Learning Disabilities
Current Awareness Bulletin
May 2020

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Title: Can sensory integration have a role in multi-element behavioural intervention? An evaluation of factors associated with the management of challenging behaviour in community adult learning disability services.

Citation: British Journal of Learning Disabilities; Jun 2020; vol. 48 (no. 2); p. 142-153
Author(s): Mc Gill, Ciara; Breen, Cathal J.

Accessible summary: Sensory integration is about how our brain receives and processes information so we can make sense of our everyday life. Behavioural interventions is a term used to describe how to teach people to increase useful behaviours or decrease behaviours that are challenging. Some people with severe learning disabilities can have behaviour that challenges and this can be difficult to manage. To manage behaviours that challenge, restrictive interventions have been used such as people being given medication, or being held by others against their will. Instead of using these restrictive interventions we can use sensory strategies and a low stimulus environment which have been found to be successful in managing behaviours that challenge.

Introduction: Adults with complex needs and severe learning disability present as a serious management problem within the community. Restrictive interventions are often used to manage adults with these issues, even though best practice recommends the use of positive behaviour support. Positive behaviour support involves functional analysis, but it does not specifically focus on sensory integration difficulties as a contributing factor to challenging behaviour.

Methods: A systematic search of the literature was completed using a range of electronic databases, an electronic search, hand search and review of reference lists. Seven relevant studies were identified. These studies were critically appraised and analysed. However, the extent of research was limited and the procedural quality variable, some distinct themes, arose.

Results: Out of the seven intervention studies included in this review, two studies used sensory integration therapy, three employed multi-element behavioural intervention, one utilised environmental stimulation within a multifactor behavioural intervention approach and one used sensory strategies within a structured behavioural intervention programme. The participants across the final seven papers reviewed consisted mainly of males with a high incidence of participants presenting with ASD. A range of assessment tools and outcome measures were used.

Conclusions: The use of restrictive intervention is still an issue in practice. Nearly all the studies reviewed stressed the issue of placing individuals with severe challenging behaviour in the community. Behavioural studies have successfully utilised sensory integration strategies within a structured behavioural format to manage challenging behaviour in a community setting for adults with a learning disability.

Title: Supporting Sexuality in Adults with Intellectual Disability—A Short Review.

Citation: Sexuality & Disability; Jun 2020; vol. 38 (no. 2); p. 285-298
Author(s): Chrastina, Jan; Večěrová, Hana

Abstract: Sexuality in persons with intellectual disability (ID) is one of the frequently discussed topics of many scientific disciplines. Sexuality in persons with ID is determined by the specific features of ID, but also by the attitudes of the society and possibilities of persons with ID to establish intimate relationships, have sexual experience, and be able to express their own sexuality as an autonomous human need. The objective of the review was to present an analysis of published knowledge about supporting (and expression) of adults with ID in the area of sexuality (i.e. support provided to persons with ID as well as carers, professionals and family members providing support to persons with ID in the area of sexuality). Relevant studies (N = 47) identify the following as the most significant areas of supporting sexuality in adults with ID: sexual relationships, contraception, pregnancy and parenthood, sexually transmitted diseases, gay or lesbian relations/relationship, unacceptable and criminal sexual conduct, taking responsibility for sexual behavior, defining sexuality, values, body image, etc. Another important aspect is cooperation with close persons, carers and parents of individuals with ID. There is a possibility to use specific instruments for elementary assessment (SSKAT, SexKen-ID, ASK), the
technique of social stories, and the content of educational program aimed at sexuality in persons with ID. Another option is sexual assistance and self-advocacy. Existing research focuses mainly on prevention of sexual abuse of persons with ID, but attention should also be paid to other aspects of their sexuality. Available evidence suggests that providing support to persons with ID in relation to their own sexuality is a difficult task. There is a need for further training and education of professionals, close persons and carers in order to provide qualified support to these clients.

Title: Psychodynamic psychotherapy in severe and profound intellectual disability.

Citation: Advances in Mental Health & Intellectual Disabilities; May 2020; vol. 14 (no. 3); p. 45-60

Author(s): Himmerich, Julian

Purpose: Psychodynamic psychotherapy is increasingly adapted and used with individuals with intellectual disability (ID) and mental health difficulties. However, the evidence base is still small and largely based on case studies and small trials whose participants mainly have mild to moderate ID. This paper aims to review and critique the literature in regards to the adaptations; and the effectiveness of psychodynamic psychotherapy for those with severe and profound ID.

Design/methodology/approach: A systematic literature search of PsycINFO, Social Policy and Practice, Medline, Cumulative Index to nursing and allied health literature and applied social sciences index and abstracts was conducted. Six studies met inclusion criteria and underwent a quality evaluation and critical review.

Findings: Six papers (all case studies) met inclusion criteria and underwent a quality evaluation and critical review. Some adaptations to therapy were reported, such as a more flexible therapeutic frame and increased use of the physical environment as a therapeutic tool. Due to significant methodological weaknesses of the included studies, it is yet unclear whether psychodynamic psychotherapy is an effective intervention for individuals with severe and profound ID.

Research limitations/implications: Only a small number of case studies met the inclusion criteria. Further research should use more robust outcome measures, larger samples and compare psychodynamic psychotherapy to alternative interventions.

Originality/value: This paper is the first to review the psychodynamic psychotherapy literature with regard to its effectiveness as a treatment specifically for individuals with severe and profound ID and mental health difficulties.

Title: DBT and intellectual disabilities: the relationship between treatment fidelity and therapeutic adaptation.

Citation: Advances in Mental Health & Intellectual Disabilities; May 2020; vol. 14 (no. 3); p. 61-67

Author(s): Patterson, Christopher; Williams, Jonathan; Jones, Robert S.P.

Purpose: There is growing literature on the application of Dialectical Behaviour Therapy (DBT) with adults with intellectual disabilities (IDs). To draw upon the evidence-base from mainstream approaches, adapted interventions must remain true to their theoretical foundations and retain key components. The purpose of this paper was to establish the extent to which DBT has been adapted for adults with ID, and whether existing adapted protocols can still be considered DBT.

Design/methodology/approach: The theoretical underpinnings and key components of DBT were identified. Six DBT studies were critiqued according to these criteria.

Findings: In terms of content, only one intervention comprised all necessary elements. All of the remaining interventions included a skills group; two included individual therapy and another two included group consultation. None of the remaining interventions provided 24-h telephone support. Furthermore, none of the studies explicitly described using dialectical strategies.

Originality/value: To the best of the authors’ knowledge, this is the first paper to critically examine the evidence-base for the use of DBT in ID, particularly its fidelity.
Title: Workplace supports for employees with intellectual disability: A systematic review of the intervention literature.

Citation: Journal of Vocational Rehabilitation; May 2020; vol. 52 (no. 3); p. 251-265

Author(s): Carlson, Sarah R.; Morningstar, Mary E.; Munandar, Vidya

Background: Competitive integrated employment often remains out of reach for people with intellectual disability. Consistently poor outcomes have resulted in research and policies promoting employment through the provision of workplace supports. Researchers have established a substantial body of intervention research addressing pre-employment supports. However, minimal intervention research exists addressing the provision of supports subsequent to job placement.

Objective: The objective of this study was to systematically examine the body of intervention research associated with workplace supports used to address career maintenance and career advancement for employees with intellectual disability.

Methods: A systematic literature review was conducted, examining intervention research published between 1984 and 2018. Fourteen studies met inclusion criteria. These studies included 85 employees with intellectual disability and 57 support providers (e.g., employment specialists, job coaches, co-workers).

Results: Results revealed evidence of interventions addressing career maintenance through the provision of training to both support providers and employees with intellectual disability. Training addressed workplace performance and social integration. No interventions were identified promoting career advancement.

Conclusion: This paper offers an overview of the current intervention research base addressing workplace supports for employees with intellectual disability and makes recommendations for research, policy, and practice.

Title: Nurses’ attitudes, beliefs, and emotions toward caring for adults with intellectual disabilities: An integrative review.

Citation: Nursing Forum; Apr 2020; vol. 55 (no. 2); p. 211-222

Author(s): Carlson, Sarah R.; Morningstar, Mary E.; Munandar, Vidya

Background: Negative health-care provider attitudes are a contributing factor to the myriad health disparities faced by people with intellectual disabilities (ID). Nursing comprises the nation's largest health-care profession, yet no integrative review on this topic is found.

Purpose: To organize findings of studies exploring nurses’ attitudes, beliefs, and emotions about caring for adults with ID, to identify areas for future research, and to discuss recommendations for nursing practice.

Methods: Whittemore and Knaff's integrative review method guided this study.

Results: Twenty studies were conducted across eight countries, dichotomized according to mainstream or ID nursing specialty, and were mostly setting-specific. Common themes included: "knowing the person," "paternalism/infantilization," "communication challenges," "organizational support," "time," and "ID-specific knowledge and experience." Mainstream nurses’ emotions were primarily negative, whereas ID nurses experienced conflicting positive and negative emotions. Antecedents and effects of nurse attitudes and emotions on the quality of care of adults with ID were identified.

Conclusions/Implications: Despite recent increased research on this topic across multiple countries, further research is needed. The findings of this study will aid the development of strategies to address negative nurse attitudes toward caring for adults with ID and act as a foundation for future research beyond the descriptive stage.
Title: Does training adequately equip psychiatrists for intellectual disability?

Citation: Advances in Mental Health & Intellectual Disabilities; May 2020; vol. 14 (no. 3); p. 69-82
Author(s): Lines, Geraldine; Allen, Jodie; Marshall, Caryl Jane

Purpose: People with intellectual disability (ID) experience significant health and social inequality compared to their non-disabled peers. Individuals with ID who access mental health services can have complex comorbidities and presentations. In the UK, a significant proportion of individuals with ID are supported within general adult mental health services not by specialist ID teams. The purpose of this study is to explore whether psychiatry trainees in the Maudsley Training Programme (MTP) feel adequately skilled to support individuals with ID.

Design/methodology/approach: An online survey of trainee psychiatrists in the MTP was completed to evaluate self-perceived skills and knowledge in the care of individuals with ID in mental health services. Statistical analysis of the results was completed.

Findings: Experience of working in specialist ID teams is positively associated with greater confidence and skills among trainees in the care of people with ID; this is beyond what would be expected based on seniority alone.

Research limitations/implications: The response rate was 16.7 per cent; a larger sample size would add strength to the study. Like all online surveys, there exists the risk of selection bias.

Practical implications: UK Policy states that people with ID should be supported to access mainstream services where possible, including psychiatric care. Practical experience for all psychiatry trainees involving specialist ID services and people with ID could improve the care given to that particularly disadvantaged group.

Originality/value: This is the only paper known to the authors that has focused specifically on the skills and knowledge of psychiatry trainees in the UK with regards to ID.

Title: An observational cohort study of numbers and causes of preventable general hospital admissions in people with and without intellectual disabilities in England.

Citation: Journal of Intellectual Disability Research; May 2020; vol. 64 (no. 5); p. 331-344
Author(s): Glover, G.; Williams, R.; Oyinola, J.

Background: Hospital admissions for preventable reasons [ambulatory care sensitive (ACS) conditions] can indicate gaps in access to or quality of primary care. This paper seeks to document the numbers and causes of these admissions in England for people with intellectual disabilities (ID) compared with those without.

Methods: Observational cohort study of number and duration of emergency admitted patient episodes for ACS conditions, overall and by cause, using the Clinical Practice Research Datalink GOLD primary care database and the linked Hospital Episode Statistics Admitted Patient Care dataset.

Results: The study covered 5.2% of the population of England from April 2010 to March 2014 giving a total population base of 59 280 person-years for people with ID and 11 103 910 for people without identified ID. The rate of emergency admissions for ACS conditions for people with ID was 77.5 per 1000 person-years. As a crude comparison, this was 3.0 times the rate for those without ID, but standardising for the distinct demography of this group, the number of episodes was 4.8 times that expected if they had the same age-specific and sex-specific rates. Stay durations for these episodes were longer for both young-age and working-age people with ID. Overall people with ID used 399.8 bed-days per 1000 person-years. As a crude comparison, this is 2.8 times the figure for people without ID. Standardising for their age and sex profile, it is 5.4 times the number expected if they had the same age-specific and sex-specific rates. For patients with ID, 16.6% (one in six) of all admitted patient episodes and 24.3% (one in four) of in-patient care days for people with ID were for ACS conditions. Corresponding figures for those without ID were 8.3% (one in 12) and 14.4% (one in seven). The difference in rates between those with and without ID was most marked in people of
working age. The three most common causes of emergency episodes for ACS conditions in people with ID were convulsions and epilepsy, influenza pneumonia and aspiration pneumonitis. Influenza pneumonia was also a common cause for people without ID. Episodes for convulsions and epilepsy and aspiration pneumonitis were specifically associated with people with ID.

Conclusions: Rates of hospital admissions for ACS conditions provide an important indicator of health literacy, basic self-care (or support by carers) and the accessibility of primary care. High rates are seen for some conditions specifically associated with premature death in people with ID. Local monitoring of these figures could be used to indicate the effectiveness of local primary health services in providing support to people with ID.

Title: People with an intellectual disability: under-reporting sexual violence.

Citation: Journal of Adult Protection; Mar 2020; vol. 22 (no. 2); p. 75-86
Author(s): Willott, Sara; Badger, Wendy; Evans, Vicky

Purpose: People with an intellectual disability are much more likely to be sexually violated and the violation is less likely to be reported. Despite this being high-lighted at least 3 decades ago and improvements in both safeguarding and national reporting processes, under-reporting remains a problem. This paper explored under-reporting alongside prevention possibilities using safeguarding alerts raised in a Community Learning Disability Team within a UK NHS trust.

Design/methodology/approach: Using a combination of authentic but anonymised case vignettes and descriptive data drawn from the safeguarding team, under-reporting was examined through the lens of an ecological model. Safeguarding alerts raised in a particular year were compared with the number expected if all (estimated) cases of abuse were disclosed and reported.

Findings: Only 4.4 per cent of expected abuse cases were reported to the team, which is lower than the reporting level the authors had expected from the literature. There is evidence in the literature of the under-reporting of sexual assault for all kinds of people. Arguably, the implications of under-reporting for PwID are even more traumatic.

Research limitations/implications: Constraints included the lack of standardisation in data collection within the statutory services that report to the Birmingham Safeguarding Adults Board. One key recommendation is that the national provider of data for the NHS in the UK requires more complex and standardised audit information that would allow each local authority to benchmark their practice against a higher protection standard. Another recommendation is that compliance to quality standards sits within a comprehensive strategy.

Originality/value: This paper explored the extent to which the previously documented under-reporting concern remains an issue. Certainly eye-balling safeguarding compliance data in the NHS organisation we worked in led us to a concern that reporting might be even lower than implied in the literature. This together with a renewed spot-light on sexual violence (e.g, NHS England, 2018) led us to decide that it was timely to re-examine the problem.

Title: Social-emotional learning for children with learning disabilities: A systematic review

Citation: Educational Psychology in Practice; Apr 2020
Author(s): Hagarty, Imogen; Morgan, Gavin

Abstract: Social-emotional learning programmes can be effective for typically-developing children and young people in improving their social-emotional skills. This systematic literature review, evaluating peer-reviewed literature from 2007 to 2018, investigated whether these programmes are also effective for children and young people with learning disabilities. The review found preliminary evidence of feasibility but little evidence of the effectiveness of combined social-emotional learning programmes. Play-based and social skills programmes, based on behavioural psychology and social learning theory show some evidence of effectiveness in improving the social skills of children and young people with learning disabilities. Future research needs to use more rigorous designs including larger
Title: Having a son or daughter with an intellectual disability transition to adulthood: A parental perspective

Citation: British Journal of Learning Disabilities; Apr 2020
Author(s): Codd, Jon; Hewitt, Olivia

Accessible Summary: Becoming an adult can be a difficult time. We wanted to find out what it is like for parents who have a son or daughter with an intellectual disability. Ten parents were interviewed. They were asked questions about being in their family, helping their son or daughter, and support services for people with an intellectual disability and their parents. Things that mattered the most to parents: Many parents were confused about what to do when their son or daughter became eighteen years old. They were worried about the future. Independence was important. Parents found it hard sometimes helping their son or daughter to be more independent. Getting more help and talking to other parents. Services and staff can help by: Working together in a better way to help parents. Setting up support groups for parents to talk together and learn from each other. Writing better plans with every person with an intellectual disability.

Background: Transition to adulthood is an important time for young people and may be a particularly challenging time for people with intellectual disabilities. However, there has been little research in the UK regarding the experiences of parents who have son or daughter with an intellectual disability transitioning to adulthood.

Method: The study used interpretive phenomenological analysis to explore the lived experiences of ten parents who had a son or daughter (aged 18–25 years) with an intellectual disability. Half of the sample also had a diagnosis of autism.

Results: Three superordinate themes were generated from the data: (a) Transition: The Good, the Bad and Unknown; (b) Striving for Independence; and (c) Supporting the Supporters. Parents experienced many difficulties and uncertainty related to their role, their son/daughter's independence, navigating services for their son/daughter and accessing support for themselves.

Conclusions: Increased collaboration and consistency from statutory services is required in addition to providing emotional support to parents and facilitating parent support networks. (PsycInfo Database Record (c) 2020 APA, all rights reserved) (Source: journal abstract)

Title: What works in community health education for adults with learning disabilities: A scoping review of the literature

Citation: Journal of Applied Research in Intellectual Disabilities; Apr 2020
Author(s): Owens, Rebecca; Earle, Sarah; McNulty, Cliodna; Tilley, Elizabeth

Background: Research suggests there is insufficient good quality information regarding the effectiveness of health education aimed at adults with intellectual disabilities. By analysing the literature, this review aimed to identify what constituted effectiveness in this context.

Method: Relevant evaluations were extracted from bibliographic databases according to pre-specified criteria. Papers were analysed using QSR NVivo 11 by developing a narrative synthesis and analytic framework that identified and explored text addressing the research question.

Results: Twenty-two studies were included. The review identified two broad components of effective health education: mechanisms and context. Mechanisms included embedded programme flexibility, appropriate and accessible resources, and motivational delivery. An effective context included an accessible and supportive environment and longer term opportunities for reinforcement of learning.
Conclusions: Important gaps in the literature highlighted a need for further research addressing community learning experiences of adults with intellectual disabilities as well as the effectiveness of infection prevention programmes. (PsycInfo Database Record (c) 2020 APA, all rights reserved)
(Source: journal abstract)

Title: The impact of intellectual disability and autism spectrum disorder on restraint and seclusion in pre-adolescent psychiatric inpatients

Citation: Journal of Mental Health Research in Intellectual Disabilities; Apr 2020
Author(s): O'Donoghue, Elizabeth M.; Pogge, David L.; Harvey, Philip D.

Introduction: Features of intellectual disability (ID) and/or autism spectrum disorder (ASD) may hinder responsiveness to interventions typically used during psychiatric hospitalization to manage severely disruptive behavior, and could increase the likelihood of experiencing restraint and/or seclusion (R/S). This study investigated the occurrence of R/S in psychiatrically hospitalized children rated by their treatment team as having ID and/or ASD and those who were rated as having neither.

Methods: Pre-adolescents (N = 777; M = 9.71; SD = 2.71; Range 5–12) consecutively admitted to an acute psychiatric hospital during a one-year period were assigned a consensus DSM-5 diagnosis of ID (n = 295), ASD (n = 48), Both (n = 77), or Neither (n = 361). R/S occurrences were recorded in terms of their frequency and duration.

Results: 52% of patients experienced at least one R/S while hospitalized. The modal number of R/S events for this sample was 0, and for children who experienced any R/S, the mode was 2. Comparisons (ID, ASD, Both, Neither) showed statistically significant differences (p < .001) in R/S events. Children rated as meeting diagnostic criteria for ID (68%; M = 13.9), or Both ID and ASD (78%; M = 18.2), had elevated rates of R/S events compared to cases with Neither diagnosis (35%; M = 7.3). ASD alone (50%; M = 10.0) was not associated with an increase in R/S compared to cases with Neither diagnosis. Data on the duration of these events completely paralleled the frequency results.

Conclusion: Children who met DSM-5 criteria for ID had a greater risk of experiencing R/S during psychiatric hospitalization. To reduce the occurrence of R/S, interventions must be refined and staff specially trained to address the complexities of treating children with ID. (PsycInfo Database Record (c) 2020 APA, all rights reserved) (Source: journal abstract)

Title: The association between challenging behaviour and symptoms of post-traumatic stress disorder in people with intellectual disabilities: A bayesian mediation analysis approach

Citation: Journal of Intellectual Disability Research; May 2020
Author(s): Rittmannsberger, D.; Yanagida, T.; Weber, G.; Lueger-Schuster, B.

Background: A preponderance of behavioural symptoms is assumed to be the main difference in the manifestation of symptoms of post-traumatic stress disorder (PTSD) in people with intellectual disability (ID). However, no study so far has assessed the relationship between challenging behaviour (CB) and PTSD. The present study aims to explore this relationship by exploring whether CB is directly related to trauma exposure or whether this relationship is mediated through core symptoms of PTSD.

Methods: Trauma exposure and current symptoms of PTSD were assessed in 43 adults with mild to moderate ID. Parallel versions were administered to 43 caregivers, including the Aberrant Behaviour Checklist to measure CB. Bayesian mediation analyses were conducted using self-rated and informant-rated data.

Results: The self-report data showed no associations of CB with trauma exposure or PTSD symptoms. The association between informant-rated trauma exposure and irritability was mediated by severity and frequency of PTSD symptoms. The associations between informant-reported trauma
exposure and the Aberrant Behaviour Checklist subscales hyperactivity and inappropriate speech were mediated by PTSD symptom severity.

**Conclusions:** The relationship between trauma exposure and CB was mediated by PTSD symptoms. PTSD core symptoms should be considered as underlying causes of CB, highlighting the necessity to explore trauma biography and symptoms of PTSD. The improvement of self-report assessment in people with ID is an important task for future studies. (PsycInfo Database Record (c) 2020 APA, all rights reserved) (Source: journal abstract)

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**Title:** Employees' experiences of education and knowledge in intellectual disability practice

**Citation:** Journal of Policy and Practice in Intellectual Disabilities; Apr 2020

**Author(s):** Olsson, Sylvia; Gustafsson, Christine

**Background:** The value of support, service, and care in intellectual disability (ID) practice is linked to the competence of the professional caregivers. The quality of work is affected by the level of education of healthcare employees involved.

**Specific Aims:** This study aimed to collect data on how employees perceive their education and training in ID practice and how educational programs prepare them for their working environment.

**Methods:** We used a quantitative approach to investigate how employees reflect on their knowledge about ID and other disabilities and the sources of such knowledge. A total of 262 employees engaged in ID practice completed an online survey.

**Findings:** The results indicated that education significantly influenced the participants' knowledge level, and highly specific education (i.e., workplace training) can substitute for work experience in ID practice. The authors conclude that all workplaces should examine their employees' skills regularly from the viewpoint of fulfilling the needs of people with ID.

**Discussion:** Based on the results, it can be concluded that employees in ID practice need specific knowledge through workplace training (i.e., through hands-on practice at the workplace). Competence development in the form of workplace training is needed to upskill the staff and possibly increases employees' participation at work. (PsycInfo Database Record (c) 2020 APA, all rights reserved) (Source: journal abstract)

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**Title:** Professionals' perspectives on partnering with families of individuals with id

**Citation:** Journal of Policy and Practice in Intellectual Disabilities; May 2020

**Author(s):** John, Aesha

**Background:** Since individuals with intellectual disability (ID) and their parents rely on a wide variety of support and services from helping professionals such as social workers, teachers, and therapists, family-professional partnership is an important area of research. Although past research sheds light on parental views on partnership, relatively few studies have focused on professionals' perspectives.

**Specific Aims:** The aim of this study was to capture the perspectives of ID professionals on partnering with families of individuals with ID.

**Method:** Forty-three ID professionals participated in a focus group that included open-ended questions on characteristics of their most and least effective partnerships with families, and supportive and challenging factors in forming partnerships with parents.

**Findings:** Thematic analyses of the focus group responses helped uncover five themes: (1) clear, honest, and respectful communication between professionals and families, (2) the quality of relationship between the professional and the client's family, (3) professionals' and parents' knowledge and experience in the ID field, (4) degree to which a family is involved, and (5) realistic expectations.
Discussion: These findings can inform both the training of future professionals and parent education initiatives, and in turn, positively impact the quality of parent-professional partnerships. (PsycInfo Database Record (c) 2020 APA, all rights reserved) (Source: journal abstract)

Title: Mediating the interface between voluntariness and coercion: A qualitative study of learning disability nurses’ work in medical examinations of people with intellectual disability

Citation: Journal of Clinical Nursing; May 2020; vol. 29 (no. 9-10); p. 1539
Author(s): Linn Ebeltoft Sparby; Olsvold, Nina; Obstfelder, Aud

Aims and Objectives: To gain knowledge of prevention and use of restraints in provision of medical care to people with intellectual disability. To this end, we explore how learning disability nurses in community services support the individual through medical examinations when facing resistance.

Background: Despite increased focus on limiting restraints, there is a lack of knowledge of how restraints are prevented and used in medical examinations of people with intellectual disability.

Design: We used an ethnographic comparative case design (n = 6).

Methods: The study was carried out in Norway. The analysis is based on data from semi-structured interviews, participant observation and document studies, in addition to health sociological perspectives on how to support individuals to make their body available for medical examination and intervention. The SRQR checklist was used.

Results: Learning disability nurses strove to ensure that examinations were carried out on the individual's terms, supporting the individual in three phases: preparing for the examination, facilitating the examination and, when facing resistance, intervening to ensure safe and compassionate completion of the examination.

Conclusions: Supporting the person was a precarious process where professionals had to balance considerations of voluntariness and coercion, progress and breakdown, safety and risk of injury, and dignity and violation. Through their support, learning disability nurses helped to constitute the "resistant" individual as "a cooperative patient," whose body could be examined within the knowledge and methods of medicine, but who could also be safeguarded as a human being through the strain of undergoing examination.

Relevance to clinical practice: The article sheds light on how restraints are used in the medical examination and treatment of people with intellectual disabilities and demonstrates the significance of professional support workers’ contributions, both in facilitating safe and efficient medical care and in ensuring the least restrictive and most compassionate care possible.

Title: The disproportionately high prevalence of learning disabilities amongst adults attending Saint Marys Sexual Assault Referral Centre

Citation: Journal of Applied Research in Intellectual Disabilities : JARID; May 2020; vol. 33 (no. 3); p. 595
Author(s): Rabiya Majeed-Ariss; Rodriguez, Pablo M; White, Catherine

Background: There is a dearth of reliable data on sexual assault prevalence amongst people with learning disabilities. This work aims to identify the prevalence of learning disabilities amongst adult clients attending Saint Marys Sexual Assault Referral Centre and ascertain the similarities/differences amongst clients with learning disabilities as compared to clients without.

Method: A short validated Learning Disability Screening Questionnaire was completed by adult clients attending Saint Marys for a forensic medical examination during a twelve-month period.

Results: Amongst 679 clients who attended for an FME and completed the LDSQ, 8.2% were likely to have a learning disability and the presence of self-reported: mental health issues (X2 = 11.24, p = .001), self-harm (X2 = 5.63, p = .017) and substance misuse (X2 = 13.15906, p = .001).

Conclusions: Consistent with the broader literature, people with learning disability were over-represented in the sexually assaulted population emphasizing the importance of timely, accessible and appropriate patient-centred care for this vulnerable group.
Title: Video reflection: An emerging tool for training client-centred communication skills in staff supporting adults with learning disabilities in an education setting.

Citation: British Journal of Learning Disabilities; Jun 2020; vol. 48 (no. 2); p. 132-141
Author(s): Meadows, Ben; Taylor, Megan; Rayment, Tara; Johnson, Jane; Mahon, Merle

Accessible summary: Video reflection is one of the best ways to help staff develop their communication skills provided the training setting is supportive. Good communication skills are important so staff can support people with learning disabilities access education. This study filmed education staff working with people with a learning disability at college. The staff watched the video so they could see themselves and think about what they did well and what they could improve on. The results found that staff were better at communicating and more confident using their communication skills after watching the video.

Background: Speech and language therapists (SLTs) contribute to communication with adults with learning disabilities by providing training to the networks that support them. The requirements for successful communication with this population are frequently complex and necessitate an effective training medium to transfer the target knowledge and skills. Video has increasingly been used as a tool to facilitate self-reflection and behaviour change. Currently, there is limited research into the effectiveness of video-based training in education settings for adults with learning disabilities. Therefore, this study investigated the effectiveness of video reflection training (VRT) for support staff in a college for adults with learning disabilities.

Materials and Method: Ten staff members with diverse skill sets completed three VRT sessions aimed at improving their use of communication strategies. Training evaluation measures were taken before and after VRT and included use of communication strategies, self-efficacy, training pre-conceptions and training experience.

Results: Overall, the majority of staff made gains either in their use of communication strategies or in their self-efficacy ratings. Yet, study limitations restrict conclusions regarding whether VRT itself caused these outcomes. Interpretation revealed five factors relating to the effectiveness of VRT: tailoring training to staff’s pre-existing skills, practising facilitation techniques, providing acceptable training, increasing self-reflection skills and using video as a reflection tool.

Conclusions: Regardless of the limitations, this study provides findings that VRT is a useful tool for training support staff to use client-centred communication skills in an education setting. Future training programmes should be individualised and tailored to staff depending on their skill sets.

Title: Prevalence of mental health conditions, sensory impairments and physical disability in people with co-occurring intellectual disabilities and autism compared with other people: a cross-sectional total population study in Scotland.

Citation: BMJ open; Apr 2020; vol. 10 (no. 4); p. e035280
Author(s): Dunn, Kirsty; Rydzewska, Ewelina; Fleming, Michael; Cooper, Sally-Ann

Objectives: To investigate prevalence of mental health conditions, sensory impairments and physical disability in children, adults and older adults with co-occurring intellectual disabilities and autism, given its frequent co-occurrence, compared with the general population. DESIGN Whole country cohort study.

Setting: General community.

Participants: 5709 people with co-occurring intellectual disabilities and autism, compared with 5 289 694 other people.

Outcome Measures: Rates and ORs with 95% CIs for mental health conditions, visual impairment, hearing impairment and physical disability in people with co-occurring intellectual disabilities and autism compared with other people, adjusted for age, sex and interaction between age and co-occurring intellectual disabilities and autism.
Results: All four long-term conditions were markedly more common in children, adults and older adults with co-occurring intellectual disabilities and autism compared with other people. For mental health, OR=130.8 (95% CI 117.1 to 146.1); visual impairment OR=65.9 (95% CI 58.7 to 73.9); hearing impairment OR=22.0 (95% CI 19.2 to 25.2); and physical disability OR=157.5 (95% CI 144.6 to 171.7). These ratios are also greater than previously reported for people with either intellectual disabilities or autism rather than co-occurring intellectual disabilities and autism.

Conclusions: We have quantified the more than double disadvantage for people with co-occurring intellectual disabilities and autism, in terms of additional long-term health conditions. This may well impact on quality of life. It raises challenges for staff working with these people in view of additional complexity in assessments, diagnoses and interventions of additional health conditions, as sensory impairments and mental health conditions in particular, compound with the persons pre-existing communication and cognitive problems in this context. Planning is important, with staff being trained, equipped, resourced and prepared to address the challenge of working for people with these conditions.

Title: Improving mental health in autistic young adults: a qualitative study exploring help-seeking barriers in UK primary care.

Citation: The British journal of general practice : the journal of the Royal College of General Practitioners; May 2020; vol. 70 (no. 694); p. e356

Author(s): Coleman-Fountain, Edmund; Buckley, Carole; Beresford, Bryony

Background: Autistic people are at increased risk of developing mental health problems. To reduce the negative impact of living with autism in a non-autistic world, efforts to improve take-up and access to care, and support in early years, which will typically start with a GP appointment, must be grounded in the accounts of autistic young adults.AIMTo explore how autistic young adults understand and manage mental health problems; and to consider help seeking as a focus.

Design And Setting: A cross-sectional, qualitative study. Autistic participants were purposively selected to represent a range of mental health conditions including anxiety and depression. A subsample were recruited from a population cohort screened for autism in childhood. The study concerns access to primary care.

Method: Nineteen autistic young adults without learning disabilities, aged 23 or 24 years, were recruited. In-depth, semi-structured interviews explored how they understood and managed mental health problems. Data were analysed thematically.

Results: Young adults preferred self-management strategies. Multiple factors contributed to a focus on self-management, including: beliefs about the aetiology of mental health difficulties and increased vulnerability with the context of a diagnosis of autism, knowledge of self-management, and a view that formal support was unavailable or inadequate. Families had limited awareness of professional support.

Conclusion: Young autistic adults without learning disabilities, and their families, may hold erroneous beliefs about autism and mental health. This may affect help seeking and contribute to an exacerbation of symptoms. GPs need to be alert to the fact that autistic young adults in their care may be experiencing mental health difficulties but may not recognise them as such.

Title: The influence of mindfulness meditation on inattention and physiological markers of stress on students with learning disabilities and/or attention deficit hyperactivity disorder.

Citation: Research in developmental disabilities; May 2020; vol. 100 ; p. 103630

Author(s): Gabriely, Ranit; Tarrasch, Ricardo; Velicki, Maria; Ovadia-Blechman, Zehava

Background: Over recent decades, the number of students diagnosed with learning disabilities and/or attention deficit hyperactivity disorders has substantially increased. These students face various challenges and experience stress when receiving higher education.AIMSThe purpose of this
study was to compare two non-pharmacological interventions: mindfulness and device-guided slow breathing, with a control group.

**Methods:** Seventy-three students (age = 25.76, std. dev = 3.10) with attention problems and/or learning disabilities were randomly assigned to three groups: mindfulness meditation, device guided breathing practice and waiting-list control. Before and after the intervention physiological and psychological measures were collected.

**Results:** Our results show that only mindfulness practice improved awareness of the present moment and decreased hyperactivity and inattention. Furthermore, both mindfulness and practice with device-guided breathing were associated with stress reduction, as shown by an increase in the galvanic skin response only in the control group.

**Conclusions:** Implementation of the study results may lead to an advance in treating attention deficit disorders and learning disabilities, especially among higher education students.

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**Title:** What are the perspectives of adolescents with Down syndrome about their quality of life? A scoping review.

**Citation:** British Journal of Learning Disabilities; Jun 2020; vol. 48 (no. 2); p. 98-105

**Author(s):** Sheridan, Ciara; OMalley-Keighran, Mary-Pat; Carroll, Clare

**Accessible summary:** This study looked for information about the quality of life of adolescents with Down syndrome. We found two studies about quality of life that included the voice of the adolescent with Down syndrome. Most of the research includes parents’ voices. Parents’ views are important, but we need to also include adolescents with Down syndrome in research about their lives. Friends, family and independence are important to adolescents with Down syndrome. More information on quality of life is needed to help us understand more about their individual needs.

**Background:** There is a wealth of research on adolescents with Down syndrome (DS) covering a large range of topics such as obesity, speech and language, education and health-related quality of life. However, for quality of life, much of the available literature for adolescents with DS relies on parent proxy reporting. This results in more research on parent’s perspectives rather than from the individuals with DS themselves.

**Aim:** This study aimed to examine the literature to identify the literature that included the voice of adolescents with DS in research about quality of life. It aimed to address the research question: What evidence exists in relation to the perspectives of adolescents with DS about their quality of life?

**Method:** A scoping review allowed for an extensive range of research and nonresearch material to be gathered. Search terms were identified, followed by searches of five electronic databases, Google scholar and Lenus (Irish Health Repository). Two researchers conducted the review. Studies were selected through inclusion/exclusion criteria. A chart summarised information from the selected studies.

**Results:** A total of 596 articles were marked for title and abstract screening. Forty-five articles were included for full-text review. Forty-three of these met exclusion criteria, resulting in two articles which included the voices of adolescents with DS themselves. For adolescents with DS, participation socially and in their communities was important as well as friendships, family relationships and functional independence. These themes need to be further explored.

**Conclusion:** The UN Convention on the Rights of the Person with Disabilities argues strongly for participation (United Nations [2006], UN convention on the rights of persons with disabilities). This paper highlights the lack of and need for further empirical quality-of-life research with adolescents with DS from their own perspectives.

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**Title:** Covid-19 And People With Intellectual And Developmental Disabilities.

**Citation:** Exceptional Parent; May 2020; vol. 50 (no. 5); p. 22-24

**Author(s):** Sulkes, Stephen
Title: Effect of AAC technology with dynamic text on the single-word recognition of adults with intellectual and developmental disabilities.

Citation: International Journal of Speech-Language Pathology; Apr 2020; vol. 22 (no. 2); p. 129-140

Author(s): Holyfield, Christine; Light, Janice; Mcnaughton, David; Caron, Jessica; Drager, Kathryn; Pope, Lauramarie

Purpose: Single-word recognition can support participation in life, including engagement in leisure activities, navigation through the community, and vocational opportunities. Given the limited reading skills of many adults with intellectual and developmental disabilities (IDD) and limited speech, the current study evaluated the effects of using an augmentative and alternative communication (AAC) app, featuring dynamic text and speech output embedded in visual scene displays, on the single-word recognition performance of six adults with IDD who demonstrated limited speech.

Method: A multiple baseline across participants single-subject design was used. Ten target sight words for each participant were selected on an individual basis, based on participant interest. Intervention consisted solely of interactions between investigators and individual participants using the app.

Result: In the absence of any formal instruction and solely through the use of the AAC app interaction, three of the six participants demonstrated increased accuracy in single-word recognition.

Conclusion: Results from the study were mixed, but suggest that AAC apps which provide the dynamic display of text in conjunction with voice output can assist some adults with IDD in achieving gains in single-word reading.

Sources Used:

The following databases are used in the creation of this bulletin: BNI, CINAHL, Medline & PsycINFO.

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