Restraints alternatives in the management of challenging behaviors in inpatients with autism and intellectual disability

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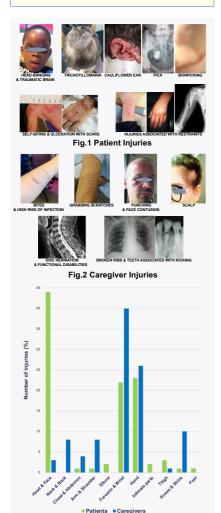
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Introduction

In intensive and emergency psychiatry units, caregivers are often faced with severe behavioral disturbances, including self-injury, aggression and extreme psychomotor agitation. The associated risk of harm is highly problematic. While the use of restrictive measures is common, it optimally should be limited.



patients and caregivers **Objectives**

Fig.3 Distribution of injuries between

To review the myriad forms of personal protective equipment in current use, including helmets, gloves, sleeves, jackets, bodysuits, mats, splints, padded shields, papoose boards, etc. and usage through describe their caregiver experiences.





Fig.5 Immobilization device for medical examination assistance

Methods

A focused ethnography based on the observation, justification and formalization of personal protective equipment and procedures used as an alternative to restraint, focusing on caregivers' representations of violent patient encounters. The research was a multi-centered study in three psychiatric inpatient units in Canada, the USA and France dedicated to the assessment and treatment of challenging behaviors in individuals with autism and intellectual disability.



Results

Numerous forms of personal protective equipment (PPE) exist, and their usage can confer a safe alternative to the containment of behavioral crises. Appropriate handling of challenging, recurring behaviors is imperative to the preservation of physical and moral integrity in both patient and caregiver.



Fig.7 Innovative security tools

Conclusion

Personal protective equipment (PPE) decreases harm associated with the management of challenging behaviors, and can promote respect for individual integrity and fundamental rights. The usage of PPE can be extremely helpful in challenging and dangerous behaviors, and subsequent provision of personalized and efficacious therapy.



Fig.8 Caregiver PPE

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