

# MEETING THE CHALLENGE



CARL SEVER, MA, LPC

WITH TRISH YOUNG, PSYD, LPC, & ROY SMITH, PHD, MDIV

LiveUpResources.com | 1-800-777-0305 | info@liveupresources.com

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What are some of the warning signs for occurrence of aggression or disruptive behavior in the shelter?

- o Individual may be intoxicated
- o The resident may be going thru active withdrawal
- o Individual may be in active psychosis
- o Extreme emotions like fear, paranoia, or anger are being experienced
- o Person may be in severe pain
- o Person may be disoriented as a result of a medical condition like diabetes or epilepsy
- o Resident may be in fear of victimization by other residents
- o Note; Usually a combination of factors lead to acting out behavior being displayed  
Source: Signs of impending violence: Recognizing Trouble before it begins. Denis M. Meade, EMTP. Director Pre hospital Services/Education, Aurora Medical Center

What are some of the more personal cues that may signal aggressive or disruptive behavior?

- o Facial expressions like clenched jaw, grinding teeth, prolonged staring, “murder ones”, frowning, scowling, tongue movements, squinting, open mouth, flaring nostrils, shaking head, and targeting a particular part of your body via a stare
- o Note rapid bodily movements like hand gestures, movement of arms rapidly, standing in an aggressive posture, leaning into personal space, violating other’s personal space, clenching fists
- o Verbal signs may include raising volume, or rapidly raising and lowering volume, mumbling, making threatening comments at any volume, speaking in gibberish, blaming others, being argumentative, insulting others, making implied or direct threats

What are some of the warning signs for a resident who may be at the point of committing an act of self-injury?

- o Scars, often in patterns
- o Fresh cuts, scratches, bruises, bite marks or other wounds
- o Excessive rubbing of an area to create a burn
- o Keeping sharp objects on hand
- o Wearing long sleeves or long pants, even in hot weather
- o Frequent reports of accidental injury
- o Difficulties in interpersonal relationships
- o Behavioral and emotional instability, impulsivity and unpredictability
- o Statements of helplessness, hopelessness or worthlessness

Source: Mayo Clinic Patient Care and Health Information

What are some of the warning signs for a resident who may be at the point of committing a suicidal act or gesture?

- o Talking about suicide — for example, making statements such as “I’m going to kill myself,” “I wish I were dead” or “I wish I hadn’t been born”
- o Getting the means to take your own life, such as buying a gun or stockpiling pills
- o Withdrawing from social contact and wanting to be left alone
- o Having mood swings, such as being emotionally high one day and deeply discouraged the next
- o Being preoccupied with death, dying or violence
- o Feeling trapped or hopeless about a situation
- o Increasing use of alcohol or drugs
- o Changing normal routine, including eating or sleeping patterns
- o Doing risky or self-destructive things, such as using drugs or driving recklessly
- o Giving away belongings or getting affairs in order when there’s no other logical explanation for doing this
- o Saying goodbye to people as if they won’t be seen again
- o Developing personality changes or being severely anxious or agitated, particularly when experiencing some of the warning signs listed above

Source: Mayo Clinic Patient Care and Health Information

Use the “SEE” Technique:

Search

Evaluate

Execute

Learn when to “Triage”

Become a “Solid Object”

What are some tools I can use to help calm a person about to become aggressive or disruptive?

- Obtain the name of the person with who you are speaking
- Use Active Listening
- Slow down and suspend judgement.
- Get them to say yes
- Don’t use clichés
- Show empathy
- Consistency in Courtesy

Source: Scott Taylor, Security Solutions; August 2014

Communicate in an honest, direct, kind, and when necessary firm fashion

Move the person away from the audience into a safe space

Don’t be afraid to ask for help

Help the resident develop a plan to remain calm

How can I assist a person who may self-harm or commit suicidal act?

Start by asking questions. The first step is to find out whether the person is in danger of acting on suicidal feelings. Be sensitive, but ask direct questions, such as:

- How are you coping with what’s been happening in your life?
- Do you ever feel like just giving up?
- Are you thinking about dying?
- Are you thinking about hurting yourself?
- Are you thinking about suicide?
- Have you ever thought about suicide before, or tried to harm yourself before?
- Have you thought about how or when you’d do it?
- Do you have access to weapons or things that can be used as weapons to harm yourself?

Asking about suicidal thoughts or feelings won’t push someone into doing something self-destructive. In fact, offering an opportunity to talk about feelings may reduce the risk of acting on suicidal feelings.

When is it time to call 911?

You can't always tell when a loved one or friend is considering suicide. But here are some common signs:

- Talking about suicide — for example, making statements such as “I’m going to kill myself,” “I wish I were dead” or “I wish I hadn’t been born”
- Getting the means to take your own life, such as buying a gun or stockpiling pills
- Withdrawing from social contact and wanting to be left alone
- Having mood swings, such as being emotionally high one day and deeply discouraged the next
- Being preoccupied with death, dying or violence
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For immediate help

If someone has attempted suicide:

- Don’t leave the person alone.
- Call 911 or your local emergency number right away. Or, if you think you can do so safely, take the person to the nearest hospital emergency room yourself.
- Try to find out if he or she is under the influence of alcohol or drugs or may have taken an overdose.
- Tell a family member or friend right away what’s going on.

If a friend or loved one talks or behaves in a way that makes you believe he or she might attempt suicide, don’t try to handle the situation alone:

- Get help from a trained professional as quickly as possible. The person may need to be hospitalized until the suicidal crisis has passed.
- Encourage the person to call a suicide hotline number. In the U.S., call the National Suicide Prevention Lifeline at 800-273-TALK (800-273-8255) to reach a trained counselor. Use that same number and press “1” to reach the Veterans Crisis Source: Mayo Clinic Patient Care and Health Info

Be aware of the importance of communicating to shelter staff. Some times staff in one room may not be aware of what is going on in the other shelter areas.

Never underestimate the value of “Honest Love and Concern” for another “Human Being”

What ideas can we teach our residents to make our recovery environment safer?

We look out for each other

- o We know the difference between squealing and honest love and concern for others
- o We alert staff to dangerous situations
- o We don’t keep secrets from staff
- o We follow house rules
- o What we don’t say can hurt others
- o We do our best

Never underestimate the value of prayer