

Leadership Education in Neurodevelopmental Disabilities (LEND) Program
Westchester Institute for Human Development
University Center for Excellence in Developmental Disabilities
And
New York Medical College
Team Project Abstract
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Title: Framing the Issues: Mental health issues for children with disabilities that have been physically and/or sexually abused

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Proposal Description: The purpose of this research project is to explore the availability and viability of mental health services for children with developmental disabilities who have been physically and/or sexually abused. The existence of barriers to the provision of services for this population will be determined and identified, and current interventions being used in mental health treatment will be reviewed. This study will determine if these interventions need to be modified/adapted/designed for delivery to children with developmental disabilities who have been abused.

Objectives: The research indicates that children with disabilities are 1.8-3.4 times more likely to be victims of physical and sexual compared to children without a disability. However, myths about people with disabilities still exist creating a significant challenge to making sure that the mental health needs of this population are served. These myths include

- people with intellectual disabilities are asexual
- people with intellectual disabilities don't experience trauma or do not react to the abuse experience the same way as other people
- trauma-like symptoms are perceived to be due to the disability rather than seen as a red flag for service

These beliefs have perpetuated a lack of mental health services available to this population. In order to better understand whether children with disabilities who were physically or sexually abused were able to access mental health services in Westchester County, research from a previous LEND group was conducted. The results of this study indicated that referrals are being made to local mental health agencies in Westchester County, however, there was minimal information regarding the true accessibility and effectiveness of these services. Therefore this study is focusing on quantity and quality of service provision for children with intellectual disabilities who have been physically or sexually abused.

Method: This research project was exploratory in nature and used a qualitative methodology based upon grounded theory. No IRB approval was necessary. The study conducted focus groups with clinicians and administrators from seven mental health service providers from Westchester County. Specifically, there were two separate focus groups: one for clinicians and one for administrators. The analysis of the data was completed using Atlas ti 5 software.

Community Partners: Dr. Margaret Charlton, a national expert on the trauma treatment within the disability population, provided us with information on current practices and trends in treating traumatized victims of abuse with developmental delays. The structured interview with Dr. Charlton assisted the team in constructing appropriate questions for the focus groups.

Results: Analysis of the data utilizing Atlas ti 5 software yielded a variety of information regarding mental health services in Westchester County as well as information regarding how evidence based treatment is being modified.

In response to the first question, Are the mental health needs of children with disabilities being met in the community, the study showed that children are on waiting lists for providers with the necessary expertise for this population. In addition a few agencies are equipped to handle child with mild disabilities and no agencies reported having the capacity to serve children who were nonverbal and/or on the autism spectrum. There was clearly a significant need for both experienced clinicians and supervisors comfortable and capable of working with this population and that the child/therapist fit was often challenging. Other difficulties that arose for both clinician and administrators was the time limits imposed by insurance companies on both the number and length of sessions, particularly as children with disabilities often move at a slower pace. A system's problem identified was the poor communication between systems in service planning that often resulted in the lack of timely connections to therapy.

In terms of the treatment models and how they are being modified or adapted there were a number of simple and creative approaches being implemented. Models such as Trauma-Focused Cognitive Behavioral Therapy (TF-CBT) and the Circles Curriculum are being used with individualized modifications. These models are seen as being alternatives to the traditional talk therapy. Some of the adaptations discussed included slowing down the treatment process, simplifying language and using lots of repetition, utilizing visuals to enhance understand, and the use of the Internet as a resource.

Two significant quotes taken from the transcripts that reflected common themes were the following

- “When you work with children with developmental disabilities, the process and the progress is considerably longer than with a typical child” -*Clinician*
- “There is both a need for staff to have a special training to understand those children and how to adapt treatment...and the resources are rather limited.. So we often find that kids are waiting...” -*Administrator*

Conclusion: There is a need for mental health services for children with disabilities that are abused; there are limited numbers of both clinicians and supervisors to serve this population. Training materials including a manual or video about working with this population would enhance clinicians' and supervisors' confidence and ability to conduct this work. Consultation with TF-CBT, assistive technology and disabilities experts regarding the adaptation of evidence based models of mental health treatment and the development of tools for therapists to use with children with intellectual disabilities who have been abused are next steps that are being considered.