5	19	46	31	100
Do you feel exhausted in the morning when thinking of another day at the job?	1	1	24	38	36	100
Do you feel worn out when the day has finished?	4	15	47	28	6	100
Do you have a surplus of energy to be together with family and friends?	36	36	22	6	-	100
Do you feel that it is awfully disstressing to work with the residents?	-	6	29	51	15	100
Do you feel that it is frustrating to work with the residents?	-	3	22	56	20	100
Do you sometimes have serious doubt about your ability to continue this kind of work?	-	7	19	32	42	100
Do you worry about the problems at work during your spare time?	1	13	26	48	13	100
How often do you think that it was really the right job you got?	13	44	30	10	3	100
How often do you think that your work is professionally satisfying?	14	52	30	5	-	100

Reactions to challenging behaviour

4. Do you recognise some of these instant feelings when the resident react this way? (% af N=81)

	Almost always %	Often %	Some times %	Seldom %	Never or almost never %	I alt %
Anciety/insecurity	1	3	24	41	31	100
Anger towards the residents	-	-	19	37	45	100
Helplessness	1	14	42	29	14	100
Frustration	-	24	46	20	10	100
Regret	-	7	41	32	21	100
Give up	-	3	19	37	41	100
Offended	1	4	18	34	42	100
Feeling professionally challenged	9	44	35	10	3	100

Stress and transformation of focus

*I: Do you all agree about how to approach her? How to help her?*

Staff: Yes, generally we do. Also when she beats us, if we don't do the things that prevents her from beating us or hitting us at least, stand beside her and wait or stand really close or keep her hand while you feed her. If you don't do that, the result is that she is hitting us and we are getting mad at her, and she does not deserve that because we actually know what to do that prevents her from hitting us. So no one is to be blamed, and we always think this way. Not so much because I cannot stand a few chats, but I do not want to have her regarded as a violent person, because she does not deserve that. She just cannot do anything about it.

This explanation seems overwhelmingly tolerant and it is, but it is more important that it represents a professional transformation of the focus from emphasising the instant behaviour to emphasising the life-world behind. Then curiosity replaces fear and anxiety.

1. Conflicts, violence, risk and psychological strain.

1. How to meet the challenges
   1. Individual strategies
   2. The personal-professional habitus
   3. Support from colleagues, leaders and supervisors
   4. Doxa, heterodoxi and dissidents
   5. Structural issues
2. The relation between pedagogy, education, practice and personal strain
   1. Does some of our ways of meeting the challenges support the conflicts?
   2. Does some of our pedagogical principles violate the limits of professional or mental ecology?

Problematic: When strategies for preventing challenging behaviour exacerbate challenging behaviour

A. Conflicts

B. Psychological strain on staff members

C. Professional discourses, structure and physical environ-ment.

D. Residents feeling isolated and frustrated

E.
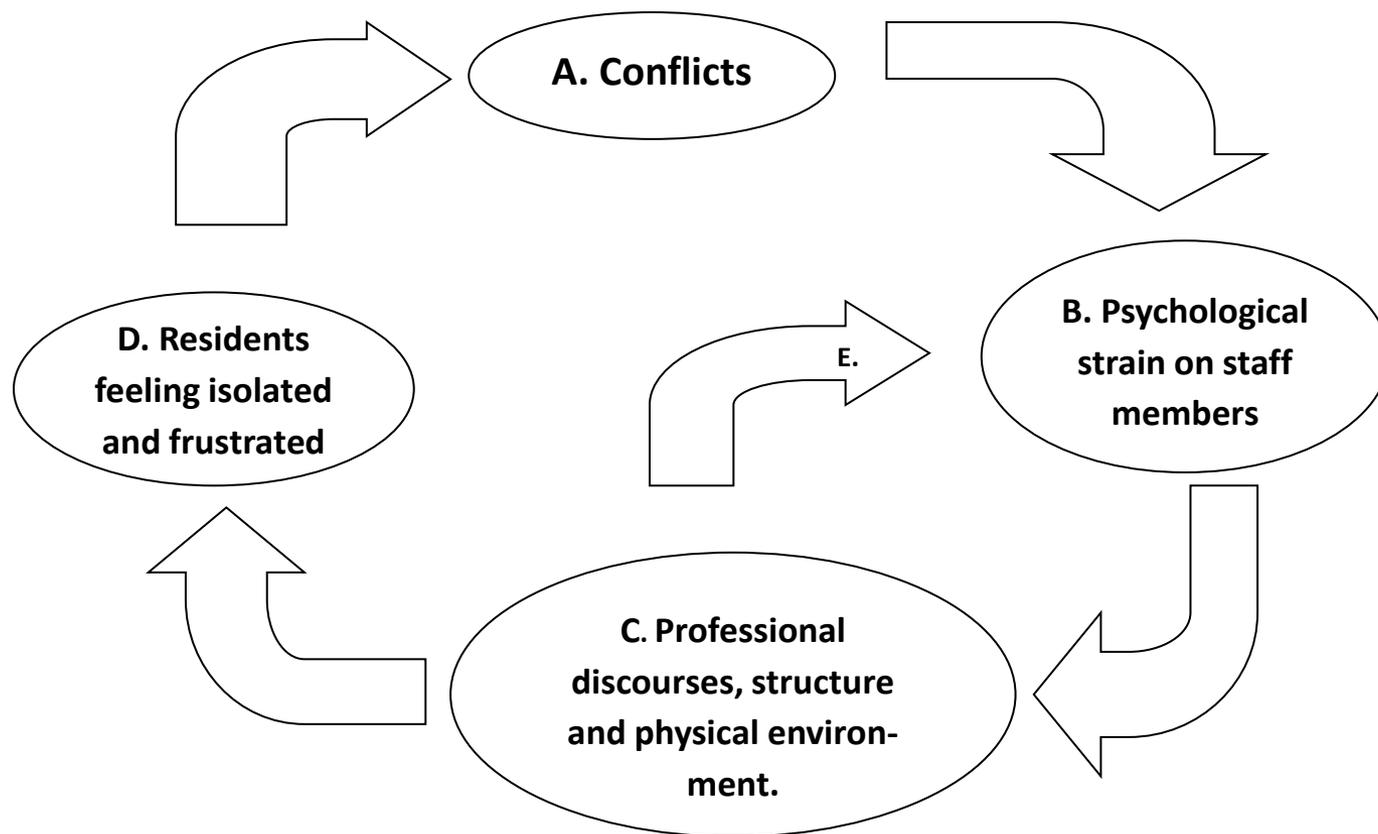
A critique of structural pedagogy

An undue focus on structural regulation, reduction of stimuli and coordination of staff member attitudes and interaction might lead to:

1. Further strain on the staff members because they have to stick to rules they do not understand or with witch they do not agree.
2. The residents might react on the closed structure with a kind of rebellion or resistance.
3. The residents might experience an unpleasant distance to the staff members.
4. Some kind of challenging behaviour might be interpreted as an effort to get in touch.
5. Some kind of challenging behaviour might be interpreted as a reaction to a boring monotonous every-day life.

4. Governance

1. The market for social services
    1. Competition
    2. Payment
    3. Measures of efficiency

2. The accreditation system (sociale tilsyn)
    1. Premises
    2. Resources
    3. Form and function

3. Developmental issues
    1. Regulating education, training and supervision
    2. Developmental programs
    3. Research

Trans-local conditions

1. Residential homes are offering accommodations on an open market. The customers are the local authorities.
2. Similar residential homes are both partners and competitors.
3. Premises for referral of clients from local authorities are unclear.
4. Premises for specialising/target group is unclear.
5. Premise for accreditation/inspection are unclear.

Which leads to:
1. Uncertainty about staffing and recruitment.
2. Efforts to share knowledge and specialise competences are being violated.
3. Performance management og alliances disguises an open dialog about qualifications.
4. Staff members are being strained by unclear demands for qualifications
5. Critique and recommendations from the inspection contradict professional and political priorities which leads to inconsistent managerial decisions.

The influence of trans-local factors

The local field

Supply

Target group

A lifeworld with cognitive disabilities

Function?
Strain?

Inspections
Accreditations

Conduct
Supervision
Post. grad. education

Professional compensation
Specialised competences
Collaboration

Local demands

Regional Demands
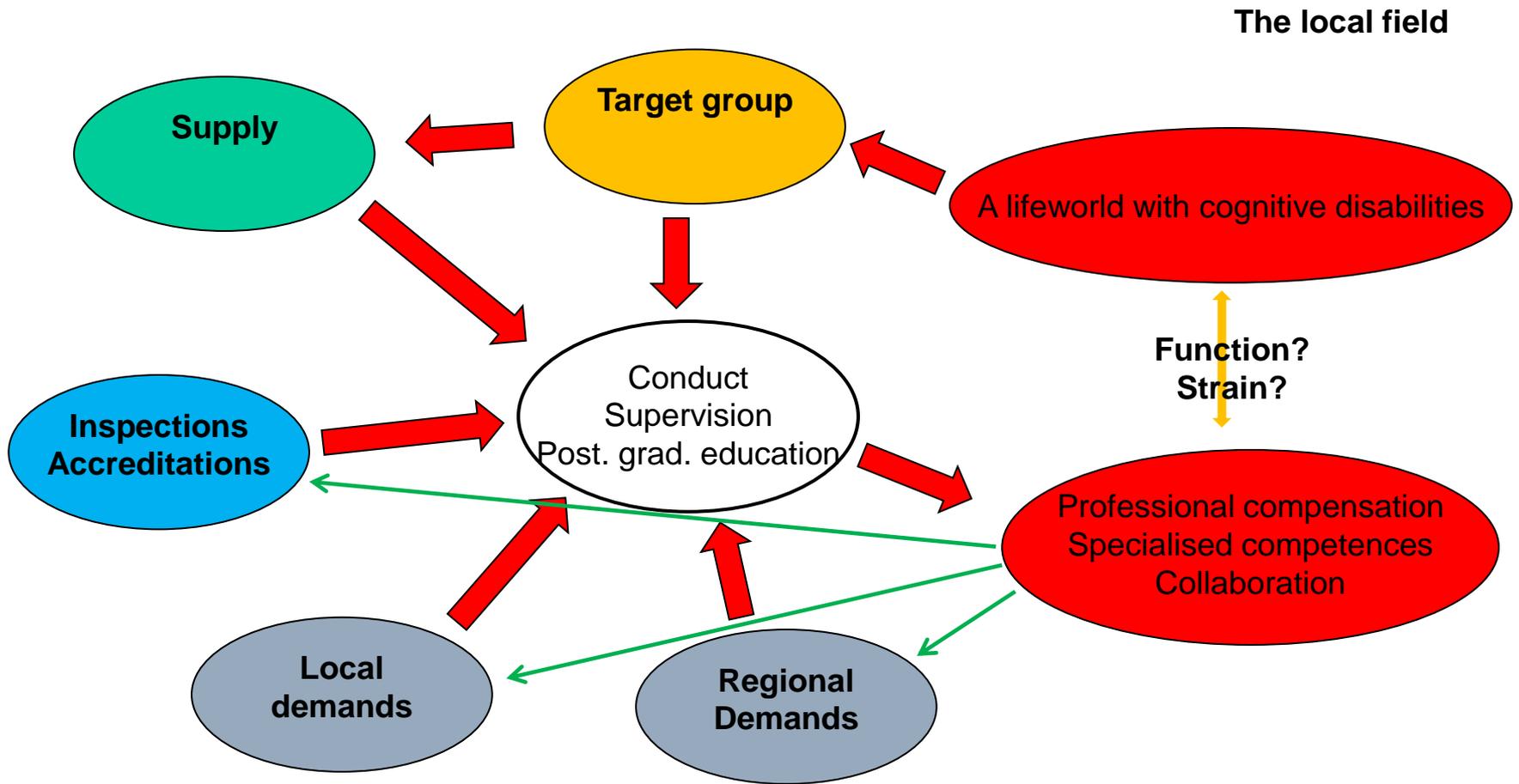
The trans-local field

Activities

1. Quite a huge number of research projects addressing the problems of residential homes for people with intellectual or cognitive difficulties. Financed by three regions and the ministry of social affairs.

2. Two ph.d. projects running.

3. Book projects

    1. Reports

    2. Comprehensive books

    3. Books for bachelor education

4. A membership of the Ministry's expert network for a strategy to prevent dangerous conflicts at residential homes.

5. An influence on the 2025 public research strategy through our contact with the regions.

Still many half-solved or unsolved questions.

Impact: Changes in discourses

1. From structural pedagogy to a broader focus on interaction and meaning.
2. From a demand for a consequent action following any unacceptable behavior to
   1. an emphasis on the background and reasons for such a behavior
   2. a focus on the lifeworld of residents
   3. an acceptance of each staff member having his/hers own relation to the different residents
   4. a recognition of *personal* professional competences
   5. an acceptance of staff members having different personal boundaries
   6. a recognition of the significant balance between heterodoxy and orthodoxy
   7. a recognition of the important role of dissidents within the organisation
   8. an emphasis on resident activities and a greater variety of experiences.

A change in the premises for the conduct of professional social work.