	Presented by:	
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	March 5 <sup>th</sup> 2015	







#### Adaptations : Suggestions for Clinicians

Suggested readings/authors

First Stage trauma treatment: A guide for therapists working with women. Dr. Lori Haskell Toronto: CAMH

<u>Trauma Treatment with Clients Who Have</u> <u>Dual Diagnoses: Developmental Disabilities</u> <u>and Mental Illness.</u> Margaret Charlton Ph.D. Brian Tallant, M.S Presented by NCTSN 2003

# continued

Healing Trauma; the power of Group treatment for People with Intellectiual Disabilities. Nancy J Razza & Dr. Tomasula. 2005

# **General Suggestions**

- Slow down speech.
- Use comprehensible language.
- ✤ Use visuals to support language.
- Present information one item at a time.
- Ask for feedback after each item is presented.

#### Cont.

\* Be specific about steps to change

 Practice coping skills and encourage feeling of competence

Be aware of bias when working with this population. (Avrin, Charlton, & Tallant, 2002, Charlton, 2002: Mansell & Sobsey, 2001;Butz, Bowling, & Blitz 2000).

# Challenges /vulnerabilities

- Employment opportunities for the developmental population may be limited.
  May require support to engage in healthy social activities and find acceptance.
- Lack of comprehensive and ongoing
- preventative education. Current models for maintaining recovery may
- be geared towards the general population. May require support to access resources consistently.

# Where do we start?

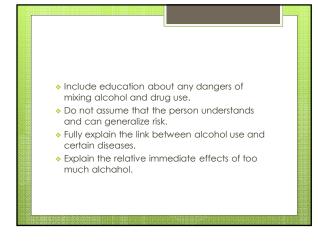
- \* Research/ pilot projects. In the process of developing a pilot prevention and recovery group with support from the Trauma Initiative committee, Southern Network of specialized care.
- Ask those with developmental disabilities what will help and what doesn't help.

#### cont.

- Collaboration with experts in addiction.
   Adapting current programs so that they are "user friendly"
- More similarities then differences when providing service to these two populations?

#### Prevention : Things to consider

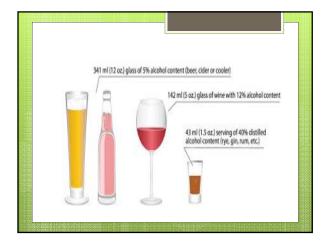
- Information and education that is comprehensible, and accessible.
- Risks related to alcohol consumption include: age, gender, health, amount of consumption and family history (Canada's Low Risk Alcohol Drinking Guidelines)



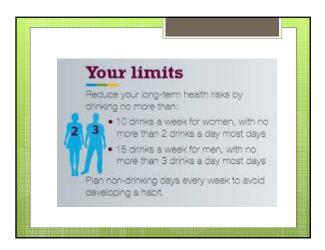
#### Be specific about the impact:

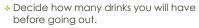
- You might do things when you are drunk that you would not do otherwise.
  Make choices that might get you in trouble. Example spend too much money.
- Change your mood, lose your temper.
  Don't leave your drink unattended
- Can become vulnerable to be taken advantage of, robbery





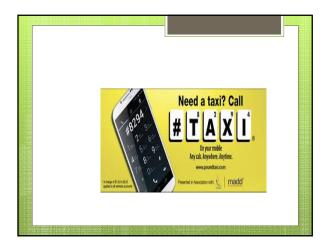






- Decide how you will get home.
- Provide options i.e., May want to consider fancy non alcoholic drink.
- Peer pressure. Create possible social situations and support people to practice what to do.

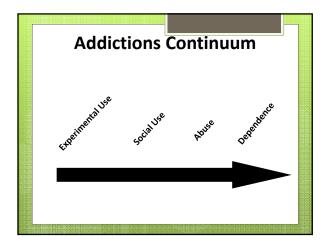






# **Understanding Addictions**

- Addiction is a primary, chronic, neurobiological disease, with genetic, psychosocial, and environmental factors... It is characterized by behaviours that include one or more of the following:
- Impaired control over use
- Compulsive use,
- \* Continued use despite harm, and craving
- (Savage et al., 2003).







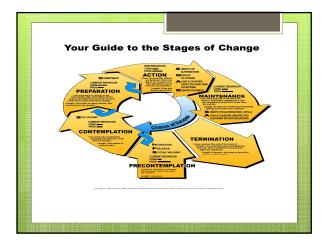
#### Why do People Experience Addiction Problems?

- People often use drugs/alcohol as a means of gaining acceptance and connectedness with a peer group
- People interpret being with the <u>party</u> crowd as being associated with the popular crowd
- People often use addictive behaviour to help them manage a situation which they feel they are lacking certain skills. In particular, situations such as socializing, managing stress, use of leisure time, taking on new challenges, building relationships, intimacy and communication
- People may use addictive behaviour to shut off thoughts or ideas which are overwhelming, confusing or negative
- People may turn to addiction to shut off memories (recent or historical) of difficult experiences in their lives

# Signs of Substance Abuse

- Neglecting responsibilities.
- Using alcohol/drugs under dangerous conditions or taking risks while high.
- Alcohol or drug use creates legal issues.
- Alcohol or drug use causes problems in relationships.
- Building tolerance.
- Substance is used to avoid or relieve withdrawal symptoms.

# Continued Loss of control over the substance Abandonment of activities the person used to enjoy. Continued use, despite knowing it's hurting them.



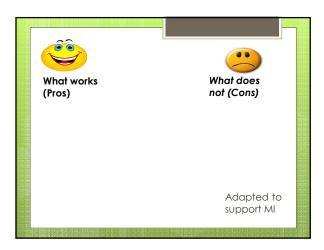
# Recovery Tool Box for those supporting people

- ✤ Don't Panic
- Establish rapport and trust
- Validate the function of the behaviour
- Agree on the direction (reduce harm, change amount, stop completely) needs to be driven by the person (person centered

# continued

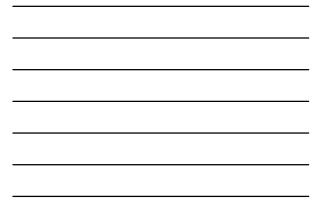
Don't rush the person

- Create a space to explore all aspects of change
- Explore costs and benefits of change
- Normalize ambivalence
- Encouraging clients to openly clarify and state their attraction to substances





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# Questions?

- What would happen if you stopped using?
- $\ensuremath{\bigstar}$  What do you think you will do ?
- Adapt questions and support with visuals
- Active learning mediums.
- Portable tools

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# How would you like things to turn out now for you, ideally What would you like to do every day? Adaptation What would your best day be like?

Source: Miller and Rollnick, 1991

# Strength Based approach

- Acknowledge the courage of their decision to try something different. Adaptation: Point out strengths observed during the session as they are presented. Frequently and concretely.
- Offer hope that help is available Adaptation: be concrete who to call
- Make recommendations for reduction in use, develop a plan.
- Identify support system



# continued

♦ Celebrate

- Acknowledge and validate the changes being made
- Teach social skills
- Teach budgeting skills
- Teach emotional regulation skills
- Change living environment
- Teach coping skills with respect to triggers.



