Dealing with difficult behaviour

Many carers of people with mental health problems are concerned about how to respond to the person who is unwell. What boundaries should they set and what should they consider to be acceptable and unacceptable behaviour?

When someone is very upset or angry they will often take this out on themselves or on the people closest to them. These situations can be difficult to handle and families and carers can feel powerless to defuse them. There are, however, a number of useful tips that have been developed through practice and experience. The following tips have been compiled with grateful thanks to carers themselves, Rethink and mentalhealthcare.org.uk:

At the time…

1. **Count to ten:** Before you react to the situation count to 10. As you do this, assess the situation and decide on the best course of action. People who are unwell or distressed are often frightened and need someone else to take control. If you become upset, the individual may feel unsafe and this can escalate the situation further.

2. **Body language:** People are very good at reading body language and if your body shows that you are stressed or angry, the person you care for will pick up on this. Avoid aggressive stances such as clenched fists, folded arms, pointing or staring. Try to adopt more neutral or positive positions such as keeping your hands in sight, making eye contact and smiling. Try to avoid showing anxiety, even if you feel it, as this can increase the person’s agitation.

3. **Space:** Most people, whether ill or not, do not like to have their personal space invaded and will become aggravated if they feel crowded. Give the person space. Do not corner them, but stand at arms length. Space can also be important in preventing an aggressive outburst. Ensure you respect the person’s privacy. Knock on their door before you enter and try to avoid asking probing questions.

4. **What you say and how you say it:** Avoid put downs, sarcasm, and jumping to conclusions. Unwell people often have very low self-esteem and a heated response will only make the situation worse. Be aware of the tone, pitch, and volume of your voice.

If someone is shouting it is tempting to shout back. However, the reverse is also true and if you speak to the person in a soft tone they will find it difficult to keep on shouting. Use positive humour where possible as this can defuse many situations.
5. **Physical contact:** Be aware of how and when you touch someone. Avoid sudden movements and do not grab or grip people. Avoid touching the back of the neck or any other areas where you know the person does not like to be touched. Do not try to restrain the person.

6. **Empathise and sympathise:** If the person is distressed about something it is unhelpful to tell them they are being silly or irrational, or to ignore their distress. Try and empathise; put yourself in their shoes and tell them if you would feel the same in their situation. Similarly try and sympathise with their experience. They may be well within their rights to feel angry or distressed so it can be helpful to show that you understand.

   If you cannot understand what is upsetting the person, or feel that it is the illness talking, you can use general phrases such as ‘lots of people feel that way when they are ill’, and ‘you are not alone in thinking like that’, so that you still sympathise with what they are saying. It may also be beneficial to discuss what you/they could do to address the problem.

7. **Take threats seriously:** If the person is threatening violence to themselves or to you, do take it seriously. Give a firm command to ‘stop’ and ask for weapons to be put down, not handed over. If the behaviour continues, leave the room or if necessary the house. You can phone before you return home to check the situation is calm. It is important that you seek help, so contact the care team of the person you care for or the police.

8. **Venting:** If someone is able to talk about something, let them keep going. Facilitate this by asking open ended questions (not ones that require a yes or no answer). When someone has the opportunity to vent they will often calm down independently.

9. **Split an argument:** If you are observing an argument it is better not to get involved yourself. If you can take one person into a separate room for a chat, do so. If not, try to get both people talking to you rather than at each other. By not joining in arguments you can prevent escalation and will become ‘safe’ to the stressed individual.

**After the event and day to day…**

10. **Discuss the behaviour:** Whatever the behaviour, from violence to inactivity, discuss the problem with the person you care for and the care team. It is important for the team to be aware of behaviours you are coping with and whether you feel at risk. The team may be able to suggest some practical strategies that you can use.

   Discuss the behaviour with the person you care for and with other people involved. Each family will have their own way of dealing with things and there is often no right or wrong way to handle situations. It is important to try to find a solution that works for you all and it may be worth drawing up a plan that everyone can stick to. Take note of things that don’t work so that you don’t use these again

11. **Set clear limits:** It is essential to set clear limits on what you will and won’t accept. Violence or aggression is never acceptable and these issues should be discussed
openly with the family and with the care team. Try to ‘debrief’ after an incident - discuss what happened and why. The person you care for may feel guilty about their behaviour and this can lead to even lower self-esteem and resentment if it is not addressed. It is far better to discuss the incident openly and repeat what you will not accept.

12. Get to know the signs: There are usually signs that someone is becoming tense or angry, for example facial expressions or pacing about. It is worth learning to recognise these signs in the person you care for, so you can intervene before the situation escalates.

13. Get to know the triggers: There may be certain events or situations that trigger aggression in the person you care for. It can be helpful to think back to recent outbursts and see if you can identify any common triggers. Some people find it helpful to keep a diary to record patterns of behaviour. If you are able to understand the behaviour and its causes, it may increase your confidence and help you to prevent a re-occurrence.

14. Separate person from illness: If you are able to understand what part of a person’s behaviour is illness and what part is their personality, you may find them easier to deal with and not take things personally. It may also help you to decide what behaviours you will tolerate. For example, you may be able to tolerate them shouting in response to voices, but not accept shouting at someone in anger and frustration.

15. Self awareness: If you are in a bad mood you may react more strongly to things that would not usually matter. Being aware of your mood will help you to adjust how you react to the person.

It is important to be honest, so do not pretend you are happy when you are not. The person is likely to see through it, so it is better to explain that you are in a bad mood and explain why.

16. Environment: Think about how your environment may be affecting the people living in it. Sensitivity to colour, noise, and temperature can all have an effect on people’s mood. Some homes have areas where tensions seem to come out. Think about making some practical changes such as muting the colour schemes and creating space to make the area feel calmer. It may be worth creating a quiet space in your house where an individual can go to ‘chill out’.

17. Accept Change: It is helpful if you can come to accept that your life has changed, at least for the time being. Holding onto resentment - and to how your life used to be - may increase the guilt felt by the person you care for and will not allow any of you to deal with the current situation. If a problem arises, be prepared to deal with it there and then, even if it means inconveniencing other people.

18. Help for yourself: Even if you manage to deal with outbursts as they happen, you may find that you become run down and distressed over time. You will not be in a position to help the person who is ill if you are feeling stressed yourself, so it is important to find ways to help you cope. Many carers benefit from having someone to talk to about their situation. For example, a family member, friend or carers worker. Make sure you pursue
your own interests and hobbies and take breaks from your caring role. Ask the care team for a carers assessment and for the support you feel you need.

Further reading:

Further tips and hints for dealing with issues such as self harm and suicide, embarrassing or risky behaviour, over dependence, substance misuse and more can be found on www.rethink.org.uk or on www.mentalhealthcare.org.uk

There are also three excellent books that contain information on all aspects of caring for someone with a mental health problem including coping with difficult behaviours. These can be purchased online, or ordered through a bookshop:


The Carers Perspective on Mental Illness in the Family. Margaret Branch (a carer). Available from Margaret on 01392 279 617 price £2 to carers.

If you would like to talk through your concerns with someone you may find it helpful to talk to the care coordinator of the person you care for, or contact your local carers worker or carers centre.

Bexley
Mental health Carers Support Coordinator: 01322 554 181
Carers Support Bexley: 020 8302 8011
Bexley Carers Services: 01322 338 582

Bromley
Mental Health Family/Carer Service Coordinator: 020 8467 9436
Carers Bromley: 01689 898 289

Greenwich
Mental Health Carers Support Worker: 020 8269 4168
Greenwich Carers Centre: 020 8301 8677