

PREVENTION AND MANAGEMENT OF AGGRESSIVE BEHAVIOUR IN ADOLESCENTS WITH ACUTE MENTAL ILLNESS: NURSING INTERVENTION FOCUSED ON EARLY WARNING SIGNS

STARTING...



INTRODUCTION

*Aggressive
behaviours...
Why?*

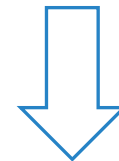
Clinical practice and continuous improvement, personal motivation;

A public health problem (1,2) and a problem in psychiatric hospital units, being more frequent in child and adolescent units (3,4);

Repercussions at all levels, with a negative impact on the experience of care and on public opinion about health services (5);

Nurses as professionals who intervene and develop interventions to prevent and manage these behaviours (6);

Impact on user rights due to the possible use of restrictive interventions (1,2,4,7);



Scoping Review

LITERATURE REVIEW

*What do we
know?*

Aggressive behaviour: an energetic self-assertive action or attitude towards another person, expressed physically, verbally or symbolically (8).

Behavioural disorders assume a increased severity (9) and aggression, although a non-specific sign (10), is one of the main reasons for hospitalisation (3).

Variation in its prevalence (4,11), difficult to clarify the real extent of these behaviours in child and adolescent psychiatric units, being considered a neglected area of research (6);

The main postulate of the aggression management model is that interventions should be implemented as early as possible in the user's behaviour chain (6);

Knowledge gap (12,13) and population gap (12)...

LITERATURE REVIEW

Intervention Models or Programs

Risk assessment tools

Interventions

- De-escalation strategies
- Activity planning and

Early intervention based on warning signs, enables stress reduction as well as the development of problem-solving strategies

(DASA-YV)

- Debriefing

RESEARCH QUESTIONS

*What do we
want to know?*

- 1 - What are the warning signs of aggressive behaviour identified by nurses in adolescents hospitalised with acute mental illness?
- 2 - What is the relationship between the use of an intervention based on the early warning signs (ERM) (14) and the adolescent's self-control of aggression and coping?
- 3 - Does nurses' use of ERM as a structured intervention in adolescent reduce the prevalence of aggressive incidents?

OBJECTIVES

Main Objective: Analyse the impact of adolescents' recognition and self-management of early warning signs on the prevalence of aggressive incidents.



Specific Objectives:

Identify the early warning signs of aggressive behaviour in adolescents in the acute phase of mental illness;

Translate, adapt and validate a tool for identifying early warning signs of aggressive behaviour of aggressive behaviour in adolescents with acute mental illness;

Evaluate the impact of the ERM on early warning signs on the use of methodologies with a restrictive scope;

Evaluate the impact of ERM on the prevalence of aggressive incidents and the use of restrictive scope methodologies.



HYPOTHESIS

H1: ERM promotes adolescent self-control;

H2: ERM leads to a reduction in aggressive incidents;

H3: ERM leads to a reduction in the use of restrictive methodologies;

H4: ERM promotes increased coping capacity in adolescents;



Expected outcomes

Promotion on adolescent self-control and coping;

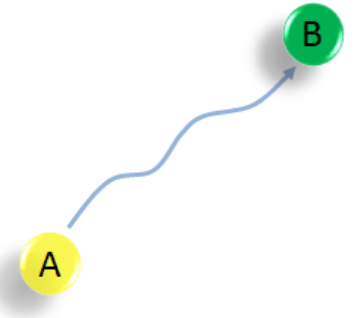
Contribution to robustness of nursing taxonomies (NIC/NOC);

METHODOLOGY

Population: adolescents

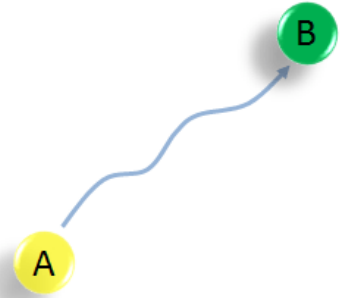
Sample (inclusion criteria):

- Adolescents from 10 till 18
- Admitted to 3 CAPU (Child and Adolescent Psychiatric Unit) in Portugal
- Nursing Diagnosis (ICNP) Aggressive Behaviour, Risk or Actual



METHODOLOGY

Mixed paradigm or mixed approach (clusters);



1° Study

Early warning signs in adolescents with mental illness and methods of managing the risk of aggressive behaviour;

- Qualitative, Exploratory
- Bardin's content analysis

2° Study

Adaptation and Validation of an instrument of early warning signs of aggressive behaviour in adolescents

- E-Delphi (Qualtrics®)
- Evaluation of the psychometric properties of the instrument
- Pre-test

3° Study

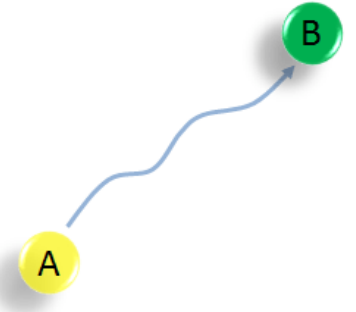
Quantitative, quasi-experimental pilot study with no control group, comparative between the three existing CAPU in Portugal using ERM

- Intentional, non-probabilistic sample

Inclusion criteria for exploratory study (interviews in study 1) and expert panel (study 2): Doctoral lecturer in higher education (methodologist); Doctoral nurses (clinical practice); Nurses with a Master's degree and/or Mental Health and Psychiatric Specialists Nurses with ≥ 5 years professional practice; Child and Adolescent Psychiatrists; Psychologists developing clinical practice in the context of Child and Adolescent Psychiatry;

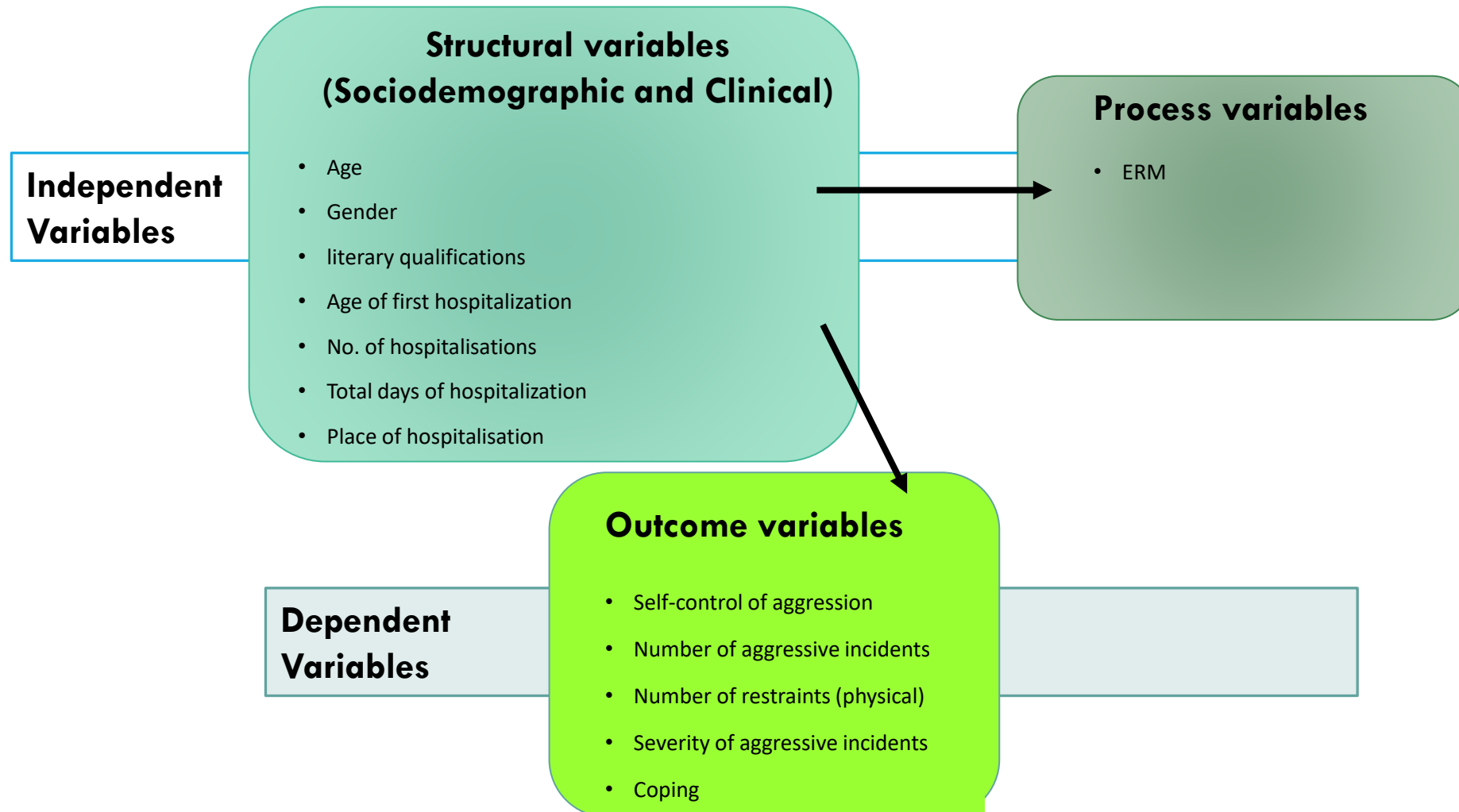
METHODOLOGY

Instruments



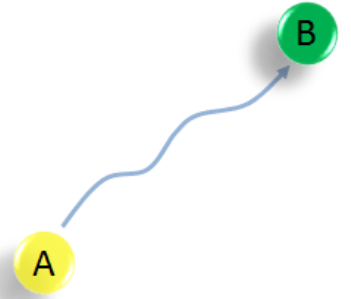
3° Study	
Sociodemographic and Clinical Questionnaire	Begining of the intervention
Early Warning Signs instrument for adolescents	Begining of the intervention
Staff Observation Aggression ScaleRevised (SOAS-R) (15)	Whenever an aggressive incident occurs
NOC – Self-restraint of aggression (16)	Begining and end of intervention
Toulesian Coping Scale for adolescents	Begining and end of intervention

METHODOLOGY



METHODOLOGY

Ethical Considerations



Permissions



Considerations



Benefits



FINAL CONSIDERATIONS

Research project as critical and reflexive process;

The importance of intervening at an early stage;

Continuous improvement and increased knowledge (evidence-based care);



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