

Interpersonal Violence and People with Intellectual and Developmental Disabilities

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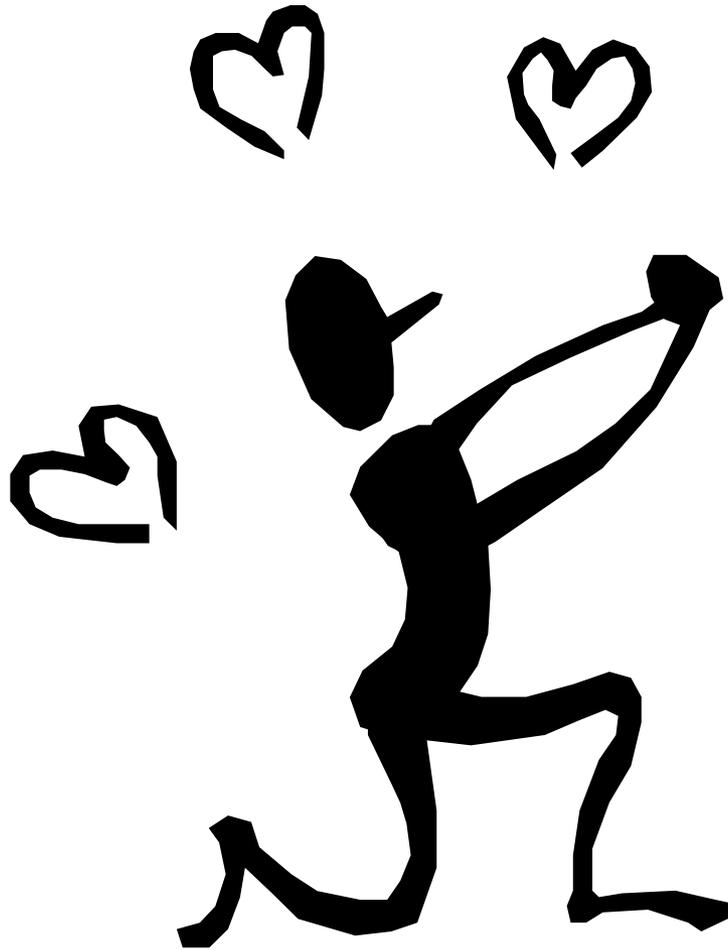
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Warning!

Trauma of the Training

- The information presented to you in this session is to increase your awareness of the impact of trauma and people with intellectual/developmental disabilities (IDD).
- The material that we cover can remind people of their own experiences (including you).

A Case of Violence



Why should we care about Trauma?

- Trauma and traumatic responses underlie many of the behaviors that challenge us the most.
- Direct supporters are rarely trained on how to support people in recovering from trauma.
- Agency decision-making is sometimes incongruent with what we know about healing trauma. Then we accidentally make things worse.

Intellectual/Developmental Disabilities

- "Developmental Disabilities" - umbrella term that includes intellectual disability but also includes other disabilities that are apparent during childhood. Developmental disabilities are severe chronic disabilities that can be cognitive or physical or both. The disabilities appear before the age of 22 and are likely to be lifelong. Some developmental disabilities are largely physical issues, such as cerebral palsy or epilepsy. Some individuals may have a condition that includes a physical and intellectual disability, for example Down syndrome or fetal alcohol syndrome. Intellectual disability encompasses the "cognitive" part of this definition, that is, a disability that is broadly related to thought processes. Because intellectual and other developmental disabilities often co-occur, intellectual disability professionals often work with people who have both types of disabilities. (AAIDD, 2010, http://aaid.org/intellectual-disability/definition/faqs-on-intellectual-disability#.U3Ta_15Nyll)

Interpersonal Violence

- Globally, “interpersonal violence is defined to include violence between family members and intimate partners and violence between acquaintances and strangers . . .” (World Health Organization, 2006, p. 2).
- Inter Personal Violence (IPV) includes any behaviors that cause physical, psychological, or sexual harm. It involves a variety of systematic abusive behavior, typically in combination, including threats of and acts of physical violence, sexual violence, emotionally abusive behaviors, economic restrictions, and other controlling behaviors (WHO).

Trauma

- Big “T” traumas
 - Experiences that we would all agree would be traumatic!
 - Examples: rape, mugging, physical beating, persistent bullying, significant deaths, etc.
- Small “t” traumas
 - Experiences that are individually traumatizing.
 - May accumulate over time.
 - May intersect with other life elements, and especially big “T” traumas.
 - Examples: bullying, multiple moves, job loss, multiple losses of relationships.

Confounding Factors

- Attachment
- Abandonment
- Developmental Phase
- Family Patterns
- Life experiences
- Perceptions of disability (self and others)
- Medications/Substances
- Other neurological conditions (e.g. autism, fetal alcohol)
- Mental Health Conditions
- Treatment

Statistics

- The National Center for Victims of Crime (NCVC) reported in 2010, that people with disabilities were twice as likely to be victimized and are less likely to report abuse.
- People with disabilities also have increased vulnerability for intrapsychic reactions with PTSD.

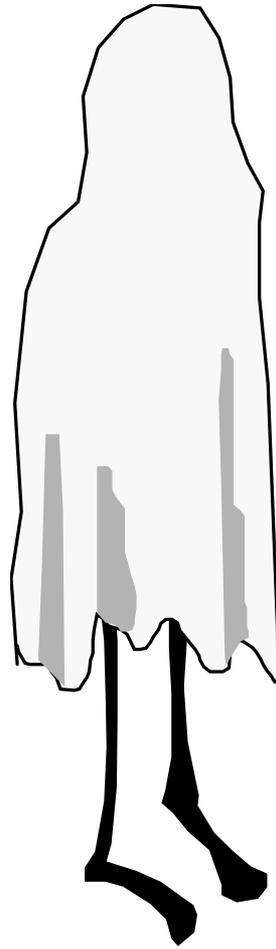
Vulnerabilities

- Dependence
- Desire relationships
- Opportunity
- Can not “talk”
- Information Processing
- Physical disability
- Medication
- Previous trauma
- Lack education
- Compliance
- Won't be believed

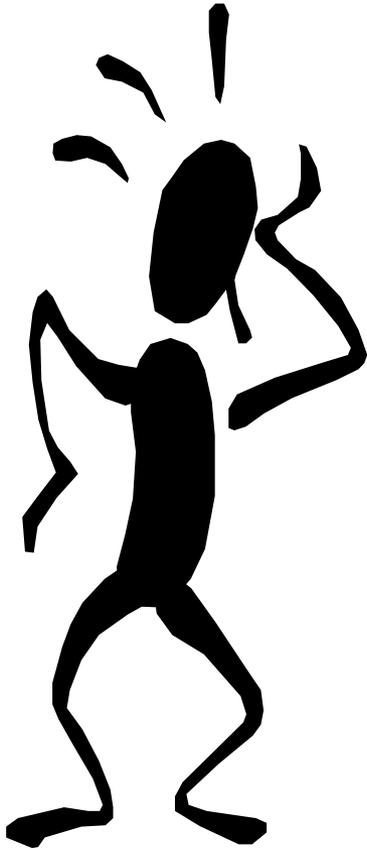
Everyday Impact of Trauma

- Past is lived as present
- Impaired by emotional disturbance
- Fragmented memory
- Unreal expectations (based on unreal experiences)
- Unhealthy coping (doing the best they can with what they know)
- Alarm system disconnect (brain impact)
- Inconsistent learning (re-experiencing)

A Case Unknown



Internalizing the Trauma Event



- Memory (images, sensory, body)
- Internal states dysregulated
 - Overwhelming emotion (anxiety, anger)
 - Suppressed memory and emotions
- Living with a trauma lens

Externalizing the Trauma Event

- Repeating the violence (self and others)
- Dissociation
- People as potential threats
- Reactions triggered by internal and/or external cues
- Behavioral Manifestations



Mental Health Impact of Trauma

- Acute Stress – initial response
- Post Traumatic Stress – when the experience is not integrated into life history
- Developmental Trauma Disorder
- Complex Trauma

The Impact of Trauma: Brain

- Danger
- Emotions
- Memory
- Abstract thinking
- Actions (fight, flight, freeze)



Biological Impact

Limbic system

- Amygdala (↑ reactive)
- Hippocampus (↓ mass)
- Stress hormones (↓ cortisol, ↑ epinephrine/norepinephrine)

Biphasic Impact of Trauma

- Coping skills = Impulsive and emotionally infused Actions
- Communication = Violent or Silent
- Safety = Reality/Perception; Boundaries/No Boundaries
- Trust = Lack empathy or absorb experiences like a sponge
- Repeating the Pattern = victim and/or victimizer

Assessment: Changes in Behavior

- Changes in patterns of interaction
- Decline in previous skills
- Altered emotional reactions

- Diagnostic Overshadowing
- Behavioral Manifestations = Behavioral Diagnoses = Behavioral Treatment

Assessments: Going beyond a Form

- When people cannot tell their story
- Biographical Timeline
- Cautious use of Psychopharmacology

- What are your experiences?

Adapting Interventions

- Anchors for Safety
- Stress management
- Social Therapy
- Therapy
- Cautious use of Psychopharmacology
- What have you experienced?

Anchors for Safety

- A way to build trust.
- Develop a sense of safety (beyond reality).
- Using interpersonal relationships for healing.
- A person of choice to talk to in a crisis.

Stress Management

Body Memory

- Biofeedback
- Yoga
- Exercise
- Breathing
- Education
- Nutrition

Safety Valve

- Coping skills
- Self soothing techniques
- Handling the past in daily life
- Practice when calm
- Develop mastery of memories

Social Therapy

- If the issue is situated in a relationship then the path to healing is through a relationship.
- Most people are too overwhelmed to work on the big issues and so we work on integrating therapy in someone's everyday life.

Therapy

- Strengths based
- Blending the best of what a person needs
- Family Systems
- Cognitive Behavior Therapy
- Eye Movement and Desensitization Processing

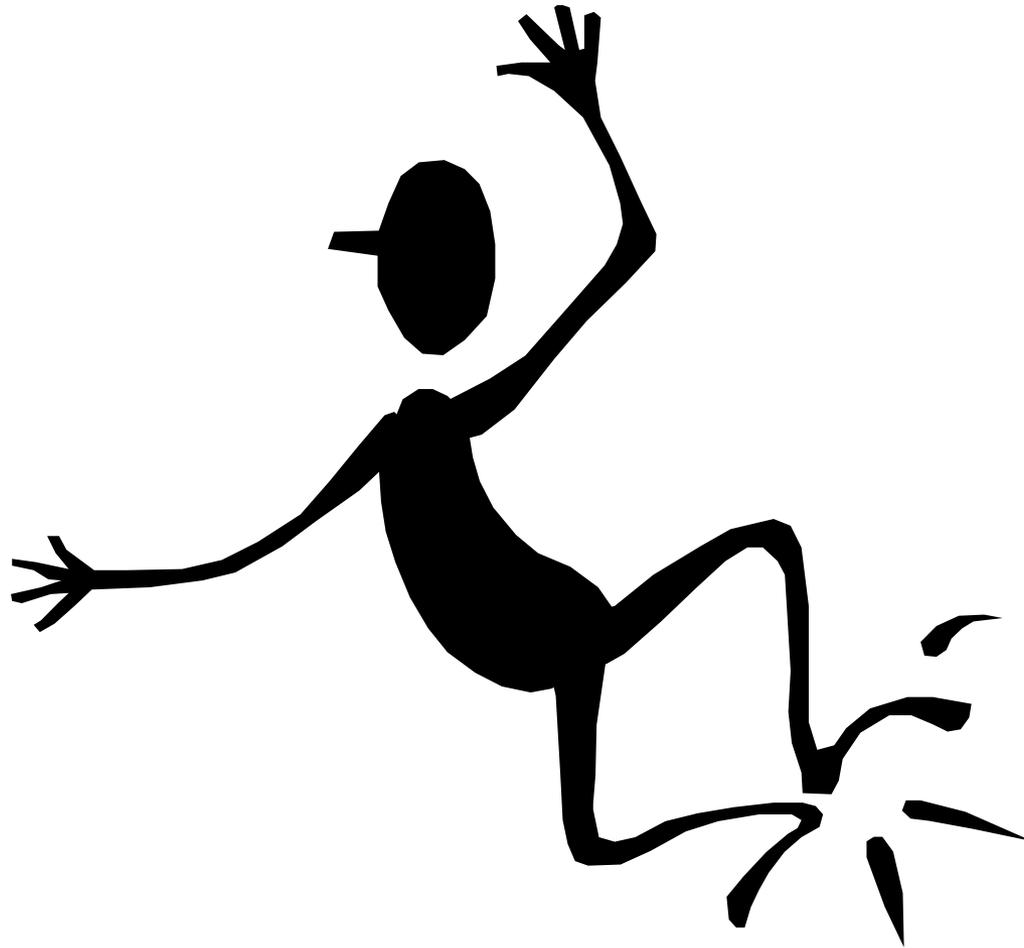
- What do you use?

Medication

- Last resort
- Alters learning
- Focus on behavior =
diagnoses of behavior =
treatment of behavior
- Side effects are not the
reason to give a
medication
- Alone is not the answer



A Case of Accomplishment



Team Approach

- Education for all!
- Family, caregivers, friends, social workers, nurse, and more
- Address vicarious trauma – caring for the caregivers
- What do you do?

Questions?



The End

