BEHAVIORAL STIMULUS II:
Celebrating Success and Planning the Move Forward

May 7th, 2020

To all the people I serve and those who serve them,

THANK YOU FOR A JOB WELL DONE!

Approximately seven weeks ago, we entered a period in which everything we do was greatly altered. So many people worried about the disaster that was about to happen. What a disaster it would be - anxiety off the charts leading to behavior off the charts leading to massive staff walk-outs. A real disaster was in reasonable view, but.......

What actually happened was not a disaster......

NOT EVEN CLOSE!

Here is a summary of what happened for the people I served:

- I did observe a spike in incident reports in late March and early April, but have seen a significant decrease over the last three weeks.
- There were two emergency interventions for behavioral reasons that led to ER visits. No hospitalizations and both individuals have returned to baseline.
• My phone check-ins with my individuals have been largely unremarkable. Not that there have not been issues to process, but our direct care staff have dealt with them effectively without major crisis - certainly not above baseline. This is a general statement based on my following evaluation:

Above baseline: 4  At baseline: 15  Below Baseline: 3

* This is actually below what I normally expect during "business as usual". Normally I anticipate 30% of my individuals will be above baseline (7-9).

**WHY, HOW DID THIS HAPPEN?**

I can't say for sure - I was not a mouse in the corner observing, of course. But I would venture to guess that a lot of it had to do with great teamwork, both among direct care supports and the staff who support them. There continued to be excellent communication - my e-mail and cell phone did not "go dark" as I expected - what a present surprise! I expect that you all took some principles that I put out in Behavioral Stimulus I to heart:

1. **Providing service and support is something we do**
   *With people and not to people*

2. **The best control of any situation you can ever have....**
   *Is your own Self-control*

3. **STRESS increases SYMPTOMS, and SYMPTOMS increase BEHAVIOR**

4. **Just because we are isolating....**
   *Doesn't mean we need to be isolated!*

Indeed, you all worked together and....

**CREATED the New Normal**

So again.......

**THANK YOU FOR A JOB WELL DONE!**
However, this is no time for a victory lap

Please take a moment to pat each other and yourself on the back. That is important. However, what lies ahead of us will be just as challenging.....

Returning to Normal will be Just as Stressful!

I do not have a crystal ball and I do not know when we return to normal or how. But I do think it is in our sights and we need to prepare. I think it is pretty logical to expect that we will not return to the "old" normal immediately, if ever. So we will need to be just as attentive to the individuals we serve as we have been during our shut-down crisis. Perhaps even more as there will be more things to communicate about (and stress about) now.

In Behavioral Stimulus I, I focused a lot on the stresses related to having to shelter in place and the dangers of isolation that it produces. As I said, it is pretty obvious that everyone did and is doing a great job with this. Now, our main source of stress will be changes in routines. Negative or positive changes all produce stress. So, as we re-enter our normal or more normal world, we can anticipate a lot of stress. Remember....... 

STRESS increases SYMPTOMS, and SYMPTOMS increase BEHAVIOR

For Behavioral Stimulus II, I am going to add a tool for you all. Although you are not all Cognitive Behavior Therapists, you can all benefit from a basic understanding of it. Here is a simple diagram of what it is about:
I'm sure you are most of you are familiar with this model, but in this Behavioral Stimulus, I want to focus on an aspect that we don't often emphasize as much and that is thoughts. By addressing a person's thoughts, we can often interrupt the chain of feelings and behavior. Although the cognitive triangle is circular, I like to think of thoughts as the executive of the chain. Addressing thought patterns gives us the best chance to prevent escalated feelings and behavior which is where the real drama lies. Think about it, nobody tends to run away from home, hit people, break things or hurt themselves because they are merely thinking. But if those thoughts trigger negative emotions .......

Well, you know where that can go.

So I want to offer you one of the best interventions that we can use to disrupt behavioral issues before they occur. It comes from my background in Sport Psychology, which is all about managing stress.........

**CHANGE YOUR MIND.**

Sounds pretty simple, doesn't it. In fact, it is not as simple as it sounds.
First, what a CHANGE YOUR MIND intervention is not:

"Hey dude, you just gotta' change your mind about this."

Please don't do that - It's a good way to get punched! Instead, working with someone to change their mind is a process that takes time and patience. Say, for example, we have a person who does not want to go to their day program. We might first be tempted to try one method of CHANGE YOUR MIND that we all know:

Redirection

Yes, this a great CHANGE YOUR MIND technique, used for years. However, sometimes it is not enough. To avoid the feelings-behavior-drama-trauma we need to get a little deeper into what is really going on:

What is bothering you?

To help a person change their thoughts, we need to know what they are. By asking kindly, in a non-judgmental way, we are more likely to understand those thoughts than with an agitated, "Why don't you want to go?"

So let's say that your kind and gentle approach has worked and you are getting to the bottom of what is really going on. Not always, but many times, there will be some irrational thinking at play - most often irrational fears. But please remember - irrational fears and realist fears feel the same. So the next step is to address the fear - talk about it and reframe it:

Maybe.......

This is deeper along the line of CHANGE YOUR MIND. We are not changing the fear, but we are refocusing the person on other positive possibilities. When a person is stressed and fearful, often all they can see is negative outcomes - that is what stress does to us - all of us. In this stage, we are just trying to help the people to see that there are other positive possibilities. Stress is the great robber of Positive Psychology. But we don't have to be its victim.
There is one more CHANGE YOUR MIND technique that is very important. It occurs before a crisis ever occurs. It instills confidence and makes a person feel good:

**POSITIVE AFFIRMATIONS**

This is the most important part of building a positive, resilient mind. This doesn't have to be complex. It's simply recalling the positive things a person does and reminding this person that they have this positive capability. An example of this might be, "You were stressed about going to that relationship group, but you came through with flying colors! Stress doesn't stop you - you come through. Repeating this often enough enables the person to eventually be armed with the affirmation, "Stress doesn't bother me, I come through every time!" And this is when people really begin to grow.

So why all this talk about thinking? It is because......

**YES or NO is Easy, MAYBE or a MIGHT is hard!**

Ok. I'll explain what I mean. We all know the shelter-in-place era was difficult. We had to negotiate some change for our individuals, but they were very black or white - we had specific limits that we had to adhere to and we worked around it. But now the true adventure begins....

- Maybe the day program will open next week.
- CCS might be able
- Maybe you can go to the movies next week
- Your therapist might be coming to visit again.

and the list goes on......

We work with a population that has been trained in black and white thinking. Generally speaking, they are conditioned to a yes or no, if-then cognitive style. They are not as adept at dealing with if, when and maybe. Don't get me wrong, we have made tremendous progress in our services in the last 40 years (man I feel old) but people with intellectual disabilities combined with various mental health issues do have challenges in dealing with the gray areas of life. So what are we going to do???????????????????????????
Communicate: Please Ask More and Don't Command or Tell

Don't get me wrong, we should still be specific and concrete with our communication, but let's make sure they feel heard. They, like us, are going to be stressed in the land of gray.

Don't Give False Promises - If you don't know, don't guess

I feel confident that we are all going to get through this challenge just fine. Just be prepared for a challenge. We continue to be in this together.

I want to conclude with a gift of gratitude for all of you. As some of you may know, I am concluding my PhD in Psychology with a dissertation on how we use self-care to resolve work-related stress. I am attaching a PowerPoint that I have given to several different audiences. So look it over and take a moment and be good to yourself. As a further expression of my gratitude, I am willing to do a free self-care training for the first agency that sends me an e-mail request with "free SC training, please" in the CC line. Any agency receiving this stimulus is eligible. It will be my pleasure.

Everyone Keep Up the Great Work!