EARLY TO MIDDLE STAGE DE-ESCALATION TIPS
It is always best if the most skilled person engages with an escalated client, as soon as possible. We all have had different experiences with anger, in childhood and adulthood, our own anger and others. If we feel highly distressed by others' anger, it is critical that we let our co-workers know this, so we are not called upon to manage escalations, or we can hand-off escalations as soon as possible.

Know your biases. If we were raised in the US, the chances we have negative biases toward those with darker skin is very high. Additionally we tend to have positive bias towards those in our racial affinity group. We also might have negative bias around gender, age, specific conditions like chronic pain or addiction, people who remind us of someone in our past, etc. Only if we know this, can we quickly work to manage it during an escalation. If we don’t know, we will likely respond less empathically and less skillfully to people who are in groups that have been historically ‘othered’ or marginalized.

Always remember the only goal when someone is somewhat escalated (raised voice, sarcasm, arguing, swearing) is the physical and emotional safety of everyone: staff, escalated client, and all witnesses.

When someone is escalated it can be very helpful to move the person AWAY from everyone else. This is to lower the impact on other clients and staff, who can be very frightened by angry people, and also because it is easier to de-escalate someone when there is not an audience. Think immediately about the environment – the first question to yourself and your team should be: “How can I get this person away from everyone else?”
Communication between staff is extremely important. We ideally have a **team approach** to people who are escalated, whenever possible. As soon as we see signs of early escalation, huddle with co-workers to develop a plan. The most confident and skillful staff member ideally takes the lead in communications with the escalated client.

Try to **humanize yourself as much as possible**. Hold out your hand for a handshake or other friendly gesture if you feel the person will be receptive and it is safe to do so. Apologize for something with a small self-disclosure. Whenever possible, ask them to come into an office to talk privately. Frame this offer as a benefit to the client. If the client feels unpredictable, or it feels uncomfortable to have them in an office, ask them to step outside the clinic to talk with you. Again, frame this as a benefit to the client.

> “Hi, my name is Martha, I’m the clinical supervisor here. I wish I could shake your hand! I’m so sorry to keep you waiting, my son isn’t supposed to call me here, but he just did and I couldn’t get off the phone! I’m going to help you with this today. Can we go sit in my office? I will be better able to help you if we are alone (or if you want to talk to them outside, “we will have more privacy outside”, or appeal to their caring side, “let’s move outside, just in case the kids here get scared.”)"

Avoid defending, being ‘right’ or informing of consequences when someone is escalated. This can ALL be done later. Forget all of these things. The ONLY goal is to have the escalated person regain management of their anger and/or minimize the impact on others.

**Avoid explaining** why they shouldn’t be mad, why what they are saying isn’t accurate, or why it isn’t the organization’s fault that x, y, z has occurred. Remember that when people are escalated, their brains are flooded with adrenaline and their cognition is impaired. This is not the time for reason or logic.

Affirming strengths can be a very powerful intervention, when it is genuine. Try to highlight what the person is doing well in the situation, even if it is just their ability to bring their concerns to the forefront. For example:

> “I can tell how angry you are and I just want to tell you I can see you are trying really hard to keep your voice low. I really appreciate that. Thank you.”
Let them know you want them to tell you all of the things that they are unhappy about. This is a specific technique to have clients utilize a different part of their brain which helps the anger either lessen or stay stable. You want them to have to THINK with their prefrontal cortex. You can start by saying:

“Okay, can you start from the beginning? I want to hear everything.”

If the client actually has threatened harm, communicate with your team to call the police while you stay at a distance to talk with them if it is safe.

If the client will not move to another location when you ask them, this means they are very, very escalated. In these cases it is important to move everyone else from around them. For example if the client will not leave the waiting room when you ask them to follow you, then instead have all other clients in the waiting room led into the back office into a break room or other area. Make sure a staff member sits with the other clients to help them with regulating and processing their feelings.

Avoid being the one to interact with an escalated client if you tend to get angry, defensive or very frightened when you are around angry people or if you have had a very negative interaction with them before. You are less likely to be able to manage your own emotions (we are all human).

Never interact with an escalated client who specifically asks not to deal with you.
One definition of successful resolution of escalation is a client leaving, not necessarily that their feelings have been resolved. If a client leaves, with minimal impact on others, this is an acceptable end.

Never follow a client who leaves the office or facility in anger. How many people self-manage angry behaviors. If they have said something that indicates a threat to themselves or others, we call emergency services after the client leaves.

Document, de-brief, support, and learn. It is important than all escalations are documented as a critical incident, so the organization can track patterns and consider prevention and support strategies. Debriefing is important for two reasons: 1) to process emotions, soothe our adrenalin response, and help us let go, so we don’t take it with us home. 2) to learn what worked well, and what might have worked better, for next time.

Provide ourselves as much self-compassion as possible. Anger is tough, and often leaves us feeling drained, anxious, hurt, or angry. We can remind ourselves we did the best we could at the time, that we didn’t deserve the anger, and that we have people who love and cherish us.