

## Learning Disability Special Interest Group



### LDSIG - E-zine

The LDSIG would like to congratulate all the athletes from across the country that represented Ireland with pride and determination in the recent World Games in China. The Games were very successful and the media attention surrounding the event was well deserved. Congratulations are also extended to the families, friends, supporters and coaching teams of the athletes for their support and encouragement.

The PSI Annual Conference was held in Killarney this year and as usual there was a wide range of papers, posters and workshops relevant to the field of disability and autism. The two events sponsored by the LDSIG; a workshop on risk assessment and a symposium of papers on body-mind practices were well attended and generated plenty of debate and discussion.

A small but enthusiastic group attended the general meeting on the Thursday evening of the Conference. This was an interesting meeting and a number of important issues were discussed including the establishment of a new working party on classification systems. Details of the general meeting are included within this edition of the e-zine.

The e-zine is a forum for the exchange of information between the members of the LDSIG and as usual an open invitation for submission of relevant material for the newsletter is extended to all members.

The LDSIG would like to take this opportunity to wish all its members a very happy and peaceful Christmas and a prosperous New Year.

*John Buttimer*  
Editor

### *General Meeting of the LDSIG* *15<sup>th</sup> November 2007*

Seamas Feehan chaired the General Meeting of the LDSIG which was held at the PSI Annual Conference in Killarney.

Work is continuing on the Challenging Behaviour Document and the Mental Health Document. It is hoped that final drafts would be completed for the Easter Workshop and that a schedule for consultation and publication would be developed in conjunction with the leaders of each working group in the New Year.

There is change in date for the Easter Workshop in 2008 and the scheduled dates are full-days on Wednesday and Thursday the 25<sup>th</sup> and 26<sup>th</sup> of March. A preliminary notice is included.

The Chair reminded members that a number of Committee members stepped down at last year's AGM and that the Committee has a very strong Munster presence but that Committee members from other regions and Dublin would be most welcome. The position of Chair-Elect is currently vacant and this needs to be filled at the March AGM. The Committee meets on average four times a year. If you would like to join the Committee or nominate someone to the Committee then please contact Seamas or any Committee Member through the PSI office.

A new working group was formed to address current use of classification systems in Ireland and other countries. The group is Ciara O'Keeffe, Máire Griffin and Aoife Moran.

The Chair thanked Tim O'Callaghan and his colleagues of Stewart's Hospital and John Buttimer and Margaret O'Rourke for their symposia and workshop at this year's annual conference.

***LDSIG Easter Workshop***  
***Wednesday 26<sup>th</sup> and Thursday 27<sup>th</sup> March***  
***2008***

On Wednesday the 26<sup>th</sup> Dr Mary Mc Carron will present a training workshop on Dementia in Adults with a learning disability.

Dr. Mary Mc Carron is group leader for the Ageing Disability and palliative care research group. In the School of Nursing and Midwifery in Trinity College Dublin

On Thursday the 27<sup>th</sup> Dr Steve Kroupa PhD will present a work shop on using The TEACCH Transitional Assessment Profile (TTAP) and The Psycho Educational Profile Third ed. (PEP III) with individuals in the moderate to severe range of intellectual disability with a dual diagnosis of Autism. He will also give some insights into what recommendations can be yielded from these assessment tools.

Dr Steve Kroupa PhD is Assistant Professor, at the Dept. of Psychiatry in the University of North Carolina at Chapel Hill, USA. He has primary responsibility for directing all activities at the Fayetteville TEACCH Centre, a regional centre of Division TEACCH, which specializes in services for individuals with autism and their families. About 60% of his time is spent in direct and indirect clinical services, with the remainder involved in administration, training, and research. <http://www.med.unc.edu/psych/directories/kroupa.htm>

The Specifics of each workshop will be posted Early in the New Year.

## Useful Websites?

[www.fedvol.ie](http://www.fedvol.ie)

**The National Federation of Voluntary Bodies Providing Services to People with Intellectual Disability** - a national umbrella organisation for voluntary/non-statutory agencies who provide direct services to people with intellectual disability in Ireland. It's members are both voluntary and religious bodies with a clear vision rooted in the respect for and the dignity of the person. In all, the National Federation comprises some 61 affiliated organisations who between them account for in excess of 85% of this country's direct service provision for people with intellectual disability.

The Federation promotes and actively pursues four fundamental principles. People with an intellectual disability have:

- The right to a normal pattern of life within the community
- The right to be treated as an individual with dignity and respect
- The right to care and support in developing their maximum potential
- The right to participate in the decision making process on issues affecting their lives

### Goals and Objectives

The stated goals of the Federation are

- The sharing of information relating to the provision, maintenance and development of services
- The development of strategies in areas of common interest
- The provision of information and support to individual members and local groups of members, when required, and supporting member organisations in their advocacy on behalf of individual persons
- Making representations to the Departments of State, other public authorities and national and international bodies on issues agreed by the members
- Entering into negotiations on behalf of National Federation members as required

- Promoting and undertaking public education and information actions, and by issuing public statements on behalf of the members, on matters already agreed
- Appointing or nominating, as appropriate, representatives on deputation's and as members of other relevant bodies, committees, commissions, working parties and boards
- Undertaking the co-ordination of activities agreed by the members and which are appropriate to the role and functions of the National Federation
- Drawing up codes of good practice or guidelines for the provision of intellectual disability services by its members
- Stimulating the growth of the voluntary sector in areas of need and promoting the interlinking of voluntary agencies to promote the interests of persons with an intellectual disability.

The website contains information regarding the membership of the Federation and the active role of the Federation with respect to research, creation of best practice guidelines and research. There is a useful links page with references to national and international sites. A notable aspect of this feature is the link to Dáil debates and legislation on issues relevant to disability.

The Federation can be contacted directly at [secretariat@fedvol.ie](mailto:secretariat@fedvol.ie)

## FLOURISHING IN INTELLECTUAL DISABILITY WITH BODY MIND PRACTICES

Timothy M.B.O'Callaghan; Elzaan Goosen; Shamsa Doyle; Caroline Samuel  
Stewarts Hospital Services Ltd,  
Palmerstown, Dublin 20

The importance of positive psychology for intellectual disability has been emphasised by Fleming (2007) in Ireland and by Dykens (2006) in

the U.S.A. Both propose a practical agenda in intellectual disability that is based on positive internal states including happiness, engagement, hope and strengths. These positive states are embraced by the term "flourishing". Keys and Haidt (2003) describe adults who are flourishing as "filled with emotional, psychological and social well-being and free of mental illness." p11.

Roton & Ospino-Kammerer (2007) describe a category of intervention which they describe as "primarily physical rather than primarily mental in application", p3. In this category they include such activities as "massage therapy, tai chi, exercise and dance therapy. They state that these interventions are "intentionally used to bring about positive mental states such as relaxation or emotional release". p3. Because these interventions are characterised by the employment of physical activities as the primary modality of the intervention, we will refer to them as "body-mind activities" in this article..

If services for people with intellectual disability are to follow the lead of both Fleming and Dykens, they will need to provide their service users with a wide range of opportunities for flourishing. The area of body-mind activities is one such opportunity.

Body-mind activities can function in the lives of people with intellectual disability in two broad ways. They may function as a lifestyle choice for some service users, providing them with "sparkling moments" (the emotional, psychological and social wellbeing aspect of flourishing). They may also function as a stress management option helping them to become relaxed and centred in stress filled situations ( the freedom from mental illness aspect of flourishing).

In our own work with body-mind groups involving people with intellectual disabilities, we have encountered many examples of "sparkling moments". Energising activities such as mindful dancing, self massage, drumming and voice work elicit engagement and smiles from many of the participants. We have found that our older adult group particularly

enjoy the first three of these activities. Recently we had a pilot session with a group of service users who had very limited abilities but who had the skill of motor imitation. This group took enthusiastically to tai chi activities.

### **What body-mind activities are available?**

One of our goals as a transdisciplinary group is to assemble a range of body-mind activities for people with intellectual disability that are simple, safe and fun and have some evidence base. So far we make use of most of the following in our groups:

- Breathwork
- Visualisation
- Mindfulness
- Manual interventions
  - Massage
  - Acupressure
  - Finger holding
- Tai Chi and Chi Gung
- Spirituality
- Voice work
- Drumming
- Mindful dancing
- Yoga

A valuable source of training in many of these activities has been Patricia Cane's Capacitar course in education for healing and transformation (Cane 2000).

### **Is there an evidence base?**

Body-mind activities are no longer fringe practices but are part of mainstream stress reduction interventions (Everly, Jr & Lating 2002; Lehrer et al 2007). For example, the latter text, the third edition of Principles and Practices of Stress Management, provides extensive literature reviews of many of the activities above including yoga. While most of the research referred to in these reviews has been carried out on the mainstream population, the benefits reported are good reason for extending these activities to people with intellectual disability.

### **The future**

There are a number of ways that we can use body-mind activities in our work with people with intellectual disability.

- We can introduce a body-mind category in our person centred plans to ensure that service users have the opportunity to flourish with these activities.
- We can provide psycho-educational body-mind stress management programmes to our service users, allowing them to sample a range of body-mind activities and to choose those that work for them. For example, one person may prefer to cope with sleeplessness by using breathwork while another may prefer a safe space visualisation,
- We can use body-mind practices as an adjunct to our therapeutic work. Mindful walking in nature, for example, may be suggested as a homework task for a client who tends to ruminate.

Body-mind activities are low cost; are a common recreational activity of the general population; and are now an established part of mainstream stress management programmes. The flourishing of our service users will be the better for them.

### **References**

- Cane. P.M. (2000). Trauma Healing and Transformation. Santa Cruz: Capacitar International Inc.
- Dykens.E.M. (2006). Toward a Positive Psychology of Mental Retardation. American Journal of Orthopsychiatry, 76(2), 185-193.
- Everly, Jr.,& Lating. J.M. (2002). A Clinical Guide to the Treatment of the Human Stress Response (2<sup>nd</sup> ed.). New York: Kluwer Academic/Plenum Publishers.
- Fleming.M (2007). Presidential address to the 38<sup>th</sup> Psychological Society of Ireland Annual Conference. Killarney.

Keys. C.L.M. & Haidt. J. (2003). Flourishing: Positive Psychology and the Life Well Lived. Washington: American Psychological Association.

Lehrer. P.M., Woolfolk, R.L., & Sime. W.E. (2007). Principles and Practice of Stress Management (3<sup>rd</sup> ed.). New York: The Guilford Press.

Roton. L.W. & Ospina-Kammerer. (2007). Mindbody Medicine. London: Routledge.

---



---

## Challenging behaviours: prevalence and topographies.

K. Lowe, D. Allen, E. Jones, S. Brophy, K. Moore, W. James (2007) **Journal of Intellectual Disability Research** 51 (8), 625–636.

**Background** Variations in reported prevalence of challenging behaviour indicate the need for further epidemiological research to support accurate planning of future service provision.

**Methods** All services providing for people with learning disabilities across seven unitary authorities, with a total population of 1.2 million, were screened to identify people with challenging behaviour. Interviews were conducted with primary carers to gain data on identified individuals' characteristics and support. Measures designed for a similar study conducted in Manchester University were incorporated to allow direct comparison with earlier findings, together with standardized tools to assess adaptive behaviour and social impairment.

**Results** In total, 4.5 (2.5–7.5) people per 10 000 population were rated as seriously challenging, representing 10% (5.5–16.8%) of the learning disability population; the most prevalent general form was other difficult/disruptive behaviour, with non-compliance being the most prevalent topography. The majority showed multiple behaviours and multiple topographies within each general behaviour category.

Also identified were substantial numbers of additional people reported as presenting challenging behaviours at lower degrees of severity.

**Conclusions** Prevalence rates for seriously challenging behaviours were comparable to those reported in the earlier studies, thus confirming previous findings. The prevalence of less serious challenging behaviour also has major clinical significance and emphasizes the need for enhanced understanding and skills among personnel within primary- and secondary-tier health, education and social care services, and for strengthening the capacity of community teams to provide behavioural expertise.

---



---

## Have your Say!

If you have any comments, suggestions or items for inclusion in future issues of the e-zine please contact us by email at [info@psihq.ie](mailto:info@psihq.ie)

Please mark all correspondence care of LDSIG e-zine.

We look forward to hearing from you!

---



---