

Singh, N.N., Lancioni, G.E., Winton, A.S.W., Singh, A.N., Adkins, A.D., & Singh, J. (2009).

Mindful staff can reduce the use of physical restraints when providing care to individuals with intellectual disabilities. *Journal of Applied Research in Intellectual Disabilities*, 22, 194-202.

Physical and mechanical restraints are frequently used as means to manage aggressive behaviour in individuals with intellectual disabilities. However, the use of these devices can result in both physical and psychological injury to clients and staff. In recent years, a widespread call for the reduction and/or elimination of restraints in clinical settings has emerged, and the efficacy of less aversive, staff-focused strategies has been explored. The present study aimed to gauge the effectiveness of one such approach, mindfulness training, in reducing use of restraints in response to aggressive behaviour in group home clients.

The study employed a multiple-baseline design across two staff shifts (AM and PM). In total, 23 residential support staff serving 20 clients in 4 group homes participated. In the baseline phase, staff followed standard organizational procedures for managing aggressive behaviour. This phase lasted for 3 and 5 weeks, for the AM and PM groups, respectively. During the training phase, staff participated in a series of 2-hour mindfulness training and meditation sessions, for a period of 12 weeks. In the mindfulness practice phase, staff were told to use the exercises and techniques they had learned, and were not instructed to discontinue any other behaviour management practices they had previously employed.

Key Findings:

1. Incidents of Aggression

Data were gathered throughout each phase on *incidents* (situations that would typically elicit aggression), the use of *physical restraints* and *Stat medications*, and *staff and peer injuries*. When compared to baseline frequencies, there were fewer incidents and injuries to staff and peers, and less frequent use of physical restraints and Stat medications during the mindfulness training phase. These numbers decreased further during mindfulness practice, with physical restraints and Stat medications at near zero levels by the end of the study period.

2. Staff Responses to Aggression

Data were also collected on *observations* (occasions on which staff witnessed, but did not respond to, verbal exchanges between clients that could escalate into aggression) and *verbal redirections* (occasions on which staff verbally redirected clients engaged in verbal exchanges that could lead to aggression). When compared to baseline, the frequency of observations increased and verbal redirections decreased during the training and practice phases.

The findings of this study suggest that training and practice in mindfulness techniques may produce changes in staff behaviour, which, in turn, may reduce their use of physical restraints and Stat medications in response to aggressive behaviour from individuals in their care. Changes in staff observations and verbal redirections may also simultaneously result. Further research is needed to clarify the relationship between these constructs, and to explore other possible explanations of the data.