**Recognising behaviour as distress, in practice - webinar: Q&A**

These questions were raised during the webinar and the presenters and authors of the discussion paper have provided these answers from their perspective.

**How to identify challenges to minimise heightened distressed times?**

I think this is asking about how to prevent stressful situations so they don’t occur in the first place, therefore reducing the risk of distress and unnecessarily risky behaviour. Developing autonomy is the big thing here, someone who is in control of their life will be able to manage (at least at a strategic level, if not moment-by-moment) their stress levels by working with staff to put in place effective systems and routines for all aspects of life that need them. Strong lasting trusting relationships with support workers will help a great deal, as systems and routines will be embedded and streamlined, and experienced staff who understand the individual will help see problematic situations coming and be better able to manage them under direction from the service user.

**Can you give advice how can people deal with anxiety - when high turnover of staff for supported individuals best practice?**

I think this question is asking about how to support individuals who are struggling to cope with high staff turnover. High staff turnover is indeed an issue for several reasons. It places an increased burden on the service user to learn what new people are like and how to get what you need from them, systems and routines have be learned anew and mistakes will be made, broken emotional attachments have to heal and new attachments formed, increased stress from insecurity and unpredictability related to not knowing who will turn up and how long existing staff will stay. These problems are sometimes inadvertently made worse by providers discouraging attachments to form between service users and staff. They way to fix this is to retain staff – don’t micromanage; allow attachments to form; give legal training around risk assessment, negligence, and rights based support so staff can relax and not worry about getting into trouble every time something goes wrong; pay them a living wage; keep their shifts consistent as far as possible; allow them to make mistakes and learn from them in a relaxed constructive way.

**What is best practice for anxiety over toilet incontinence and heavy smearing?**

It is difficult to give useful general advice, but there are a few points I can make. It might be difficult for an autistic person to physically sense when they need to go to the toilet (difficulties with interoception). Some autistic individuals may not understand that going and sitting on the toilet is necessary or preferable. Sometimes an autistic person may be so hyper focused on something, they ignore the need to use the loo until it is too late. Trauma or extreme stress may well be a cause, but we obviously don’t know enough to offer specific advice. We can suggest all the usual ways to reduce stress and build trusting relationships: Using preferred communication, maximising autonomy, reducing social demands on an individual, predictability in support provision, allow attachment with specific support staff who show strong affinity and understanding, reducing sensory demands (unfortunately wipe-down environments can be echoey and bewildering), maintaining systems and routines.

**Has the challenging behaviour label been replaced with behaviours of concern?**

The NAT has no set position on preferred vocabulary. We would advise thinking about what you want to communicate and what behaviour in particular you want to reference and use the language that best does that job. Consider if it is actually necessary to talk about a person's behaviour at all, or if it’s more useful to talk about their distress or unmet needs, as these latter may be the more relevant considerations. It may be helpful to describe a particular action you are thinking of rather than in behaviour in general terms. If language about behaviour in general is used, it is always helpful to imagine (and if in doubt to ask) how an individual might feel if that language was used in their presence.