

Irritability and Aggression Module

Welcome and Module Overview

This summary reviews the key points discussed in the module on irritability and aggression following brain injury. It includes some tasks for you to work on. This module focused on the difficulties people with brain injury can have managing their anger and frustration and why poor frustration tolerance happens. Using the ABC model of behaviour change, Ann was able to learn why John lost his temper easily and has difficulty calming down. She also learned some strategies to help John in situations where he is easily frustrated as well as reduce how often this happens.

Your Checklist

Here is a list of the topics we will cover in this summary. Tick these off as you go:

1. Annoyed to Furious – Emotion on a Spectrum
2. Physical and Verbal Aggression
3. What leads to Irritability and Aggression: Antecedents
4. What Can Families do?
 - a. Strategies and Reinforcements!
 - b. Reducing tension and improving coping
5. Summary
6. Your Checklist

1. Frustration to Anger – Emotion on a Spectrum

People with traumatic brain injury often have reduced tolerance for frustration and can seem like they go from calm to angry in a matter of seconds. They also have more difficulty calming down once they become frustrated. This can lead to both verbal and physical aggression, putting other members of the family and friends at risk of being hurt or lead to avoidance. People with brain injury who have lowered frustration tolerance may:

- Yell at others
- Swear at others
- Physically attack or hurt others
- Have difficulty calming down
- Have difficulty keeping friends
- Have difficulty keeping a job or being involved in activities

Check which ones your family member has difficulties with.

Remember, all behaviours happen on a scale, so with anger, you can start off just being a little bit irritated with something or someone, to becoming mildly annoyed at what is happening, all the way through to being really angry and explosive.

This is the same for people with brain injury, but they can jump very quickly from being a little irritated to being very angry which causes them to become verbally or physically aggressive towards others.

Sometimes there doesn't seem to be any logical or obvious reason why the person is becoming irritated so often and why they are so angry.

It's important to remember that all behaviours or actions are a form of communication. People act in a way in order to be heard, to get their message across and to achieve an outcome. So this is saying that a person is trying to tell us something even if they act in a way that we don't understand or agree with and even though their way of communicating is not helpful or effective.



2. Physical and Verbal Aggression

Physical Aggression

Physical aggression is when someone is acting in a way that is physically threatening and has real or potential to cause harm to him or her self, to others or to objects in the environment. Physical aggression can range in severity from slamming doors, throwing objects, marking the walls, breaking objects, throwing objects at others, taking swings at people, grabbing others' clothes, striking out at others, kicking or pushing others or causing injury to others.

Verbal Aggression

Verbal aggression is when someone speaks about a person or things in a way that others might find rude or offensive. This includes using swear words. Verbal aggression can range in severity from making mild personal insults, making loud noise, shouting angrily, swearing using foul language and making threats against others.

3. What leads to irritability and aggression: Antecedents

Physical and verbal aggression does not usually occur because the person is trying to be rude or hurt someone. Rather, it is because they have had changes to the way their brain now thinks about things (thinking problems) because of their injury.

Common triggers for anger include:

- Lack of structure or unexpected events
- Perceived lack of control
- Being confronted with a task the person is no longer capable of doing
- Fatigue or confusion
- Impulsivity
- Confusion and overstimulation, e.g. crowds, lots of noise and activity
- Other people's behaviour, e.g. insensitive comments.
- Unrealistic self-expectations
- Barriers to goals or routines, e.g. queues
- Buildup of stress or frustration.



Listed below are the types of thinking problems that may lead to irritability and aggression in people with brain injury.

The person's environment

People with brain injury can become irritable and angry when they are overwhelmed and confused by their surroundings.

John finds other people's noise very difficult to handle. When he is watching TV, he is very sensitive to noise from other people in the house. When the whole family are in the living room, this creates more noise and more is going on, which triggers John's frustration.

Sometimes a person's "fight or flight" response is more sensitive and easily triggered. This means that when they feel like they are in danger, they can become ready to either escape the situation or

fight. They can sometimes become verbally or physically aggressive without thinking when this happens.

When John is watching the TV and the rest of the family are around, he has difficulty dealing with too much information coming to him at once. He can therefore become easily overstimulated. John might not be able to concentrate on the TV plot if he has to filter out all the other conversations going on around him. In response to this, the fight or flight response kicks in.

Poor self-control

Often people with brain injury have poor self-control or impulse control. They often cannot stop themselves from doing something once a thought or feeling pops into their head.

When John gets irritated or angry when his brothers are playing or being loud, his immediate feeling is anger and he yells that he hates them. Without thinking, his filtering system doesn't check whether this is a sensible thing to say. He cannot check whether his actions will solve the problem, but rather, his mouth just blurts out his thoughts without his brain thinking them through.

Low frustration tolerance

People with TBI have difficulty dealing with change, especially when things do not go their way or the way they were expecting. This is called "low frustration tolerance". This also often occurs along with difficulty being able to regulate emotions, or being able to control how strongly they respond to something.

When John is expecting a certain outcome or thinks he has to do something in a certain way, but this doesn't happen, he can become easily frustrated. Ann described his behaviour like "exploding". John can seem to overreact to these changes because his ability to see the importance of these outcomes is not working properly. This leads to John exploding. To him, it is a big deal, even though to others it may not be.

Poor communication styles

Often people with brain injury do not realise how they sound because they have trouble recognising changes in their communication, like their tone of voice, pauses etc.

When John gets frustrated he talks in a loud voice and tends to talk very fast so that all his words get jumbled and run together. This makes him very difficult to understand and very difficult for his family to find out he is upset about.

Because John is not able to get his message across to the rest of the family, he becomes even more frustrated and angry. So, poor communication styles after brain injury can lead to irritability and aggression.

Difficulties seeing from others' points of view

Many people with brain injury have difficulty seeing things from other people's perspectives or points of view. This means that they have difficulty working out why other people may be acting in the way they are. So, they can often come across as being very self-centered or self-absorbed.

It can be very frustrating for family members. For example, John wants to do things that he likes, but cannot see that other people might not want to do it too. He doesn't recognise that other people have their own interests. He also cannot see that when he is doing what he wants, it affects others as well.

John's brain injury stops him from being able to think about others' needs as well as his own, so he can only base his actions on his own needs. It is not that he does not want to think of others, he just cannot do this very easily.

Poor Problem Solving and Decision Making

Many people with brain injury have difficulties coming up with ideas or ways to solve problems. They also find it hard to put solutions into place or find choices that are helpful. They may only be able to think of one option, which isn't always helpful. For example, when John's TV watching is interrupted by his brothers playing in the backyard, he can only think of the solution for his brothers to go away. He might not even know that there are other (more helpful or kind) ways to change the situations for himself.

When John has difficulty finding things to do or fill his time, he might have an idea, but then is not able to think through whether it is a realistic option and whether the things that he needs are available to him to do this. He just makes a decision based on a thought or idea without thinking through the consequences.

4. What Can Families Do?

Remember, the most helpful thing families can do is change the **triggers** or **prevent** the challenging behaviours from happening. There are many ways to do this to prevent or reduce a person's irritability or aggression!

Strategies and Reinforcements

Focus on thinking, not acting

Try not to focus on how the person with brain injury acts and what behaviours they are doing. Instead, look at what issues they are having, such as the way they are thinking (thinking difficulties) and see what can be done to help these. This will result in the actions changing without them being the focus.

Changing the Environment

It might be possible to reduce the occurrence or frequency of aggressive episodes by changing things in the environment. Remember, prevention is the key! Many things can be changed simply, such as changing where the TV is located, wearing headphones to reduce noise, having male support workers or carers for young male clients. It is also important to think about whether the person with brain injury has enough to do and is enjoying the activities he/she is engaged in. Are they bored and

easily frustrated? If so, maybe finding some new activities will reduce boredom and frustration which will decrease the likelihood of aggressive episodes.

Knowing what to expect

It's important for the person with a brain injury to know what to expect. Dealing with things that come up out of the blue and are unpredictable can be difficult and can often lead to frustration or irritability. So, making sure the person knows what to expect and what is expected of them can reduce this frustration.

For example, Ann would like John to do a task that he usually doesn't really like doing or that frustrates him. She should:

- Give him plenty of time to respond – don't rush him!
- Not criticize or threaten him
- Provide him with a reason to do the task

In the module, we saw that Ann tried this by asking John to set the table (a task he does not really like doing). Ann gave John a 5-minute warning of when dinner was going to be ready. Then she gave him another warning closer to the time (about a minute before dinner was ready). This meant that John could wait for the next ad break to set the table. Ann also provided John with an incentive/reward – he was allowed to choose which dessert he wanted, if he got the job done before dinner was served.

Having structure and routine in the home environment will also help. Trying to structure the family and home environment to suit the needs of the person with brain injury, will reduce the amount of uncertainty for that person.

Reacting to Anger and Aggression

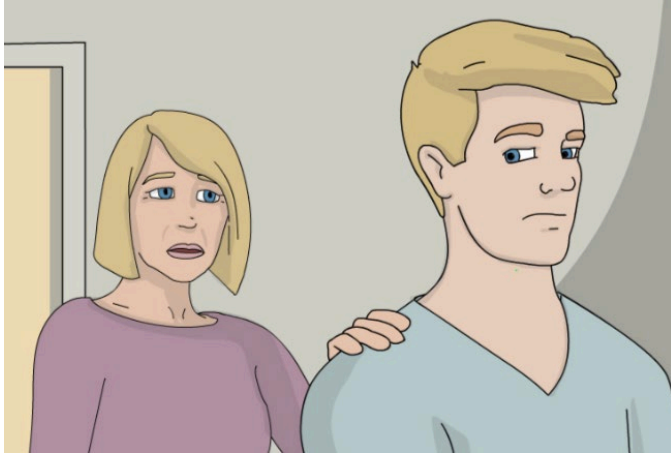
It is important for family members of people with brain injury not to retaliate or get angry when the person gets angry. This only makes the situation worse. By remaining calm, the family can reduce the intensity of the situation. Plus, demonstrating calm behaviour helps the person with brain injury to see how to respond.

When the person with brain injury is screaming or throwing things, it is important to recognise their feelings. Then, you can suggest a solution and move away to let them calm themselves down.

Telling a person to "calm down" when they are already angry and frustrated often makes them worse. This can make the person think that their feelings don't matter or that their message is not important. It is often more helpful to leave the situation or conversation and allow them time and space to calm down on their own.

Aggression or anger are forms of communication. It may be the case that the person is trying to tell you something or express their needs, but can't find the words. If you can see that they are upset or angry, it is helpful to show them that you understand their feelings and that you want to help them.

For example, Ann might say to John "I can see that you are very angry John. If you tell me what you want in a way that I can understand best, I will see if I can help you". Encouraging them to express their problem with words will help you to work out what has caused the aggressive behaviour.



Reducing tension and improving coping

There are also a number of helpful activities that people with TBI and family members can do to reduce tension and improve coping. Why don't you give some a try? Tick off the boxes as you try each strategy:

- Meditation
- Relaxation
- Mindfulness
- Gentle walks
- Relaxing activities
- Listening to music

Validation and Understanding

Try and understand why the individual is angry, listen to them and validate/acknowledge their feelings. Try and find a way to assist the person with finding a solution to the problem.

Distraction

Distraction involves changing the discussion topics, activity or setting. Once the person has been distracted, it can help to change the activity to one that is calming and enjoyable.

Self-removal and Safety

If the person's anger has increased, it is important to remove yourself from the situation if it is safe to do so. Tell the person what you are doing. For example, "you're getting upset, I am leaving for a few minutes so you can calm down". Tell them you will return when their anger is under control. If the person is being verbally abusive, ignore the behaviour by reducing eye contact and verbal interaction.

Maintain a safe environment e.g. remove potential weapons or dangerous objects that could be thrown or used to damage property.

Your Checklist

Your tasks to do following this module are:

- Review the Irritability and Aggression module again
- Re-read and print out this module summary (it won't take long!)
- Recognise that anger is an emotion that occurs on a spectrum from mild irritation to fury
- Recognise why these problems occur: thinking difficulties
- Recognise what can be done to prevent them: changing triggers (antecedents)
- Recognise how to respond to anger and aggression: consequences
- Explore the frequently asked questions and extra resources sections on the website
- Reward yourself for completing this module.

Summary

Congratulations on completing the Irritability and Aggression module. In this summary we discussed why and how people with brain injury can become easily frustrated and aggressive. We also discussed why these problems can happen and what thinking problems cause them.

You learned some of the ways you can prevent or change triggers to reduce the likelihood of aggressive behaviours happening. You also learned skills on how to respond to your family member when they are angry or aggressive.