

Individualized Clinical Treatment for Individuals with Intellectual and Developmental Disorders

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Provision of medical treatments may pose particular challenges for those with ID/DD because of difficulties with cognition, communication, and associating the importance of unpleasant medical procedures with health maintenance. Fear of medical treatments adds complications to these difficulties. Currently, those with ID/DD who have a phobia of blood draws may be sedated for procedures, only undergo blood draws during procedures requiring anesthesia, or may not receive blood draws at all due to excessive fears and avoidance. Present needle phobia treatments are shown to be effective for typically developed individuals but may not be appropriate for individuals with ID/DD because such treatments require use of typical cognitive and linguistic abilities. The purpose of this study is to develop and test a behavioral intervention for blood draw phobia specifically for individuals with ID/DD. The study seeks up to ten individuals 18 years of age or older with ID/DD referred by WIHD for fear of blood draws. Presently, the study includes three participants. Investigative procedures include recording and analyzing qualitative data on the avoidance behaviors most associated with blood draws. The treatment itself involves desensitization of the blood draw materials by increasing length of exposure to such materials and increasing proximity of materials to participants. Final stages of treatment include blood draw simulations by the clinician, then by the phlebotomist, and concluding with an actual blood draw by the phlebotomist on site. Maintenance phases are to follow. The study is conducted and data analyzed as a standard single case study design. Results from our first participant demonstrate a decrease in avoidance behaviors as treatment progresses. Due to health problems experienced by this participant, the treatment has not been completed, although the first participant was able to undergo a blood draw. Other participants are in earlier stages of treatment. Progress-to-date reflects our first participants' behavioral changes during protocol implementation. The investigators anticipate increasingly decreasing avoidance during blood draws for the remaining participants that undergo the tested protocol and for future recruited participants.