

# Helping distressed people manage their chaotic emotions

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# Getting ideas into action

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## Clinical:

- ATU; Clinical Psychologist & Family Therapist specialising in attachment

## Intellectual:

- History & Philosophy of Psychology, British Psychological Society
- IASSID Ethics SIRC
- IAMHID (European)
- LiDS



# Getting new ideas into action

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“The standard-setting and inspection intended to stop poor practice has not always prevented scandals, but it has suppressed innovation and failed to protect people with intellectual disability from austerity measures. ...

We will be placing articles that develop existing lines of thought alongside papers that draw on concepts outside the window of acceptable discourse in the field, particularly longitudinal and systemic studies that reveal lives in process.”

Impact Factor increased 0.892 to 2.093

# AGENDA

1. Chaotic emotions
2. Why behaviourism? History & Context
3. Why paradoxes matter
4. Attachment's untapped potential for emotional development
5. Two attachment assessments
6. Three necessary system changes



# 1.1 Chaotic emotions

Hubert & Hollins (2006)

- *One man frequently spread urine & faeces over himself & around the walls & floor ... very angry & red-faced, & making obscene gestures as I drew near*
- *Touch was extremely important to [Sam, who was blind], but he encountered very little, because he was inclined to grab hold of people very tightly & scream, so most people avoided getting too close to him*

Clifford-Simplican (Hypatia, 2006)

- *My son is 22 & has autism, mental retardation & is non-verbal ...He has gotten quite violent with me in the past, severely & repeatedly slamming my head into the floor or head butting me until I was able to escape.*
- Argues that the Ethics of Care romanticises ID: in seeking to humanise and depict loving experiences of care, Kittay obscures struggles of carers and dependents

## 1.2 Chaotic emotions: research data

1. 41% people w intellectual disabilities also show mental illness (18%), challenging behaviour (13%), or both (10%) (Sappok et al, 2021)
2. Some individuals shaped by biology more than environment (Agar et al 2021)
3. Adverse Childhood Experiences (ACEs) much more common in lives of children with intellectual disabilities (Giltaij et al 2013; Vervoort-Schel et al 2018), family “most likely perpetrators” (Shakespeare 2014)
4. Nationally representative sample of substantiated child maltreatment cases in Canada (Dion et al 2020):
  - Children w. intellectual disability roughly 1% general population, but are
  - **11% of this maltreated** population, &
  - Their abuse/neglect more damaging because more severe & more prolonged
5. Maladaptive coping mechanisms developed in childhood become significant mental health problems in adults (Kezelman & Stavropoulos, 2012)

# Anderson et al (CaPDID: 2020)

Volatile emotions drive rapid swings between regarding somebody as a 'hero' then a 'zero', often in response to perceived abandonment

"HERO" saviour/rescuer 	"ZERO" Persecutor/ abandoner/neglector 
I feel special	Guilty
Protector of service users	Manipulated
Proud	Nothing is good enough
Angry with colleagues - they don't understand	Demoralised
'I'm doing a good job'	Triggered
False sense of security	'I've failed'
Manipulated	Frustrated
Wary - 'I might be seen as all bad next'	'What will my colleagues think of me?'
Feel guilty when I go home after my shift	Helpless
Frustrated - 'If I'm good, who is bad'	Exhausted
Responsible - 'Only I can do it'	Anxious
	Hurt
	'I might be suspended or lose my job'
	Angry - 'I'm doing my best'
	'I feel I want to get my own back'
	Can't switch off after shift

## 2. Why behaviourism? History & Context

### Historical precedent:

- After World War II in US & UK supporting emotional life of children VIP, but excluded children with ID (Toms 2013). They continued to be punished for bedwetting, even though regarded as expression of distress in TD children that punishment worsened
- Supporting emotional development of TD not ID children continues. eg NICE guideline 26 (2015) identifies stability of care as 1 of 3 three major challenges for children's services. Yet **relational continuity nowhere in policy documents on challenging behaviour in ID**

### Context: (Baistow, 2001)

Behaviourism's power rests in part on it chiming with ahistorical neoliberal values like autonomy that have dominated Anglophone cultures since the 1980s



### 3. Why paradoxes matter

- Alice: Whose business is it to answer the door?
- Frog: What's it been asking?

Deleuze (Logic of Sense, 1990). Lewis Carroll's logic games reveal sense and nonsense. Lampooned in sitcom *Never mind the quality feel the width*

Constructive ambiguity: negotiating tactic to disguise

Paradox: notices conflict in classification



# Notice ambiguous terms like 'attachment behaviour' (eg Mullen 2018)

Glosses over difference between feelings and actions

Attachment researchers *infer* child's attachment to important others & adult's state of mind towards all relationships

*How* people talk is generally more influential than what they say, and some brief ways of relating are significant even though fleeting

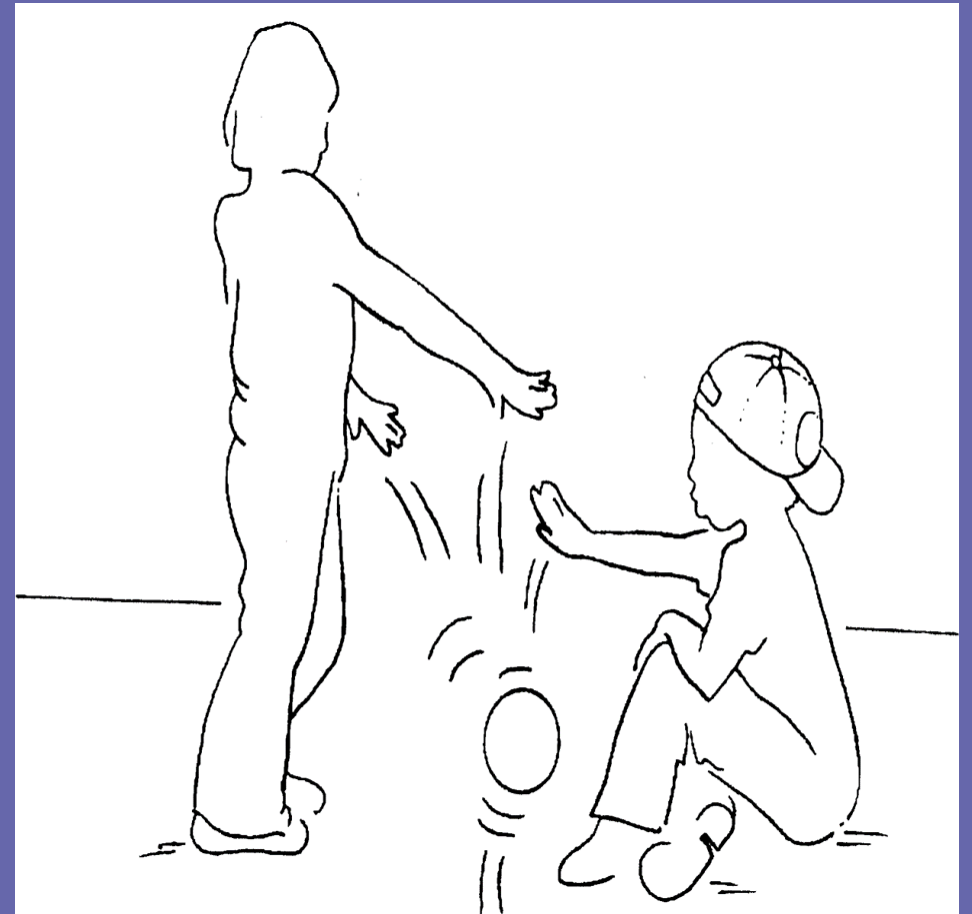
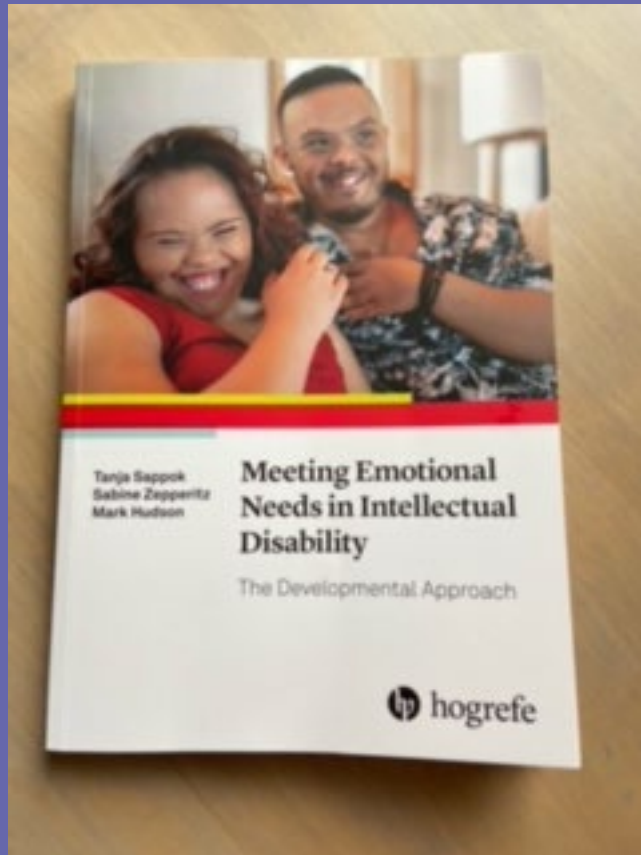
A type of attachment is only confirmed when *an array* of indicators form a coherent pattern

## 5. Attachment: untapped potential for emotional development

- Sappok et al (2014) found stage of emotional rather than cognitive development predicted presence & severity of challenging behaviour
- Emotion-focussed intervention aims to co-regulate feelings and develop emotional skill
- Co-regulation occurs when Important Others use words, tone of voice, facial expressions or body language to help steady a person who cannot harness chaotic emotions



## 6. Two new attachment assessments



Sappok, T. Zepperitz, S. and Hudson, M. (2021). Meeting Emotional Needs in Intellectual Disability: The Developmental Approach. Hogrefe.

- Introduces *Scale of Emotional Development- Short (SED-S)*
- *Gives case examples*
- *Describes its use in action*
- Domain 1: Relating to His/Her Own Body
- Domain 2: Relating to Significant Others
- Domain 3: Dealing with Change – Object Permanence
- Domain 4: Differentiating Emotions
- Domain 5: Relating to Peers
- Domain 6: Engaging with the Material World
- Domain 7: Communicating with Others
- Domain 8: Regulating Affect

# Adult Attachment Projective Picture System

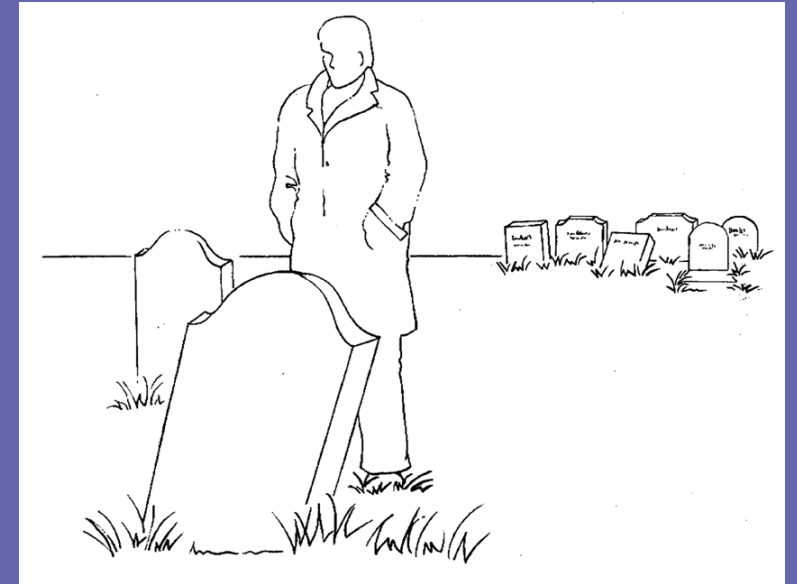
## George, West & Pettem, 1997

- Semi-structured responses to 8 drawings with probes like:
  - What is happening in this picture? What happened before? What are these people thinking or feeling? What might happen next?
- Recorded & transcribed verbatim; coded by trained, reliable judge
- Yields same 4 classifications as AAI: **Secure, Dismissing, Preoccupied, Unresolved**

•Gallichan, D. J. & George, C. (2016). Attachment trauma and pathological mourning in adults with intellectual disabilities. Pp197-222 in Fletcher, H.K., Flood, A., & Hare, D.J. (Eds), *Attachment in Intellectual and Developmental Disability: A Clinician's Guide to Practice and Research*. Wiley-Blackwell.

•Gallichan, D. J. & George, C. (2018). The Adult Attachment Projective Picture System: a pilot study of inter-rater reliability and face validity with adults with intellectual disabilities. *Advances in Mental Health and Intellectual Disabilities*, 12 (2), 57-66. doi:10.1108/AMHID-11-2017-0036

- Early ID reliability data: *Attachment trauma evident in 18/20 who expressed helplessness resulting from maltreatment, bullying or abandonment. Gave coherent narratives to most pictures but 2 likely to elicit dysregulated talk. Fragmented narratives reflected **preoccupation with suffering** or **chronic unresolved mourning**.* Acceptable inter-rater and test-retest reliability



# Gallichan & George 2016

- “That man’s looking down on that grave there. It must be his wife or one of his family down there ...somebody done something to his family, or they were in, may, somebody reported a shot and that killed them and then he got buried ... so the man who is there in the picture might go to his grave ... I think he’s going to do something wrong ... Yeah so I think he will go and, go and do something wrong ... yeah ... well either he’ll get killed or someone else will get killed. Well there’s a lot of graves there. There’s 1, 2, 3, 4, 5, 6, 7 of them so another would be 8 if he got killed.” p210.

June’s story about multiple violent deaths was interpreted to reflect conflicted feelings about (1) death of her abusive father, (2) confusion between loss, danger and destruction, and (3) fears for her own death. Her clinical presentation was of two *segregated selves*

## 7. Three necessary system changes

- *Specialisation rather than eclecticism*
- *Apply trauma-informed care with fidelity*
- *Address staff stability – not just turnover but ‘churn’*
- PCP raised expectation all services can & should offer different kinds of intervention, but this leads to new problems
- Keesler 2014: 5 pillars - oversimplified. 130 service leaders had poor understanding of key TIC ideas (Rich et al, 2020)
- Core problems are **affect dysregulation, structural dissociation, somatic dysregulation, impaired self-development & disorganised attachment** (Kezelman & Stavropoulos 2012)
- Churn impedes everything – services just spin their wheels



# Concluding thoughts

- “Innovation is the name of the game, but not the stuff of the game. Essentially, ours is a monolithic system ... [which] supports “innovative” programs that evolve into either carbon copies of what is currently available or distortions of something that was once good.... One thing that I’ve learned is the value we must assign to truly creative thinking and planning: it’s an infrequent occurrence, often unrecognized, usually feared, and commonly disdained.” Burton Blatt 1984
- Over 20 yrs family therapy in ID grew, blossomed, & withered in UK
- If neoliberal individualism is on the cusp of crumbling, perhaps ...
- An attachment perspective can take hold and survive in the anglophone world. Has huge potential. Will need more friends