

PDF hosted at the Radboud Repository of the Radboud University Nijmegen

The following full text is a publisher's version.

For additional information about this publication click this link.

<http://hdl.handle.net/2066/176476>

Please be advised that this information was generated on 2017-12-05 and may be subject to change.

INDIVIDUAL PAPERS

Self-Injurious Behaviour in a Woman With Mild Intellectual Disability and Co-Occurring Psychiatric Disorders: Using the Self-Harm Scale

Kim van den Bogaard^{a,b}, Henk Nijman^{c,d}, and Petri Embregts^{a,b}

k.j.h.m.vdnbogaard@uvt.nl; h.nijman@bsi.ru.nl; p.j.c.m.embregts@uvt.nl

^aDepartment Tranzo, Tilburg School of Social and Behavioral Sciences, Tilburg University, The Netherlands;

^bDichterbij Innovation and Science, Gennep, The Netherlands; ^cBehavioural Science Institute, Radboud University Nijmegen, Nijmegen, The Netherlands; ^dFivoor, Mental Health Institute, Den Dolder, The Netherlands

KEYWORDS challenging behaviour; dual diagnosis; staff

Aims: Self-injurious behaviour (SIB) is one of the most detrimental behaviours for both the person showing the behaviour and for their environment. Structured clinical assessments of SIB, including when and where it occurs, are scarce. The aim of the present study is to increase our knowledge about SIB incidents that are documented directly through observation in their natural context and to learn more about the self-injurious behaviour of individuals showing a high rate of SIB. **Methods:** Staff completed a Self-Harm Scale (SHS) form every time they witnessed SIB in individuals with mild to borderline ID and co-occurring psychopathology. The individuals displaying the most self-harming behaviour were interviewed together with their psychologists. **Results:** During an observation period of 41 weeks, 104 SIB incidents of 8 individuals (24%) were reported. One woman showed more than half of the incidents (53%), consisting mostly of head-banging and cutting. The incidents mostly took place in her own room in the evening. If support staff was able to identify triggers, the most often mentioned trigger was psychological. These results were also confirmed by both the woman and her psychologist. **Conclusions:** SIB is a serious problem in people with mild to borderline ID. Both interpersonal (e.g. interactions) and intrapersonal triggers (e.g. mental state) are reasons for individuals to show SIB. It is important to consider both types of triggers, as they can differ among individuals.

© 2017 Taylor & Francis

Could There Be a Role for Electroconvulsive Therapy or Deep Brain Stimulation in the Management of Self-Destructive and Aggressive Behaviour?

Kaija Järventausta^a, Kirsi Kakko^a, Leena Pihlakoski^a, Nina Maria Bjelogrić-Laakso^b, and Kai Lehtimäki^c

kaija.jarventausta@pshp.fi; nina.bjelogric-laakso@pshp.fi

^aDepartment of Psychiatry, Tampere University Hospital, Tampere, Finland; ^bSpecial Services for the Developmentally Disabled, Tampere University Hospital, Tampere, Finland; ^cDepartment of Neurosciences and Rehabilitation, Tampere University Hospital, Tampere, Finland

KEYWORDS behaviour therapy