

# Relational



**The Mandt System®**

Putting People First

## **Chapter 3** Relational Skills

Building Healthy Conflict Resolution Skills

Recommended training time averages 2 - 3 hours



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# Building Healthy Conflict Resolution

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In the previous Relational chapter, we learned about communication as the basis for interpersonal relationships. We are now ready to explore how communication is used to manage interpersonal conflicts. In this chapter you will learn how to improve communication by improving your self- understanding. This means we will be working toward a better understanding of how we communicate. Activities in this chapter are designed for self-reflection and may be difficult for some people. No one in the training will be forced to share publicly – it is a matter of self-improvement by choice. We encourage you to grow by participating in the activities. It is always your choice whether or not to share your experiences with the group.

## Activity 1:

1. *In small groups or with the class, list all the words you associate with the idea of conflict.*
2. *Examine the list. Are there patterns in the words that are associated with “conflict?”*



Frequent responses to the question about conflict are Fight, Anger, Pain, War, Impasse, Destruction, Fear, Mistake, Avoid, Lose, Control, Hate, Loss, Bad, and Wrong-doing. How many of these words did you have on your list? Remember that your perception about conflict will have a major impact on how you approach conflict situations.

You can change your perception! Think about the positive aspects of conflict such as Opportunity, Change, Growth, Resolution, Gain, Good, Constructive, Love. Can you give an example where conflict had a positive outcome for you?

Here is our working definition of conflict:

**An emotional state between two persons *in a relationship* where disagreement or misunderstanding about needs, drives, wishes, and/or demands has occurred. It may also be defined as an expressed struggle between at least two independent *parties who perceive* incompatible goals, scarce resources, and interference from others in achieving their goals. Problems occur when the differences between two or more people necessitate change in at least one person in order for the relationship to continue to grow and develop.**

Conflict resolution is a problem-solving process and human communication is the key to successfully resolving conflict. The Mandt System® has long emphasized the importance of communication in our work with people. We are now expanding our work in the area of interpersonal communication to include the process of conflict resolution. In the Relational Course we will introduce you to the importance of communicating in a positive way with people as well as the basic elements in the communication process. The SODAS method of conflict resolution is the tool we will learn at this level of training. More advanced tools and methods of conflict resolution are taught in the Conceptual, Technical, and Advanced trainer courses. Our goal is to help guide and assist another person to a peaceful resolution of conflict.

In this chapter, we will learn skills designed to help you work with people who are experiencing low level conflicts. People with low level conflict present a low risk of harm to themselves and others. It is important to learn the Relational Course skills well as they form the foundation for everything to follow. We believe the non-physical skills taught in the Relational Course to be the most important skills of all that we teach. These skills are the ones we use most often, are the most effective, and require work on our self. This means we must develop a level of self-awareness. To move forward you must first be willing to honestly assess yourself. If you want to be successful in using this program honesty with yourself is critical.

### **Learning Objectives**

It is important to know our goals for this section of the training. Please read the following objectives carefully. They will give you a good picture of what you will learn during this part of the training.

It is the intent of the Mandt System® that upon completing this chapter the students will have

1. Articulated the importance of positive communication in building trust in relationships with other people.
2. Articulated the effects of perception in communication and problem-solving.
3. Identified skills for perception checking.
4. Described how stress affects communication.
5. Developed an understanding of empathy in communication.
6. Demonstrated an understanding of conflict resolution as a problem-solving process.
7. Demonstrated skills for assertiveness and authenticity in personal communication style.
8. Articulated the steps in the SODAS method of conflict resolution for working with low-level conflicts.
9. Developed an understanding of the Conflict Cycle.
10. Articulated the five basic Conflict Styles and how personal attitudes and beliefs influence them.
11. Described the phases of the Crisis Cycle and appropriate preventative measures and responses for each phase.

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# Communication and Relationships

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## Understanding Our Communication Style

Human communication is defined as the process of “sending and receiving messages” between people. While the definition may sound simple the process of communication can be very complex. In the previous chapter we examined the complexity of this process. The Mandt System® has long recognized the importance of positive communication. We believe it is important to send messages that help build positive relationships with people. If the messages we send to people are consistent over time, we will begin to build trust in our relationships. People will perceive us by our actions - by what we say and do. We must also remember that our thoughts and beliefs are part of our communication. For our communication to be positive, our words, actions, and thoughts must be consistent. In other words, we must be honest about how we feel in our words and actions. One way of understating this concept is the phrase “**authentic communication**”. If we are dishonest the other person will sense this in us and react in a negative manner. He will distrust us. The simple model pictured below illustrates this process:

**What we think → what we say → what we do → how people will perceive us**

In previous chapters, we talked about the importance of the way we think; our philosophy and attitude is the most important part of our interaction and communication with others. If we have a poor attitude our behavior will likewise be poor, resulting in negative interaction with others. We must be mindful of our beliefs as we look at the next steps in our positive communication model - 'What we Say' and 'What we Do'. Nowhere is this more important than when we are working with people in conflict.

## Understanding How Stress Affects Communication

During conflict people are usually under stress. As we have learned, our stress can be measured by its intensity in the Crisis Cycle. Conflict takes place in the higher phases of the crisis cycle. It is in the higher phases of the crisis cycle that hearing, reasoning, compromising and communication skills are at their lowest; and it is in conflict when we need them the most! In a crisis we are experiencing extreme levels of stress. Understanding how to respond during conflict requires that we first understand our own stress. We will need to go back to what we said in Chapter 1: **Affirm your emotions, then choose your behaviors**. Remember our goal is to learn how to manage ourselves first so we can help guide and assist another person in dealing with conflict.

## Understanding How Our Perceptions Affect Communication

To be truly effective in managing conflict we must be able to hear and understand what it is the person in conflict is trying to communicate. Our understanding is largely based upon our perceptions of the situation. Perceptions are sometimes described by phrases like “world view,” “our mind’s eye,” “in the eyes of the beholder.” Can you think of phrases you have learned which describe the idea of perception?

Perception is a process we all experience. Physiological, cultural, social, occupational, and self-concept aspects of ourselves can influence our perceptions. For example, our senses, age, health, fatigue, hunger, and other biological cycles have a strong influence upon how we see the world. These are physiological in nature. Cultural influences may include language translations, nonverbal behaviors, ethnic, geography, and value we place on conversation (Alder & Towne, 2002).

Accuracy of our perceptions is critical to effective communication and problem-solving. We often tend to judge ourselves more critically than we judge others. We also tend to be influenced by things that are the most obvious to us and miss subtle details. First impressions also work to “blind” us to information that may be very important. It is common for people to assume people are similar to them thus ignoring important differences (Adler & Towne, 2002).

In The Mandt System® training you will learn how to check your perceptions for accuracy. This skill is called perception checking. The goal of perception checking is to prevent misunderstandings.

### **Basic Elements of Perception Checking**

- **Describe what you see, hear, and/or feel non-judgmentally.**
- **Interpret what you saw, heard, and/or felt in at least two ways.**
- **Request clarification (sometimes responses are nonverbal) in a way that treats the person with dignity and respect.**

Remember to watch for the major influences on perception listed earlier in this section as you use perception checking. You and the other person are being affected by these influences.

As we work with people, using the skills of perception checking as well as authentic and assertive communication, it will be important to understand cultural differences. Some people communicate authentically and assertively and are perceived by others, from different cultures, as being “angry” or “aggressive.” These perceptions can be a source of conflict, and should be discussed by checking perceptions – ask! In the following activity you will learn how to use perception checking in your work with another person:

### **Activity:**

Ask the group to look at a picture for 5 seconds, then answer the questions on the slide.

**Perception checking is a very important skill in conflict resolution work.** It is vital for us to understand the other person’s position if we are to help guide and assist him toward peaceful resolution of conflict. One way to better understand the importance of perception checking is in the Indian fable of the “blind men and the elephant”, where a group of men affected by visual disabilities are arguing about what an elephant is like. Unable to reach consensus, they hire someone to take them out in the jungle and find an elephant. Once they find it, one man says an elephant is like the largest tree in a jungle. Another says no, it is like a massive wall. Still another says that they are both wrong, an elephant is like a snake, while a fourth says an elephant is like the leaf of a palm tree. It is not until they put all their perceptions together that they can really know what an elephant is. In the same way, **when people are in conflict, they will need to put their perceptions together in order to really see what the problem is.**

There are two additional aspects of our communication that are very important in conflict resolution work. These aspects are assertive and authentic communication. We will learn about these areas next as our communication skills continue to build.

## Understanding Assertive and Authentic Communication

Our goal is to communicate in a way that is positive for us and the other person. One important part of positive communication is keeping our communication balanced. Think of an assertive/authentic communication as being the middle or balance point on a continuum with passive communication style and aggressive communication style at either end. When communicating assertively, we communicate what we **think** with dignity and respect. When we communicate authentically, we communicate what we **feel** with dignity and respect. Learning assertiveness skills is part of learning how to manage yourself. Remember, being successful in using this program requires self-improvement. It's not just about the other person; you are a part of every interaction.

Passive Communication Style

Aggressive Communication Style



Balanced Communication Style

Sometimes being assertive can escalate the situation. Learning to have good judgments in this area requires the ability to understand the other person by using good listening. Remember, **listening** requires two skills if we are to be effective listeners: **hearing and observing**.

## Understanding Confrontation in Conflict - It's about fear

Conflict usually starts when one party in the conflict confronts the other. People usually wait to confront others until they have enough emotional energy to do so. Think about the last time you had a conflict with someone. Was it over one issue, or were there several issues that were discussed?

Usually, people will put up with low levels of conflict like disappointment, frustration, etc., until there is a straw that breaks the camel's back. We wait to confront others until the possible pain of being rejected is less than the pain we are feeling as a result of the stored up frustrations, disappointments, etc. It is as if we are saying, "This relationship is not important to me. If you reject me now, it is OK because I hurt so much I can take the risk of rejection." We confront others when we are mad enough, angry enough, disappointed enough, etc. to take the risk of rejection. In a sense we are managing our fears when we confront someone.

David Augsberger (1982), in a book called Caring Enough to Confront, suggests that instead of confronting that we "carefront." This involves saying "Because I care about you and our relationship, and I want to continue this relationship and help it grow, I need to talk to you about \_\_\_\_\_." By taking this approach, we can take ownership of our feelings and affirm the other person at the same time we talk to him about scarce resources, incompatible goals, etc. It is a way of treating the other person or people with dignity and respect while we engage in the process of confrontation.

## What are “You-messages?”

“**You**-messages” are messages we use to put people down (e.g., parents, spouses, children, co-workers, clients, residents, patients, students, etc.) They can give blame, they can criticize, and they can accuse a person. When people don’t cooperate or listen to us, we may be sending **You**-messages instead of **I**-messages.

For example, “You don’t think about anybody but yourself.” “You don’t use your head.” “You’re never on time.”

When a person is at Escalation Phase of the Crisis Cycle, he may say things in “you language” because he is upset. By listening to him and responding rather than reacting, you can help the person to de-escalate.

## What are “I-messages?”

Very simply, an “**I**-message” is an alternative to a **you**-message. **I**-messages help us share our feelings and concerns. By using **I**-messages, we assert that we’re responsible for our own emotions, that we’re in charge of our feelings. Instead of saying, “You made me feel bad,” we say, “I feel discouraged.”

**Authenticity** → **the effectiveness of our assertiveness**

**I**-messages have a specific form. To formulate **I**-messages, follow these three steps:

1. Describe the behavior you find bothersome. Simply describe; don’t blame: “When I see the gas tank’s empty, . . .”
2. State your feelings about possible consequences of the behavior: “I feel anxious . . .”
3. State the consequences: “because I have to get gas and I might be late for my appointment.”

Simply stated, the format looks like this:

“When \_\_\_\_\_, I feel \_\_\_\_\_ because \_\_\_\_\_.”

“I feel \_\_\_\_\_ when \_\_\_\_\_.”

### Examples:

**Instead of** “You don’t think about anybody but yourself.” **Try** “I feel frustrated when the TV is so loud, because I can’t hear what the caller is saying.”

**Instead of** “You don’t use your head.” **Try** “When I find the door unlocked I get worried because we might be robbed.”

**Instead of** “You’re never on time.” **Try** “When you’re not home on time and don’t call, I get worried because I don’t know where you are.”

## Suggested Reading

- How To Talk So Kids Will Listen & Listen So Kids Will Talk by Adele Faber and Elaine Mazlish, (Avon Books, ISBN: 0-380-57000-9).(1980)
- Systematic Training for Effective Teaching (STET): Teacher's Handbook by Don Dinkmeyer, Sr., Gary D. McKay, and Don Dinkmeyer, Jr., 1980 American Guidance Service, Inc., Circle Pines, Minnesota 55014-1796. All rights reserved.

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## Understanding Empathy in Our Communication

Once we understand our communication style, problem-solving can be effective. People who communicate effectively are naturally good listeners — they hear and understand the other person. The message they send to other people is one of empathy. This is an idea that has often been used to describe effective caregivers — those who have empathy. What is empathy? Empathy is the ability to re-create another person's perspective. This requires three areas:

- Perception checking
- Understanding emotions
- Showing genuine concern

Sympathy is not considered to be empathy because it does not require us to understand the perspective of the other person. Experts define sympathy as compassion for another person's predicament. While sympathy is an important part of showing empathy it is not sufficient by itself.

There are many associations or perceptions we carry with us about the idea of conflict. Our understanding of conflict may be different depending upon many different factors. Some of these factors are moral and cultural values, personality traits, neurological issues, communication skills, and educational experiences.

Assertive communication and authentic communication are equally important in our work with other people. These two aspects of communication really cannot be separated. As you practice new communication skills expect them to feel uncomfortable at times. It is not critical if we make mistakes as we are learning new communication skills. We must, however, recognize the importance of improving our relationships with people by using positive communication.

## **Understanding the Origins of Conflict - Where It Comes From**

In Chapter 1 (Building Healthy Relationships) we introduced the concept of Maslow's Hierarchy of Needs. In that chapter, we discussed how to use this model to identify needs and to help people meet their needs in ways that did not cause harm or injury to themselves or others. When doing conflict resolution work, the principle remains the same.

When people have their basic human needs met and feel safe and secure, they can build healthy relationships. When all three of these building blocks are in place, productivity soars. We have experienced this, ourselves, at David Mandt and Associates. We have worked hard to create organizational structures that provide for fidelity and predictability and as a result our relationships have become even healthier than they were before. As an organization, we feel that our productivity increases are tied directly to these factors.

Most people think that the problems we face at work are problems of achievement. Words like "non-compliant" and "uncooperative" are used to describe behavior in all people, staff as well as individuals served. We think that our conflicts are in the area of achievement. What we need to do is to make sure that people's basic human needs, to the extent we are responsible to do so, are met and that they feel safe and secure in the physical as well as the relational environment. Safety is more than physical; it is also emotional and psychological. Statements that belittle others or people who say "you're just acting like a baby" cause harm emotionally and psychologically. We must ensure that we are faithful to the concepts of dignity and respect so people can feel that sense of safety and security when they relate with us.

When using Maslow's Hierarchy of Needs (1958), the idea is to find the lowest point in the hierarchy in which there are unmet needs, and to then either meet them or put things in place through referrals to appropriate service organizations to ensure that these needs are met. If there are healthy relationships, if there is a sense of safety and security, if basic needs are met, and there are issues with "achievement," then the conflict is only in that area and not in other areas of the person's life.

Once people are in situations where they have basic needs met, feel safe and secure, participate in healthy relationships, and have a sense of achievement, then they can relax and have fun, they can engage in hobbies and recreational activities, and they can do things just for themselves. This is the final stage in Maslow's theory.

## **Understanding Communication in Conflict - It Is the Key**

When people communicate during conflict, there are two major areas, which must be listened to: facts and feelings. When someone says "You took my money out of my dresser drawer!" with a tone of voice that is high pitched, with a tremor in the voice and tears in his eyes, the fact part of the message is "You took the money out of my dresser drawer."

Listening to the facts and the feelings that are present in every communication is important, as well as understanding where people are in the Crisis Cycle. Feelings drive most conflicts!!!! The problem we often face in human services is that we resolve facts without also addressing the feelings. Keeping your R.A.D.A.R. on will empower you to assess unresolved needs (Maslow) and empower people to de-escalate.

## Understanding Conflict Cycles - How It Works

Each of us experiences conflict in our own unique way. In other words we have our own personal experience with conflict. One way to better understand this idea is to break it down into phases or steps. We call the phases of conflict The Conflict Cycle (Sadalla, Henriquez, & Holmberg, 1987). Do not confuse this cycle with The Crisis Cycle although there may be some similarities. Remember not every conflict becomes a crisis. If we are proactive the situation many times resolves itself without crisis.

**Phase 1 - Attitudes & Beliefs (What we think)** - Our attitudes and beliefs come from many different sources. Each person is a unique human being with different backgrounds and experiences. Our beliefs affect how we perceive the world around us and ultimately how we will respond to the world. These are the first things we bring to any conflict situation, which is why we stress in Chapter 1 (Building Healthy Relationships) that the first of the Graded and Gradual System of Interventions is your **Philosophy and Attitude**.

**Phase 2 - Conflict Experience (What we perceive)** - This is the place where our attitudes and beliefs interact with the world around us. As we will see later our experience with conflict can either reinforce or change our beliefs. Depending on the level of stress (see Crisis Cycle), our ability to manage our behavior may be greatly impaired.

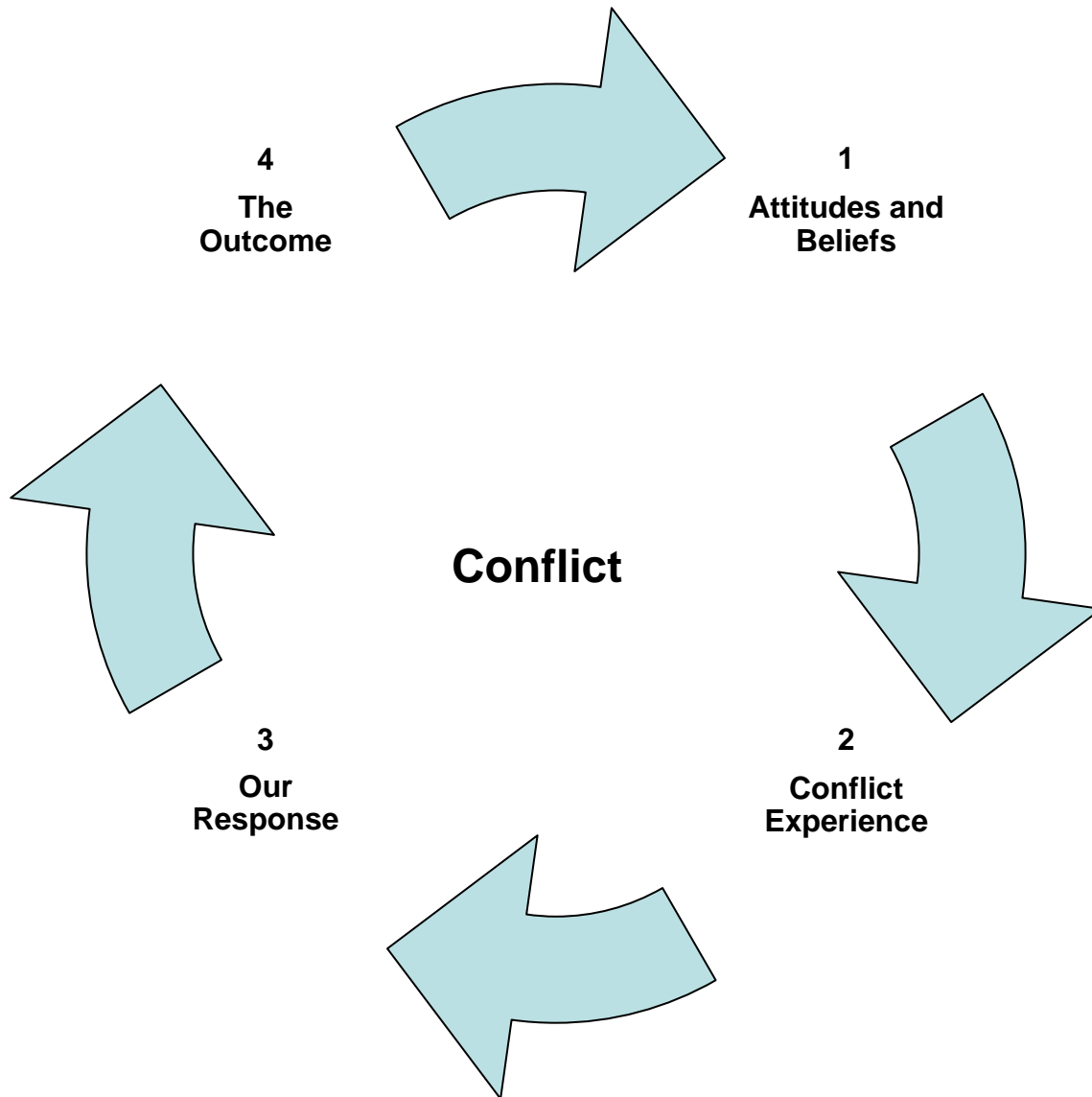
**Phase 3 - Our Response (What we do)** - This is the point in the cycle where many people act on their instincts. People's behavior may range from withdrawal to physical aggression. We call these responses a conflict style. In The Mandt System® approach, what we want to do (our instincts) are usually the things that will make the conflict worse. People choose their style of conflict resolution (Win-Win, Win-Lose, Compromise, and/or Lose-Lose) here, and then they engage in conflict activities. We want to believe that:

- conflict can be healthy, positive, and part of a committed relationship;
- conflict can be another tool to build our relationships with others;
- conflict can result in finding solutions together that we may not have found on our own

**Phase 4 - The Outcome (What we feel)** - Following our response is the outcome phase of the conflict. In some cases the outcome can be continued conflict. It is in this phase that a person processes the conflict experience and forms new attitudes and beliefs about the world and the people in it.

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Notice how our attitudes and beliefs are influenced by the outcome of the conflict. This means that negative outcomes will support negative attitudes creating an unhealthy cycle for the persons involved in the conflict. If we are able to change the outcome to a positive one using conflict resolution skills, we should be able to create a change in beliefs and attitudes. The goal of the conflict resolution process is to provide a response to conflict that will be positive, causing positive results and positive beliefs.



## Understanding Conflict Outcomes - How We Respond

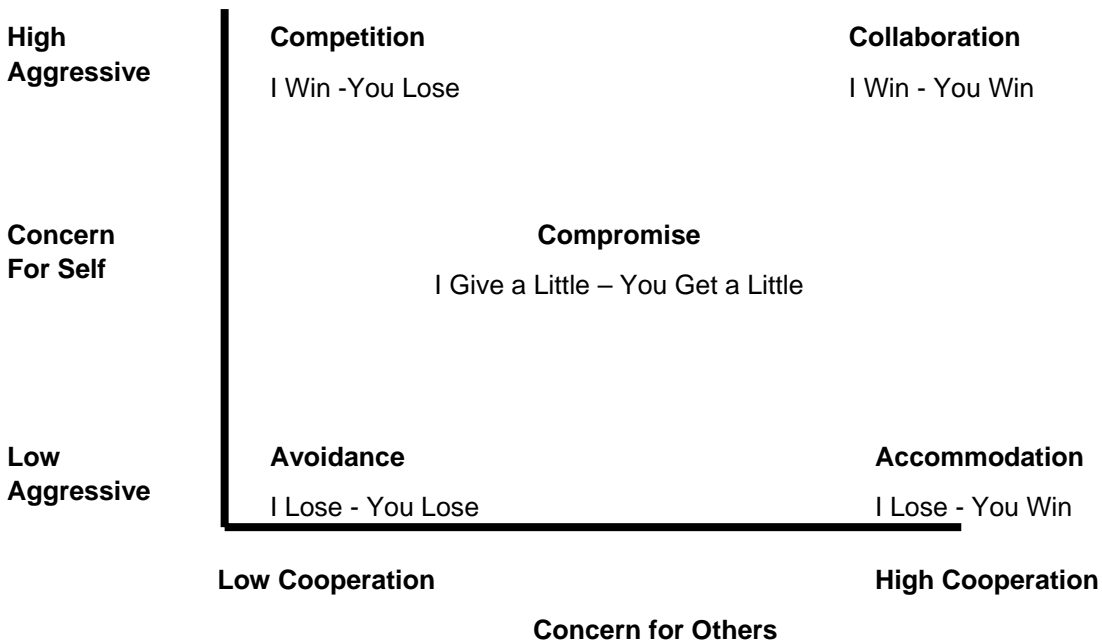
All of us experience and respond uniquely to conflict in our lives. Conflict resolution experts agree that while the experiences may be unique there are some striking similarities in people's response to conflict. These responses have been described as Conflict Styles (Sadalla, Henriquez, & Holmberg, 1987). There are five basic styles we will work with in this chapter.

1. **Win-Win** - If achieved, the ideal solution is one where both parties emerge as winners. This is not always possible to achieve, but it is what everyone should work towards. By defining both parties' needs, then trying to equitably meet those needs while supporting and respecting both people's values, a win/win solution can often be achieved. Relationships are built and enhanced by the process. The term often used to describe this is **collaboration**.
2. **Compromise** - At first sight, this may seem the most favorable option. In some cases it is the best solution possible; but with both sides giving a little, through negotiation, in order to gain something, often the best solution is not achieved - rather a watered down version of the ideal. At worst, both parties may feel cheated and dissatisfied with the out come - a lose/lose outcome! Relationships can be maintained through compromise, but not built. If the parties stay at the compromise level, relationships will eventually be damaged.
3. **Win-Lose** - At the other end of the spectrum, are those who see interpersonal conflict as a challenge in which there is to be a winner and a loser. This may be motivated by self-preservation, but the outcome is usually a battle in which relationships suffer. The stronger party - usually the more aggressive - emerges the "winner." **Competition** is the word used to describe this outcome style.
4. **Lose-Win** is the other side of the coin from Win-Lose, only one of the parties in the conflict chooses to lose in order to preserve the relationship. Many new managers and supervisors struggle with this style, because they see maintaining friendships as more important than addressing issues. The term often used for this is **Accommodation**.
5. **Lose-Lose** - If achieved this is the worst solution to conflict as both parties suffer as losers. Typically in these situations the conflict actually escalates creating more friction and damage to the relationship. The Hatfield – McCoy style conflict is an example of this type of conflict. In these conflicts the parties tend to be of equal power creating a cycle of self-destructive behaviors. Continuous long-term one upsmanship often results.

What we want to do is aim for Win-Win and if we have to, settle for compromise. If we aim for Win-Win and work together to resolve the conflict, wherever we end up will feel more like a win to all parties.

Our goal in conflict resolution work is to achieve a Win-Win resolution. This is not, however, always possible. Sometimes mediation and negotiation efforts take extended periods of time. We must always strive for the ideal, recognizing that we may need to repeat our efforts, moving slowly and allowing the person to maintain dignity and respect.

Below is a graphic representation of the five ways in which conflict can be resolved, according to the most widely used model of conflict resolution (Thomas Kilmann, 1981),



The line on the side represents concern for tasks, and the line on the bottom represents concern for relationships. When you tell people the task is more important than the relationship and dictate results, it is win-lose. Likewise, when you say that the work is less important than the relationship, it is lose-win. When the conflict is avoided, it is lose-lose. Compromise is a middle ground, and collaboration, where you say that both things are equally important, is the best place to be.

**Understanding Attitudes and Perceptions about Conflict:**

**How We Can Maintain This New Approach**

One of the most powerful influences over our reaction to conflict is the perceptions we have about conflict. Earlier we looked at our perceptions about conflict. For many of us the perception was a negative one. We generally feel conflict is not a good thing. Unfortunately, negative perceptions tend to dictate negative outcomes. In a sense these attitudes “maintain” conflict as a state of mind. We come to expect the worst from conflict, even **fear** dealing with conflict.

In The Mandt System® our goal is to resolve the conflict in a way that builds the relationship. It takes time, commitment, and most of all, self-control, to achieve this goal. We want to remember the words of Dr. Haim Ginott and paraphrase them here: It is my response that decides if this conflict will escalate or de-escalate and whether the other person will be built up or torn down.

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We believe there is value in conflict. Sadalla, Henriquez, & Holmberg (1987) identified five important core values or concepts to be used in teaching conflict resolution techniques. Now that we have completed most of the elements of conflict resolution in The Mandt System® we need to ask if we have developed a support for the beliefs that:

- **Conflict has a positive value -**
- **Respectful expression of conflict has positive value -**
- **Voluntary resolution of conflict has positive value -**
- **Diversity has a positive value -**
- **Developing a culture for conflict resolution has positive value –**

“Teaching how to use communication and conciliation skills and developing simple systems that encourage people to peacefully express and voluntarily resolve their differences is after all part of the civic right and responsibility of citizenship” (Sadalla, Henriquez, & Holmberg, 1987).

Changing perceptions about conflict can be a difficult task because we are dealing with human instincts. Human instincts cannot be changed, as we are born with them. Our perceptions are formed from our values, previous experiences, cultures, and expectations. When two people differ in their perceptions, misunderstanding and conflict can result. Our main goal in conflict resolution work is to improve the relationship. What can we build together positively? It is our response that will influence the outcome either negatively or positively. My response will set the tone, set the weather, but it will not dictate your behavior, only influence it.

Open and honest conversation is required in this approach, combined with good negotiating skills, and the ability and **willingness** to recognize the other person’s basic rights while not neglecting our own. Think of the situation as a problem-solving exercise rather than an interpersonal conflict: the other person as a partner, not an opponent. **Remember we want to attack the problem, not each other!**

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# Learning How to Resolve Conflicts

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## Approaching People in Conflict (Non-physical)

In Chapter 1, we described a four-step process for approaching people in conflict. This process is critical for the safety of people in conflict. Here is a review of the non-physical steps introduced in Chapter 1. Using all the steps effectively requires skill in using the Crisis Cycle. Take a moment and review the steps listed below:

- The **first step in all conflict resolution work is to assess yourself**. Using the Crisis Cycle as your guide, determine where you are at in the Crisis Cycle. If you are at a position above the person in conflict it is not possible for you to work effectively with the person in conflict. It is also very important at this stage to examine your philosophy and attitude toward the conflict. Do you have a Win-Win attitude? Are you prepared to be authentic and assertive in your communication? Do you truly value the relationship with the person? **Do not attempt this work without the proper philosophy and attitude.**
- Sometimes it is necessary to call in a neutral third party to assist with the conflict resolution process - we call this **mediation**. If the conflict resolution process involves only two people it is called a **negotiation**. In our experience it is critical to get the right people involved for the process to be successful. Know your limitations and the limitations of this course.
- The **second step is the assessment of the other person(s) in the conflict**. If you are using mediation it will be necessary to assess two other people. Pay close attention to their Crisis Cycle behaviors. If people begin to escalate, stop the process and take a time out. Remember we are working with people who are at low levels of conflict.
- The **third step is to assess the environment**. It is important to conduct conflict resolution in an environment that is non-threatening to the people involved. Threats can be physical and non-physical in nature. Examples of physical threats include situations where the environment threatens the person's physical safety. Equally important are non-physical or emotional threats that are more difficult to assess. Examples of non-physical threats are those which are relational in nature; that means the person is threatened by a person in the environment but not for physical reasons. We see this response often in children who have been traumatized. Strangers will often escalate these children. Adolescents do not negotiate or mediate well in the face of their peers. Often it is necessary to remove them to a private space for the work to be successful. The solution is to remove the person from the stimuli. In other words create a safe environment for the conflict resolution process to continue. **Remember to take as much time as needed - do not rush the process as it will escalate people.**
- The **fourth step is to be prepared for multiple attempts at resolution**. It may take a number of short discussions to ultimately achieve a Win-Win resolution to the conflict. **"Expect the unexpected!"** and **"It takes as long as it takes!"** are two slogans to remember in conflict resolution work. We must be patient. Giving people time and space to work through conflict is a reflection of our value for dignity and respect. Remember our goal is to build something positive out of the conflict.

# The SODAS Method of Conflict Resolution

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The SODAS model for conflict resolution is a simple model designed to help people work together cooperatively to achieve a win-win resolution to the conflict. We believe that conflict is an opportunity for us to improve our relationships with other people if we have the proper philosophy and attitude. This model has been used in schools with upper elementary and middle school age children, as well as older students and adults in many different settings. It is a model that can provide the structure within which feelings can be validated and facts can be assessed as people work together to build relationships and resolve conflicts.

## Steps in the SODAS Method

Once we have completed our preliminary steps for conflict resolution we can use the SODAS model as a guide through conflict. In this model we will:

- Help the person(s) identify the Situation (Define the Conflict)
- Help the person(s) develop Options (Generate Solutions)
- Help the person(s) see Disadvantages and Advantages (Evaluate Options)
- Select Solutions (Select Options)

Allow the person to exercise some reasonable control over his environment, regain self-respect, establish trust, and develop effective ways of coping with troubling situations.

### **S = Situation (Define the conflict)**

- What is the situation or problem?
- Let the person explain what is happening.
- Listen to the person's feelings and needs.
- Invite the person to brainstorm with you.

### **O = Options (Generate solutions)**

- List several ideas or options, write down all ideas without evaluation.

### **D = Disadvantages (Evaluate options)**

- List the disadvantages of each idea or option.

### **A = Advantages (Evaluate options)**

- List the advantages of each idea or option.

### **S = Solution (Select an option)**

- What is the best solution; what seems to be the answer; what is he/she going to do?
- Summarize the person's point of view.
- Together, help the person decide how he/she plans to put the solution into action.
- If it is a problem with you, make sure you express your feelings and needs.

**Note: It is often helpful to discuss advantages first so as not to discard possible solutions.**

- Do not tell the person “This is what you should do” or “If I were you this is what I would do.” If the person takes your suggestion and it doesn’t work, it’s your fault that it failed, “See I told you it wouldn’t work.”
- If the person can’t make a decision say, “Would you like to know what other people have done in similar situations?” If he says “yes,” give him some examples, and then ask him, “Which one of those would you like to try?” If he can’t choose, tell him, “think about it and when you decide on one let me know.”

Now we are ready to apply the model to life situations.

### **Approaching People in Conflict (Physical)**

Later in this course, you will learn physical skills for working with conflict. In some cases, people who are experiencing moderate level conflicts also exhibit physically threatening behaviors. We recognize the need to use physical techniques in some cases when the need to protect people from harm is present. When approaching people in conflict it is important to use the graded system of alternatives discussed in Chapter 1.

It is important to remember that when you are working with someone who is using physical methods to express conflict, it will usually be aggression towards others, property damage, or aggression towards self. You already know that this person is in the Crisis Phase of the Crisis Cycle. **You must be aware of where you are at in the Crisis Cycle as well.**

In addition, you need to continue to assess the person and the situation, using one or more of the models presented in this chapter. Part of assessing the individual, then, is knowing what needs the person may feel are not met. Your immediate goal is to use the least amount of interaction necessary to protect people from harm when others are in the Crisis Phase of the Crisis Cycle. You must also manage your own behavior, and be aware of any needs of yours that may be unmet or threatened by the behavior. You need to be aware of your own Values, Attitudes, Needs, and Expectations, as they will impact the person.

When people are at the Crisis Phase of the Crisis Cycle, your goal is to help them to deescalate as quickly as possible to minimize the risk of harm. The longer a person stays at the Crisis Phase, the greater the likelihood that they will harm themselves and/or others. To help them deescalate, you will need to use the skills taught throughout the Relational Chapters of The Mandt System® and manage your own behavior. Following are several pages that review each of the phases of the Crisis Cycle in detail.

## **The Effect of Systems Level Conflict**

Many organizations have experienced conflict among shifts or departments within the organization. Many organizations serving the same individuals in different settings have also experienced conflict between themselves at an organizational level. These conflicts occur frequently, and may negatively affect the people we serve. All of the members of the Training Faculty of David Mandt and Associates have experienced this, and we continue to see it when we train and provide consultation to organizations.

We would encourage organizations using The Mandt System® to find creative ways to address this issue. We have modified our training guidelines to facilitate training between multiple organizations that serve the same individual(s) so they can provide training using the "Individual Plan" model, whether it is an IEP or ISP or IBP or whatever initials may be used. We want to do as much as possible to minimize conflict and maximize the support offered to the people served by organizations.

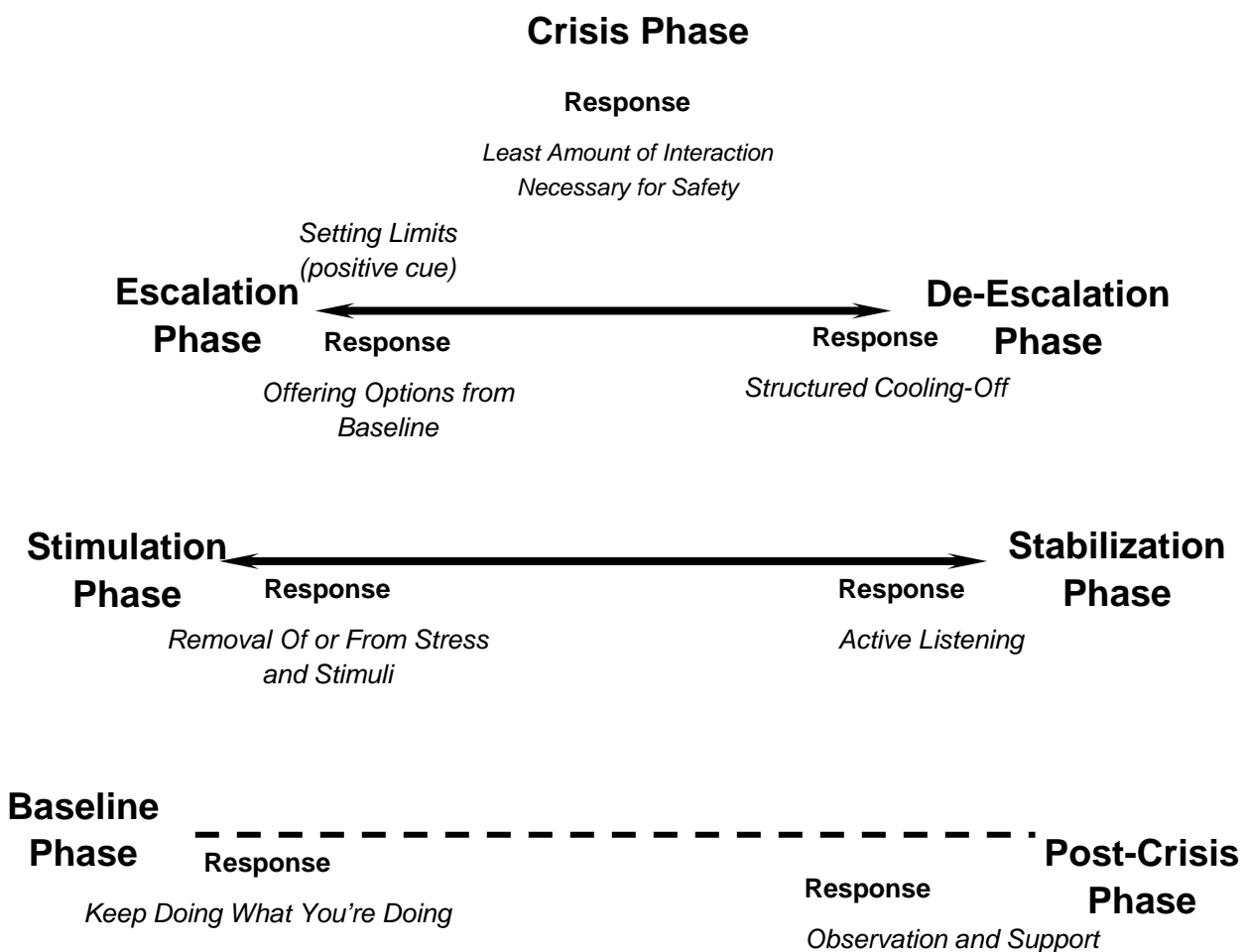
NOTES:

# Crisis Cycle

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One way to describe what is happening when people experience stress or pressure is the crisis cycle. The crisis cycle is a model of behavior, which is presented to demonstrate the phases a person may go through when under stress. This is not necessarily a model of aggression but a model of escalation of behavior.

The crisis cycle can apply to you as well as to the other person whom you are trying to de-escalate. It may involve an EMOTIONAL STRESS and/or a PHYSICAL STRESS. Usually both persons are going through some part of a crisis or stress cycle. Each level of the crisis cycle requires a specific response to provide the most effective means of de-escalating the situation. It is important to understand that every person does not always go through all phases of the stress cycle.



## Crisis Cycle - Baseline Phase - Personal Best -

### **Response - Keep Doing What You're Doing**

In the *personal best*, or *Baseline phase*, the person's physical and/or emotional discomfort or distress, are normal for that person. The blood pressure, pulse, breathing, muscle tension, adrenaline, and endorphin levels are also normal for that person. Reasoning skills, compromising skills, and the ability to communicate and/or choose appropriate words are normal for that person.

### **Possible Causes:**

- The person is being treated with dignity and respect.
- The person's individualized care is consistent.
- The person has freedom, relationship, personal property, and self-esteem.
- The person has little or no pain, fear, frustration, or confusion.
- The person has no or little environmental or situational event, which causes them stress.
- The person is able to communicate effectively with others, either verbally or using augmentative devices or systems such as sign language, electronic aids, or gestures.

### **Preventive Measures:**

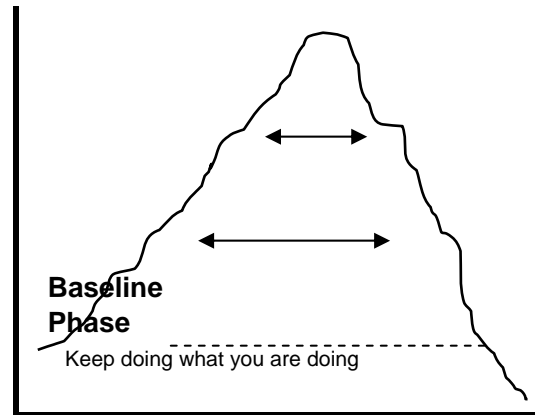
- None.

### **Response: Keep Doing What You're Doing**

- Keep developing a relationship with the person, meeting the person's needs, and treating the person with dignity, respect, fairness, and consistency.
- Keep empowering the person to make choices for himself.
- Keep being an active and non-judgmental listener.
- Keep involving the staff, family members, and his or her friends with meeting those needs.
- Keep trying nonverbal strategies and listen with your eyes and ears. Maintain appropriate eye contact and be aware of personal space and the individual's comfort zone.
- Keep using verbal strategies: Use calm, softer voice tones. Call the person by name if you need to talk with them.
- Keep awareness for the person's trigger mechanisms, as well as any internal or external stressors of which you may be aware.
- Keep your R.A.D.A.R. on to get a list of "self-reinforcing or "self-soothing" behaviors.

**Cautions:** Make sure that you know your environment and that you have had proper training and practice. Also, ask yourself if you can manage the situation alone should the person start to escalate. You may not know what stimulus could trigger the person, but you must be responsive to the person's needs to prevent the crisis cycle from occurring.

**Comments:** If you know the person and have a good history, you stand a good chance of assisting the person to maintain their personal best. It is also important to have co-workers who have been properly trained and can work as a team.



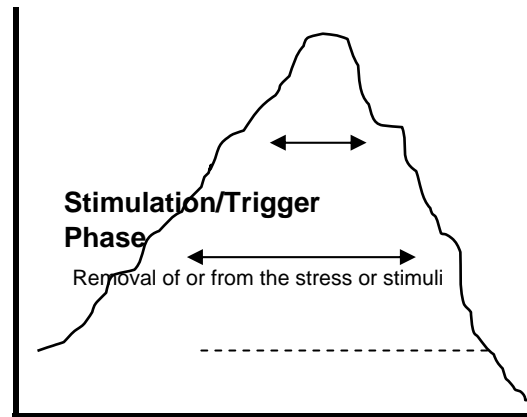
## Crisis Cycle - Stimulation Phase - Trigger

### **Response - Removal Of or From Stress and Stimuli**

In the Stimulation (warming up), something has happened to make you or the other person begin to feel emotionally and/or physically uncomfortable or distressed. There may begin a gradual or rapid increase in the person's blood pressure, pulse, breathing, muscle tension, adrenaline, and endorphins. **This is a transitional behavior** between Baseline and Incident. The person is asking you for help through their behavior.

#### **Possible Causes:**

- Lack of dignity and respect or individualized care.
- Treated with abruptness, inconsistency.
- Sudden loud noises, unexpected touch, anything that surprises the person.
- Hallucinations (seeing, hearing, smelling, or feeling things that are not real).
- Loss or destruction of freedom, relationship, personal property, self-esteem, memory, information, physical movement, self-control.
- Severe or persistent pain, fear, frustration, anger, confusion, racing thoughts, delusions.
- Environmental or situational event, which causes a person stress.
- Inability to effectively communication emotions.



#### **Preventive Measures:**

- Treat the person as an individual with fairness, consistency, dignity, and respect.
- Keep your R.A.D.A.R. on!
- Plan ahead to prevent any stimuli or stresses if possible.
- Avoid surprises; talk to the person about what is coming up and help prepare him.
- Assist the person in coping with his stress.
- Communicate with other team members, including those from other shifts, about potential problems.
- Act in a caring professional manner. If you have to touch, use a light gentle touch.

### **Response: Removal Of or From Stress and Stimuli**

- Stay calm. Watch your own physical and emotional responses. Breathe slowly and evenly to relieve your own tension and to maintain a calmer tone of voice.
- Treat the person with fairness, consistency, dignity, and respect.
- Search for the person's trigger mechanisms. Is the stress internal or external?
- Watch for physical, cultural, environmental, interpersonal, or medical indicators.
- Use reflection. Try to find out the real problem. Could the behavior be a response to fear, embarrassment, shame, frustration, sadness, etc.?
- Give clarification and/or apology to the person if necessary; use please and thank you.
- Remove the stress from the person or help the person get away from the stress.
- Be an active and non-judgmental listener. Try to understand what the person is feeling. You must be responsive to the person's stress whether or not you agree with the validity of the cause of the stress.
- Involve the whole team: staff, volunteers, family members, etc.

- Try nonverbal strategies to give the person other things to do beside escalate. Listen with your eyes and ears. Maintain eye contact (when appropriate). Be aware of personal space and the individual's comfort and discomfort zone. Use slow and small hand/arm gestures.
- Verbal strategies: Use calm, softer voice tone. Call the person by name. Try problem solving or active listening. Note: avoid questions or statements that begin with the word "why." This may cause the person to be defensive about her or his actions. Typically, when people are asked why they engaged in certain behavior, their first response is to justify the behavior. Use "who - what - where - when" questions instead.
- If you can rectify the environment or communication, which has caused the stress, do so to de-escalate the person.

**Cautions:** Make sure you know your environment and that you have had proper training and practice. Also, ask yourself if you can interact with the person alone should he start to escalate. You may not know what the stimulus was that has triggered the person, but you must be responsive to the person's distress to avoid the crisis cycle from occurring.

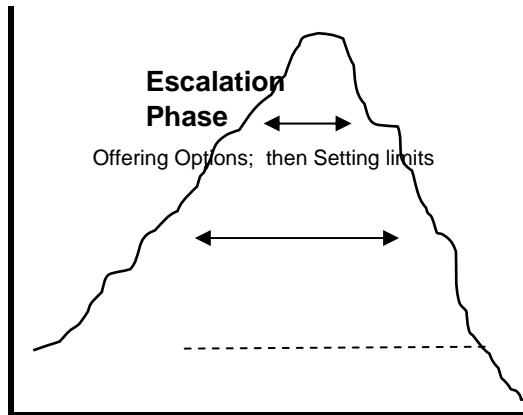
**Comments:** If you know the person and have a good history, you stand a good chance of reducing the stimulation. It is also important to have co-workers who have been properly trained and can work as a team.

NOTES:

## Crisis Cycle - Escalation Phase

### Response - Offer Options then Set Limits

In the *Escalation (going up) phase*, the person is starting to show increased signs of discomfort or distress. There may be an increase in breathing, muscle tension, color of skin, etc. The person's blood pressure and pulse will increase and the body will begin to produce more than normal amounts of adrenaline and endorphins. Some things may decrease, such as hearing, reasoning skills, compromising skills, self-control, and the ability to choose appropriate words; the person may use the language of fear and pain (vulgarity). The person may pace, rock, or talk faster and louder; he may move faster or may seem slower and more deliberate.



### Possible Causes:

- No one recognized or interacted with the person during the Stimulation phase.
- The person has not been removed from the stress or stimulus, the stress or stimulus has remained, or the stress or stimulus has increased.
- Lack of dignity and respect, personal identity, or individualized care.
- Treated with abruptness or inconsistency, or roughly.
- Loss or destruction of information, freedom, relationship, personal property, self-esteem, memory, physical movement, self-control. Inability to effectively communicate emotions.
- Severe or persistent pain, fear, frustration, anger, confusion, racing thoughts, delusions.
- Hallucinations (seeing, hearing, smelling, or feeling things that are not real).

### Preventive Measures:

- Give an apology or clarification to the person if needed; use please and thank you.
- Use the list of behaviors in which the person engages when they are in Baseline phase. These are "self-reinforcing behaviors" which the person does without being reinforced by others. Offer at least three, as this will probably not be perceived as "either-or" choices.
- Important! You are not giving in, you are simply redirecting the person to activities in which they normally engage in the environment.
- Use a de-escalation preference tool (See chapter 5 for more details)
- Treat the person as an individual with fairness, consistency, dignity, and respect.
- Use good nonverbal and verbal skills; and be an active and non-judgmental listener.
- Prevent yourself from engaging in a power struggle or a "battle of wills." This can only make you both escalate and sets up a "win/lose" situation.
- Communicate with other team members, including those from other shifts, about potential problems.

**Responses: Offer Options, then Set Limits (If Needed)**

- Stay calm. Remember your goal is to de-escalate and manage yourself so you can help the other person to de-escalate.
- Offer appropriate options but avoid "either/or" choices. Use the self-reinforcing or self-soothing behaviors from Baseline phase. Give the person the opportunity to save face and regain dignity. Then set some limits; people need to know that you will protect them.
- Keep your R.A.D.A.R. on!
- State positive and negative consequences of his decision and allow the person to choose. If you give a person a choice, you must accept what he chooses from your list of options.
- In the early phase of escalation people may still be able to make decisions and use reasoning; offer options early. As escalation increases, this ability diminishes. **Set limits in the later part of the Escalation phase.**
- Empower the person to exercise his personal freedoms and rights. If it is you who are upsetting the person, back off. Stop and rethink the situation.
- Communicate understanding. This is another way of saying, "I don't know exactly what you are going through, but others have experienced or expressed similar feelings."
- If setting limits, do so by "cueing the positive replacement behavior". If someone is raising their hand, ask them to put their hand down, please. If someone is about to throw papers off the desk, ask them to step back. Ask them to do something that is incompatible with the behavior you do not want to see. If you just say "don't . . ." the person probably will . . .
- Use diversion and/or distraction. If you use humor as a diversion, it should be focused on the situation rather than the individual. If you use distraction, be sure to come back and address the issue of anger when the other person is more calm. Distraction doesn't resolve the anger; it only avoids an inappropriate expression of it.
- Channel feelings into a positive direction or into a creative activity, such as music, exercise, games, art, etc. Choose an activity that is effective for that individual.
- Assist in problem solving. This allows the person to save face, to be validated in her feelings, and to regain self-control.
- For people who communicate non-verbally, take extra steps to ensure staff who know the person and their communication preferences and styles are present to assist and support them.

**Cautions:** Try not to take verbal expressions or any behavior as a personal attack. Be proactive and interact with the person during the Escalation phase when it occurs; don't ignore it or leave it for someone else. Know your environment, and let your co-workers know where you are; use the "Team Approach" and don't try to be a "HERO." Know your limitations and the limitations of this course.

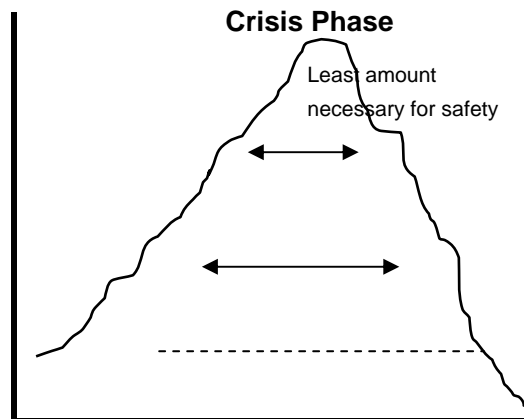
**Comments:** It takes time for anyone in this phase to de-escalate. Take your time and don't rush the person; otherwise you may "push" the person into the Crisis phase.

NOTES:

## Crisis Cycle - Crisis Phase

### Response- Least Amount of Interaction Necessary for Safety

In the Crisis phase, the person is now showing major signs of discomfort or distress. There are very noticeable changes in breathing, muscle tension, color of skin, facial expression, body language, etc.; in addition, the person's blood pressure, pulse, adrenaline, and endorphin levels have reached their maximum. The language of fear and pain (vulgarity), if used, is now at its maximum. Also the person's reasoning skills, compromising skills, and self-control are at their lowest or even nonexistent. It is important to note that the person while in the Crisis phase may use only verbal aggression and may not display any physical aggression. On the other hand, that same person, if pushed enough either verbally or physically, may become physically aggressive to self and/or others.



### Possible Causes:

- Emotional and/or physical crisis. Experiencing physical and/or emotional pain.
- No one interacted or intervened effectively with him/her during Escalation phase.
- Lack of dignity and respect, personal identity, or individualized care.
- Treated with abruptness, inconsistency, or rough physical hands-on.
- Loss or destruction of freedom, relationship, personal property, self-esteem, memory, physical movement, self-control.
- Severe or persistent pain, fear, frustration, anger, confusion, racing thoughts, delusions.

### Preventive Measures:

- Assist in problem solving, offer appropriate options, and avoid "either/or" choices. This supports the person to save face, to be validated in his feelings, and to regain self-control and dignity.
- Use reflection. What's the real problem: fear, embarrassment, shame, frustration, etc.? Note: avoid questions or statements that begin with the word "why." This may cause the person to be defensive about her or his actions. Typically, when people are asked why they engaged in certain behavior, their first response is to justify the behavior. Use "who-what-where-when" questions instead. CAUTION - Using reflection in this phase may be counterproductive. Remember that verbal reasoning skills may be limited in this phase.
- Communicate understanding. This is another way of saying, "I don't know exactly what you are going through, but I have experienced similar feelings." Avoid questions or statements that begin with the word "why;" use "who-what-where-when" questions.
- Use diversion and/or distraction. If you use humor as a diversion, it should be focused on the situation rather than the individual. If you use distraction, be sure to come back and address the issue of anger when the other person is calmer. Distraction doesn't resolve the anger; it only avoids an inappropriate expression of it.
- For people who communicate non-verbally, take extra steps to ensure staff who knows the person and their communication preferences and styles are present to assist and support them.

### **Responses: *Least Amount of Interaction Necessary***

- Stay calm, take a deep breath, and don't overreact; this is evidenced by your physical presence, tone of voice, choice of words, and body positioning; stay out of reach.
- Keep your R.A.D.A.R. on!
- If there is no threat of injury to the person or others, re-evaluate.
- Get some assistance, use the "Team Approach," and don't try to be a "HERO."
- The safety of all individuals is the most important thing. Only the least restrictive interaction needed to adequately protect the person or others, should be used.
- Physical interactions/interventions should only be used for the purpose of protection, and should not be used for the purpose of changing behavior in situations where no protective need is present.

**Cautions:** Know your limitations and the limitations of this course. Be aware that this is the point with the highest risk for injury for you and the other person. When adrenaline and endorphins are released into the blood stream, you and the other person have tremendous strength and ability to resist pain. Adjust your actions accordingly so you do not use more physical interaction than absolutely necessary to protect from harm. At no time should anyone ever use pain; or hyperextensions of any part of the body (whether for brief or extended periods); or any pressure or weight on the chest, lungs, sternum, diaphragm, back, stomach, neck, throat, etc. Don't attempt to manipulate or control the person physically or through nonverbal or verbal intimidation. In this phase, the ability of people to assess the situation and adjust their behavior is limited.

Remember that in this phase, the ability of people to assess the situation and adjust their behavior is limited. When people stop whatever behavior they are using and adjust their behavior, they have already started to de-escalate themselves. How you respond to this will help them further de-escalate or re-escalate. For example, if a person is being restrained and he is struggling, stop to assess how you are holding him. You may be the stimulus from which he wants to escape. **USE THIS!** Help him de-escalate by releasing your hold and verbally reinforcing the fact that he has calmed down. You will only have 3-5 seconds, so be aware and act!

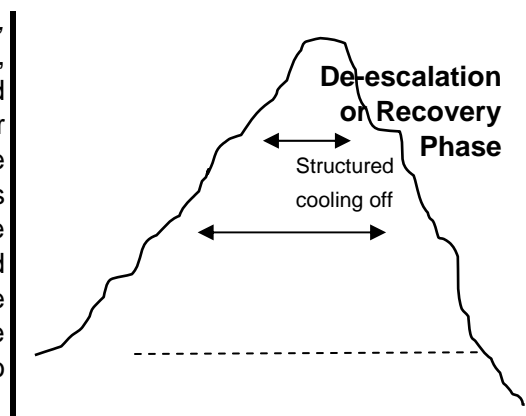
**Comments:** The use of restrictive physical interaction/interventions must be individualized. All physical interaction should be terminated as soon as the need for protection is over, and all use of physical interactions must be documented. Listen to your co-workers and use the team approach. Take your time and don't rush the person unnecessarily. Always treat the person as an individual, with fairness, consistency, dignity, and respect.

NOTES:

## Crisis Cycle - De-Escalation or Recovery Phase

### Response - Structured Cooling Off

In the *De-escalation (going down) or Recovery phase*, there will begin a decrease in blood pressure, pulse, breathing, muscle tension, adrenaline, and endorphins. Physical and/or emotional discomfort or distress is still present and the person may still use the language of fear and pain, i.e., vulgarity. This is very similar to the Escalation phase, and it will take some time for the person's reasoning skills and compromising skills to return to normal. Recognize that two people need time to de-escalate, you and the other person. Allow time and space for this to happen.



### Possible Causes:

- Physical and/or emotional stress and stimulus has been reduced.
- Fear has been greatly reduced.
- Someone has effectively interacted with the person during the Crisis phase.
- People have been given time to work through the issues.
- Freedoms, relationships, and personal properties have been re-established.

### Supportive Measures:

- Treat the person as an individual with fairness, consistency, dignity, and respect.
- Plan ahead to prevent any recurring stimuli or stressors.
- Avoid surprises; keep the person informed as to what is going to happen.
- Communicate with all team members, including those from other shifts, about potential problems.
- Act in a caring, professional manner. If you have to touch, use a light gentle touch.
- Move slowly and smoothly.
- Give apology or clarification to the person; use please and thank you.
- Assist the person in identifying or using Coping or Realization measures.

### Responses: *Structured Cooling Off*

- Structured cooling off with removal of or from the upsetting stimulus and stress. Time is on your side; don't rush it. After the individual has made their preference known about how they would like to cool off, invite yourself to participate as part of the relationship you have built with them in Baseline phase.
- Be non-judgmental. This is not the time to express displeasure or disappointment in the person's actions, nor to coach for apologies.
- Offer appropriate options but avoid "either/or" choices. Empower the person to save face and regain dignity. Then set some limits; people need to know that you will protect them.
- Be aware of your goal. You do not want to re-escalate the situation by stating consequences of behaviors. Do not do or say anything that will cause the person to re-escalate.
- Communicate understanding. This is another way of saying, "I don't know exactly what you are going through, but I have experienced similar feelings."

- Use diversion and/or distraction. If you use humor as a diversion, it should be focused on the situation rather than the individual. If you use distraction, be sure to come back and address the issue of anger when the other person is more calm. Distraction doesn't resolve the anger; it only avoids an inappropriate expression of it.
- Channel feelings in a positive direction or into a creative activity, such as music, exercise, games, art, etc. Choose an activity that is effective for that individual from the list of things the person does when everything is cool.
- Use reflection. Try to find out what the real problem is. Could the behavior be in response to fear, embarrassment, shame, frustration, sadness, etc.? Note: avoid questions or statements that begin with the word "why." This may cause the person to be defensive about her or his actions. Typically, when people are asked why they engaged in certain behavior, their first response is to justify the behavior. Use "who - what - where - when" questions instead.
- For people who communicate non-verbally, take extra steps to ensure staff who know the person and their communication preferences and styles are present to assist and support them.

**Cautions:** Focus on calming down. Do not engage in lengthy logical explanations. Give the person the opportunity to regain control before discussing the crisis with her. It is important to give the person plenty of time and space; don't rush. It takes time for anyone in this phase to de-escalate, stabilize, and recover. It is very easy for the other person, once he/she has rested, to move back to the Escalation phase or Crisis phase.

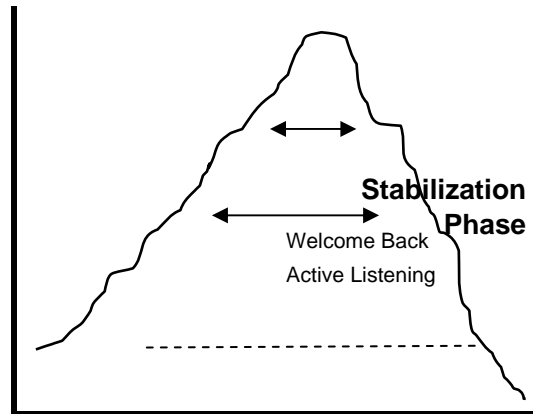
**Comments:** Listen to your co-workers and use the "Team Approach." If a team member or someone else tries to annoy, agitate, or disturb the person who is de-escalating, separate and remove from the area that person who is creating the disturbance.

NOTES:

## Crisis Cycle - Stabilization Phase

### Response - Active Listening

In the Stabilization phase, you are welcoming the person back into the relationships and environments (work and home) that are normal and usual for the person. The person's physical and/or emotional discomfort or distress has been reduced. The person has been empowered to regain some dignity and self-control. The blood pressure, pulse, and breathing are returning to normal; tense muscles are beginning to relax; and adrenaline and endorphin levels are decreasing. Reasoning skills, compromising skills, and the ability to choose more appropriate words are also returning to normal for that person. Allow time and space for this to happen.



### Possible Causes:

- The person is emotionally or physically drained.
- Active, non-judgmental listener was used.
- Reflection was used. What's the real problem? Is it fear, embarrassment, or frustration?
- The person was assisted in problem solving. This gave the person a chance to save face, to be validated in his feelings, and to regain self-control.

### Supportive Measures:

- Be proactive; plan ahead to prevent any stimuli or stresses if possible.
- Avoid surprises; talk to the person about what is coming up and help prepare him.
- Offer some options, and set some limits; people need to know that you will protect them.
- Give an apology or clarification to the person if needed; use please and thank you.
- Treat the person as an individual with fairness, consistency, dignity, and respect.
- Communicate with other team members, including those from other shifts, about potential problems.
- Act in a caring, professional manner. If you have to touch, ask permission.

### Response: *Active Listening*

- Use good nonverbal and verbal skills; be an active and non-judgmental listener.
- Involve the whole team: staff, volunteers, family members, etc.
- Keep your R.A.D.A.R. on!
- Give the person reassurance; often he/she will forget the event quickly.
- Re-establish contact; convey caring and concern for the person; make sure there's no "leftover" hostility or anxiety influencing your behavior toward the person. Structure an opportunity to mend relationships. Do not require apologies if the person does not have the cognitive or developmental ability to understand his actions.
- Use reflection. Try to find out what the real problem is. Could the behavior be a response to fear, embarrassment, shame, frustration, sadness, etc.? Avoid questions or statements that begin with the word "why." This may cause the person to be defensive about her or his actions. Typically, when people are asked why they

- engaged in certain behavior, their first response is to justify the behavior. Use “who-what-where-when” questions instead.
- Assist the person in post-crisis problem solving. Identify situations, options, and other strategies that could have been employed. Have the person communicate possible consequences of behaviors exhibited.
  - Communicate with the rest of the team, other shifts, etc. This person may need time to rest or time away from structured events or routines.
  - For people who communicate non-verbally, take extra steps to ensure staff who knows the person and their communication preferences and styles are present to assist and support them.
  - At this phase, you may need to find ways to re-integrate the person back into the environment. The higher they went in the Crisis Cycle, the greater the likelihood that their behavior was a stimulus or trigger for others. Using side or cross dialogue may be a way of telling the person and others that you as the staff person will make sure everyone is safe.
  - The team must process and evaluate the event as well as feelings: What went well, and what could be done differently to avoid a repeat situation? Make sure that information and care plan changes are communicated to everyone involved with the person's care.
  - Document the incident. If any physical interactions were used, they must be documented.

**Cautions:** Don't expect the person to express remorse or concern as a result of his or her actions. Remember, at no time are lectures or "I told you so" appropriate. This may not be the best time to leave the person alone. The person may not be able to return to where he was when the incident occurred. Be careful of expectations of the individual at this phase. It is easy for the person to move back to the Stimulation or Escalation phase.

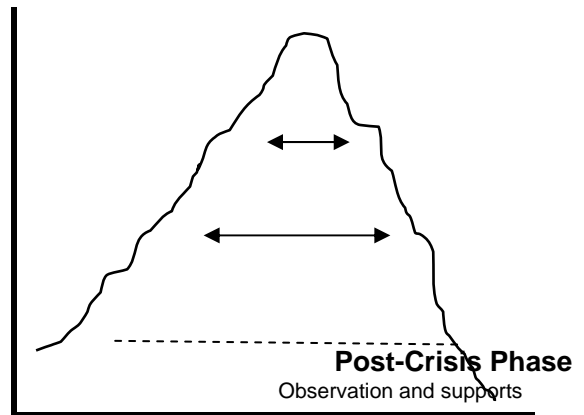
**Comments:** Always treat the person as an individual, with fairness, consistency, dignity, and respect. Respond to the individual's questions and concerns about "What's going to happen to me?" Answer his/her questions honestly and directly. Remember, time is on your side. In processing the event, the team is afforded an opportunity to learn something. Analyze the phases of the crisis cycle from information about the team's behavior, the individual's behavior, and the environment.

NOTES:

## Crisis Cycle - Post-Crisis Phase

### Response - Observation and Support

In the *Post-Crisis phase*, the person, because of emotional and/or physical intensity as well as the length of time in the Crisis phase, may drop down below her normal level or "Baseline" before returning to her usual or normal behavior. The person may appear withdrawn or depressed, and may actually be sleepy and require rest.



### Possible Causes:

- The person is emotionally or physically drained.
- Someone has been an active and non-judgmental listener and communicated understanding.
- Reflection was used. What's the real problem: fear, embarrassment, shame, frustration?
- The person was assisted in problem solving. This empowered the person to save face, to be validated in her feelings, and to regain self-control.

### Supportive Measures:

- Plan ahead to prevent any stimuli or stresses if possible.
- People need to know that you will protect them.
- Give apology or clarification to the person; use please and thank you.
- Treat the person as an individual with fairness, consistency, dignity, and respect.
- Communicate with other team members, including those from other shifts, about potential problems.
- If you are in the appropriate role, you may need to administer medication to help the person to relax.
- Act in a caring, professional manner. If you have to touch, ask permission.

### Response: *Observation and Support*

- Give the person some time for proper grooming, i.e., a warm bath and clean clothes.
- Rest and quiet time should be given; the person may feel drowsy or tired.
- Offer appropriate options but avoid "either/or" choices. Allow the person to save face and regain dignity. Then set some limits; people need to know they will be protected.
- Give the person reassurance; often she will forget the event quickly.
- Re-establish contact; convey caring and concern for the person; make sure there's no "leftover" hostility or anxiety influencing your behavior toward the person. Make sure the person has an opportunity to mend relationships. Do not require apologies.
- Communicate with the rest of the team, other shifts, etc. This person may need time to rest or time away from structured events or routines.
- The team should continue to process and evaluate the event as well as feelings: What went well, and what could be done differently to avoid a repeat situation? Make sure that information and care plan changes are communicated to everyone involved with the person's care.
- Document the incident. If any physical interactions were used, they must be documented.

**Cautions:** Don't expect the person to express remorse or concern as a result of his or her actions. Remember, at no time during the crisis cycle are lectures or "I told you so's" appropriate. This may not be the best time to leave the person alone. The person may not be able to return to where he/she was when the incident occurred. Be careful of expectations of the individual at this phase. It is easy for the person to move back to the Stimulation or Escalation phase.

**Comments:** Act in a caring, professional manner. Use verbal and nonverbal skills. Communicate with the person as well as the team.

You now have an understanding of the crisis or stress cycle, and how it relates to the person(s) you interact with on a daily basis. That person may be your co-worker(s), someone you provide services for, someone you live with, or your next-door neighbor.

## Personal Crisis or Stress Chart

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Now that you have an understanding of the crisis or stress cycle, you can develop your own personal “stress chart.” To begin this exercise, write down the things that are going on in you and around you when everything is “cool.” In order to manage your own behavior, and to help others to manage their own behavior, it is important to know what things are like when life is “OK.”

In the “cool” phase things are happening inside you and around you that tell you several things. You are probably feeling safe, there are probably no surprises, it is not too hot or too cold in terms of the temperature, and you may be doing something you enjoy (working a puzzle, watching TV, listening to music, talking with a friend, etc.).

It is important to keep on doing the things that help you reduce and/or avoid stress. It can also be helpful to have others around you who can remind you of the things you can do to reduce stress, or give you some new ideas, or just be there to support you.

There are stresses in the environment, but they are at a “normal level.” This level will be different for every person. It is important to understand that some people like a lot of noise and activity around them, and others prefer a quiet, peaceful environment. You need to identify what is normal for you and then let others know.

| <b>Phase in the Stress Cycle</b>   | <b>What You Do to Avoid and/or Reduce STRESS?</b> | <b>What Others Can Do For You To Avoid and/or Reduce STRESS?</b> |
|--|---|--|
| <b><u>Baseline Phase</u></b><br>Personal Best -Base Line ( <i>COOL</i> )             |   |  |
| <b><u>Stimulation Phase</u></b><br>Stimulation or Trigger ( <i>WARMING UP</i> )      |   |  |
| <b><u>Escalation Phase</u></b><br>Escalation ( <i>GOING UP</i> )                     |   |  |
| <b><u>Crisis Phase</u></b><br>Crisis ( <i>VERY HOT</i> )                             |   |  |
| <b><u>De-Escalation Phase</u></b><br>De-Escalation or Recovery ( <i>GOING DOWN</i> ) |   |  |
| <b><u>Stabilization Phase</u></b><br>Stabilization ( <i>WELCOME BACK</i> )           |   |  |
| <b><u>Post-Crisis Phase</u></b><br>Post-Crisis ( <i>I FEEL DRAINED</i> )             |   |  |

## Conclusion

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Congratulations! You have completed Relational Chapter 3 – Building Healthy Conflict Resolution Skills of The Mandt System®. We trust that this training will serve you and those with whom you interact in a way that will enhance the quality of your interactions on a daily basis.

Before proceeding to the next chapter, review the learning objectives found at the beginning of this chapter. Do you feel that you have accomplished each of the objectives listed there? If not, mark the objective(s) that you feel uncertain about and review the section of the lesson that corresponds to that objective. When finished, review the terms listed in the glossary. Since the chapters build upon one another, it is essential that you feel you have mastered the concepts and physical skills presented in this chapter before proceeding to the next.

Remember, one of the most important goals you can strive for in your job, home, or community is to develop a relationship with people, meet their needs, treat them with dignity and respect, as well as helping them keep their own dignity and respect for themselves.

## Glossary of Terms

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**Compromise:** At first sight, this may seem the most favorable option. In some cases it is the best solution possible; but with both sides giving a little, through negotiation, in order to gain something, often the best solution is not achieved - rather a watered down version of the ideal. At worst, both parties may feel cheated and dissatisfied with the outcome - a lose-lose outcome!

**Conflict** is an emotional state between two persons in a relationship where disagreement or misunderstanding about needs, drives, wishes, and/or demands has occurred. It may also be defined as an expressed struggle between at least two independent parties who perceive incompatible goals, scarce resources, and interference from others in achieving their goals. Problems occur when the differences between two or more people necessitate change in at least one person in order for the relationship to continue and develop.

**Conflict Cycle:** This is the process we experience when conflict occurs in our lives. We use this cycle to show how conflict works in our lives. The cycle begins with our attitudes and beliefs leading to specific conflict experiences which in turn lead to specific responses to conflict. Our responses then dictate the outcome of the conflict. The outcome then creates or maintains our attitudes and beliefs about conflict.

**Conflict Resolution** is a problem-solving process, and communication is the key to successfully resolving conflict. Conflict resolution is also a proactive approach to problem-solving because the process tends to prevent future conflicts. The Mandt System® uses the SODAS Model and the Conflict Partnership Model for conflict resolution.

**Conflict Styles:** This is the approach we most often take to resolve conflict in our lives. In The Mandt System® we teach four basic conflict styles: Win-Win, Compromise, Win-Lose, and Lose-Lose.

**Lose-Lose:** This is the worst solution to conflict, as both parties suffer as losers. Typically in these situations the conflict actually escalates, creating more friction and damage to the relationship. The Hatfield-McCoy style conflict is an example of this type of conflict. In these conflicts the parties tend to be of equal power creating a cycle of self-destructive behaviors. Continuous long-term one-upmanship often results.

**Mediation** is a problem-solving process in which the parties in the dispute or conflict meet face-to-face to work together to resolve the conflict with the assistance of a neutral third party, called a mediator.

**Negotiation** is a problem-solving process in which the parties in a dispute or conflict meet face-to-face to work together unassisted to resolve the conflict.

**Win-Lose:** At the other end of the spectrum are those who see interpersonal conflict as a challenge in which there is to be a winner and a loser. This may be motivated by self-preservation, but the outcome is usually a battle in which relationships suffer. The stronger party - usually the more aggressive - emerges the "winner."

**Win-Win:** If achieved, the ideal solution is one where both parties emerge as winners. This is not always possible to achieve, but it is what everyone should work towards. By defining both parties' needs, then trying to equitably meet those needs while supporting and respecting both people's values, often we can achieve a win-win solution. Relationships are maintained and enhanced by the process.

## Self Study Questions

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These self study questions are provided to give you an opportunity to gauge your understanding of this chapter. Fill in the blank questions are one word per line. Some of these questions will be used on the final exam.

1. **Circle the correct answer(s) that apply:** What may cause a person to act out? (Ch 1 p 17 S 28,)
  - a. Something internal over which you have little or no ability to impact (e.g. pain, medication, illness, chemical dependency, worry, depression)
  - b. Something external, such as the environment (e.g. room size, noise, temperature, light, smells, weather, etc.)
  - c. An inability to effectively communicate (needs, desires, emotions, wants, etc.)
  - d. Being treated with fairness, consistency, dignity and respect
  
2. **Circle the correct answer(s) that apply:** Understanding empathy in communication involves: (p 77, S17)
  - a. Perception checking
  - b. Understanding emotions
  - c. Consequences
  - d. Showing genuine concern
  
3. According to the model of The Conflict Cycle taught in The Mandt System®, the first thing we bring to any conflict is our \_\_\_\_\_ and beliefs: (p 79, S24)
  
4. **Circle the correct answer(s) that apply:** In order to maintain the Mandt System® approach to conflict, we must: (p 83, S24)
  - a. Build a culture for conflict resolution
  - b. Understand that the expression of conflict has positive value
  - c. Eliminate diversity
  - d. Be prepared for multiple attempts at resolution
  
5. The Mandt System® teaches that Win - Win is when conflicts are resolved in way that builds relationships, while \_\_\_\_\_ will have the effect of maintaining relationships. (p81, S22)
  
6. The Crisis Cycle is a model of behavior, which demonstrates the phases a person may go through when under stress. This cycle includes phases and responses. In the following scenario, identify the name of the phase, and then identify what the appropriate staff response should be: (p 88-101, S28)

Question continues on next page.

Fill in the blanks from the choices below:

| Name of Phase             | Staff Response                                   |
|---------------------------|--|
| Baseline                  | Keep Doing What You're Doing                     |
| Stimulation or Trigger    | Active Listening                                 |
| Controlling               | Impose consequences                              |
| Escalation                | Remove the trigger or stimulus                   |
| Crisis                    | Observation & Support                            |
| De-Escalation or Recovery | Structured Cooling Off                           |
| Stabilization             | Offering Options, Setting Limits                 |
| Post-Crisis               | Least Amount of Interaction Necessary for Safety |

- Susan is engaged in an activity she enjoys. It could be reading or working on a puzzle, or hiking. She is in what phase of the Crisis Cycle? \_\_\_\_\_. The Staff response in this phase is \_\_\_\_\_.
- Someone comes near her with whom she has had words in the past. She does not like what this person did to her, and responds by beginning to mumble under her breath, and her body becomes slightly tense. Now she is in which phase of the Crisis Cycle? \_\_\_\_\_. Staff response in this phase is \_\_\_\_\_.
- No one responded to Susan's behavior, and now she is upset! She raises her voice at this person, and her voice is filled with anxiety. She is now in which phase of the Crisis Cycle? \_\_\_\_\_. Staff response should be \_\_\_\_\_.
- The staff response in the preceding phase was not effective. Now Susan is very upset. She is pacing, her face is red, and she has made verbal threats of aggression. Her hands are bunched into fists. She is now at the \_\_\_\_\_ phase of the Crisis Cycle? Staff response should be \_\_\_\_\_.
- The staff response was effective in the preceding phase. Susan is breathing a bit easier, she is no longer making threats, but she is still upset and her voice is still quavering. She is now at which phase of the Crisis Cycle? \_\_\_\_\_. To best support her, the staff response should \_\_\_\_\_.
- Susan is now more stable. Her voice is no longer quavering. She is now at which phase of the Crisis Cycle? \_\_\_\_\_. Staff response at this phase should be \_\_\_\_\_.
- Susan is tired now, and her clothes and hair are in a bit of disarray. She is now in which phase of the Crisis Cycle? \_\_\_\_\_. Staff response should be \_\_\_\_\_.

