



The relationship among attributions, emotions, and interpersonal styles of staff working with clients with intellectual disabilities and challenging behavior

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ABSTRACT

Several studies have tested Weiner's model, which suggests a relationship among causal attributions regarding challenging behavior (CB), emotions, and helping behavior of staff. No studies have focused on interpersonal styles. The goals of this study were to investigate the influence of type of CB on attributions, emotions and interpersonal style of staff, the relationships among staff attributions, emotions, and interpersonal style, and the mediating function of emotions in the relation between attributions and interpersonal style. Participants were 99 staff members. CB aimed at the environment was related to higher levels of negative emotions, attributions and certain interpersonal styles such as controlling behavior. In addition, a relationship between emotions, attributions, and interpersonal style was found. However, there was no mediating function of emotions in the relationships between attributions and interpersonal style. Future research should take a more dynamic view of staff behavior and staff-client interaction into account.

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1. Introduction

People with intellectual disabilities (ID) have a greater chance of developing challenging behavior (CB) and psychopathology (Wallander, Koot, & Dekker, 2003). Emerson (2001, p. 3) defined CB as 'behavior of such intensity, frequency or duration that the physical safety of the person is likely to be placed in serious jeopardy, or behavior which is likely to seriously limit or deny access to and use of ordinary community facilities'. Furthermore, CB can be divided into behavior aimed at the client him or herself (inward, for example withdrawal and self-injurious behavior) and behavior focused on the environment of the client (outward, for example aggression and delinquent behavior).

Clients who show CB often gain attention from their support staff (Lambrechts, Van Den Noortgate, Eeman, & Maes, 2010). A number of studies show that staff reactions to CB often reinforce clients' maladaptive behavior (Embregts, Didden, Huitink,

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& Schreuder, 2009; Hastings, 1996, 2002). In sum, staff behavior appears to be a key factor in the emergence and persistence of CB (Hastings, 1997a). Hastings and Remington (1994) concluded that staff behavior can be influenced by factors related to the CB itself. For instance, CB of clients can lead to negative emotions of support staff, such as anxious feelings, irritation, which in turn can lead to feelings of depersonalization, and emotional exhaustion (Mitchell & Hastings, 2001). These emotional reactions influence the chance of staff responses that serve to maintain CB of clients (Hastings & Remington, 1994). Rose, Jones, and Fletcher (1998) found that within residential facilities where support staff reported low levels of stress, larger amounts of assistance provided by staff and more positive interactions between staff and clients were observed. In addition, Allen and Tynan (2000) found that when staff feels threatened by challenging behavior, the chances they will respond adequately decrease significantly.

Staff behavior is also shaped by internal and interpersonal factors indirectly associated with CB, such as beliefs about the causes of CB of clients (for instance medical causes like migraine or environmental causes such as school demands). Wanless and Jahoda (2002) emphasized the need for more research with a focus on these interpersonal perceptions and beliefs of support staff and the influence of these beliefs on staff behavior. Staff beliefs, emotions, and their influence on staff behavior are key elements in the attribution theory of Weiner (1985, 1986). Attribution refers to causal explanations of behavior (Hastings & Brown, 2002). Weiner's model distinguishes two important types of attributions: stable/unstable cause (is the cause of CB stable or temporary) and controllable/uncontrollable cause (does the client have control over his/her behavior). Weiner proposed that the more stable the cause of CB according to the beliefs of staff, the less optimism support staff experience. In addition, the more CB of the client is perceived as controllable (under control of the client), the more anger and less sympathy staff experience (Dagnan, Trower, & Smith, 1998; Hill & Dagnan, 2002; Weiner, 1985). These emotional reactions affect the way staff members help the client, in other words, optimism and sympathy will induce helping behavior, whereas anger will reduce it. A critical literature review of Willner and Smith (2008), however, reveals inconsistencies regarding the results of studies investigating associations between attributions, emotions, and behavior of staff members. A number of studies reported no association between attribution style and helping behavior and provided limited support for Weiner's model implemented in the care for people with ID and CB (Bailey, Hare, Hatton, & Limb, 2006; Hastings & Brown, 2002; Rose & Rose, 2005).

Most studies aimed at applying Weiner's attribution theory to the care for individuals with ID focused on the relation between causal attributions and staff helping behavior (Bailey et al., 2006; Dagnan et al., 1998) and provided assistance (Felce, Bowley, Baxter, Jones, Lowe, & Emerson, 2000). These studies, however, primarily focused on the presence or absence of certain staff behaviors (e.g., whether or not staff shows helping behavior) and not so much on the way these behaviors are expressed. This is important, because in research on communication and interaction processes it is well known that people mostly react to the way in which things are said or done rather than what is actually being said or done. Previous studies have not investigated interpersonal behavior styles, for example, whether helping behavior is controlling or emancipating in nature, or whether it is friendly, neutral, or even hostile. Therefore, it is not only important to investigate what staff members do when working with their clients, but it is also of great importance to focus on the interpersonal behavior style of the staff members, which may affect the process of interaction between support staff and clients. Jahoda and Wanless (2005) concluded that staff members can act in a professional way, thus do as they were told, but their interpersonal beliefs and emotions can differ greatly from the way they say they would respond to CB of their client. Besides investigating what staff members do, it is also of great importance to focus on how they act: the interpersonal behavior style of the staff members could give us an indication of the nature of the relationship between staff and clients.

To our knowledge, relatively little research has focused on whether interaction style is associated with staff variables like emotions and attributions. Therefore, the present study focuses on testing an adapted version of Weiner's model by investigating the relationship between staff's experienced emotions, causal attributions, and, instead of helping behavior of staff, staff's interpersonal style. In this study, we did not use vignettes to describe CB of fictional clients but we explored staff's attributions with respect to real CB of clients the support staff worked with. Wanless and Jahoda (2002) tested the differences between hypothetical CB scenarios and real CB scenarios with respect to staff emotions and found that support staff experienced more negative emotions in response to the real incidents of aggression.

In addition to the use of real incidents of CB, the type of CB displayed by a client is also found to affect staff emotions (Noone, Jones, & Hastings, 2006). Hastings and Remington (1995) showed that staff reported stronger negative emotions in response to aggressive behavior than to stereotyped behavior. Research by Lambrechts, Kuppens, and Maes (2009) revealed that staff members experience anxious emotions when a client exhibits serious self-injurious behavior. Again, no association between negative emotions and stereotyped behavior was found. Type of CB is also related to staff attributions, for instance, Stanley and Standen (2000) found that staff members confronted with CB aimed at the environment (for instance aggressive behavior) perceived the behavior as more controllable than staff confronted with CB aimed at the client him or herself (for instance self-injurious behavior). A recent study of Dilworth, Philips, and Rose (2011) revealed that staff perceived physical aggression more under control of the client than self-injurious behavior. In this study we will therefore also focus on the influence of type of CB on attributions, emotions, and interpersonal styles. The following research questions will be answered in the present study:

1. Does type of CB influence staff attributions, emotions, and interpersonal style?
2. Do attributions and staff emotions predict interpersonal style?
3. Do emotions have a mediating function in the relationship between attributions and interpersonal style?

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