

Behaviours that Challenge as Indicators of Onset of Physical Health Conditions

Key Findings

- Behaviours that challenge are common. Over 21% of adults with learning disabilities had at least one record of a behaviour that challenged in primary care records over an 11-year period.
- Over 2 in 5 of new records of behaviours that challenge occurred within 12 months before or after a diagnosis of a physical health problem or sensory impairment.
- The strongest associations were found for bowel incontinence (2.2 times higher risk), urinary incontinence (1.9 times), constipation (1.9 times), and sleep problems (1.7 times).
- Epilepsy, pain, visual and hearing impairments were also significantly associated with increased risk of behaviours that challenge.

Why is this study important?

Behaviours that challenge, such as aggression, self-injury, and property destruction, affect over 1 in 5 people with learning disabilities in the UK and are a concern for families, carers, and health services. These behaviours can impact quality of life, increase prescriptions of psychotropic medications, and lead to exclusion from education and community life.

Despite widespread recognition of the issue, most existing research has been cross-sectional, limiting our understanding of what triggers these behaviours. This longitudinal study provides the first evidence that new health problems or sensory impairments often precede or closely coincide with the onset of behaviours that challenge.

The findings come at a time when UK policy is focused on reducing restrictive practices, improving health equity, and enhancing person-centred care.

How we conducted the study

We examined information routinely collected in GP records across England to understand how physical health problems, sensory impairments, and behaviours that challenge are linked over time. We followed almost 167,00 people with learning disabilities for up to 11 years between 2009 and 2019, allowing us to see when new health problems were first recorded and how this related to behaviours that challenge.

The study looked at eight commonly reported physical or sensory conditions: constipation, epilepsy, pain, visual impairment, hearing impairment, bowel incontinence, urinary incontinence, and sleep problems.

Episodes were considered linked if they occurred within 12 months before or after a new clinical record of one of these conditions.

What did we find?

- 21.2% of people with learning disabilities had a least one recorded episode of a behaviour that challenges over the 11-year study period, with an incidence rate of 0.10 per person-year.
- 40.9% of episodes of behaviours that challenge occurred within 12 months before or after a diagnosis of a physical health problem or sensory impairment.
- The strongest associations were found for bowel incontinence (2.2 times higher risk), urinary incontinence (1.9 times), constipation (1.9 times), and sleep problems (1.7 times).
- Epilepsy, pain, visual and hearing impairments were also significantly associated with increased risk of behaviours that challenge.
- Incidence rates were slightly higher among older adults, autistic people, and those living in less deprived areas.

Recommendations

- **Expand annual health checks.** Ensure all adults with learning disabilities receive regular annual health checks to identify physical health conditions and sensory impairments.

- **Improve training for carers and professionals.** Update national training to support carers, support workers, and healthcare staff to recognise the signs of undiagnosed physical health problems, understand how these may present as changes in behaviour, and avoid attributing behaviour solely to disability.
- **Strengthen integrated care pathways.** Develop multidisciplinary pathways linking behavioural support with physical healthcare, ensuring that rapid health screening occurs when new behaviours emerge, communication exists between primary care and specialist services, and that there is joint coordination to provide interventions.
- **Embed physical health screening in behavioural assessments.** Behavioural incidents should prompt immediate and proactive physical health assessments.

For more information about this research, please contact: SLDO-info@glasgow.ac.uk

Acknowledgements

This work was conducted by Dr Elliot Millington, Professor Craig Melville and Dr Anne MacDonald, and supported by the Scottish Government via the Scottish Learning Disabilities Observatory.