Youth with Different Abilities

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ACT FOR YOUTH CENTER FOR COMMUNITY ACTION

https://vimeo.com/392044905/97e26bc585



Complementary to...

New training manual:



A CURRICULUM FOR YOUTH WORK PROFESSIONALS



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Objectives

- Scope of this presentation
- Disability versus neurodiversity
- ▶ Increase understanding of "invisible" disabilities
 - ▶ Manifestations, etiology, prevalence and treatment
- Resources



Focus on "Invisible" Disabilities





Disability versus Neurodiversity

Implications of terminology

Disorder – symptoms causing dysfunction, cause unknown

Disease – medical term, causal mechanism known

Disability – below average functioning (on standardized measure), impacts functioning in a particular environment (education)

Simon Baron-Cohen Blog Post, 2019:

https://blogs.scientificamerican.com/observations/the-concept-of-neurodiversity-is-dividing-the-autism-community/



Learning Disabilities

A learning disability is a neurological condition that interferes with an individual's ability to store, process, or produce information.

Common types of learning disabilities:

- Dyslexia (reading)
- Dyscalculia (math)
- Dysgraphia (writing)
- Dyspraxia (Fine motor skills)
- Dysphasia (spoken language)



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Learning disabilities, when not recognized and addressed early, will have lasting impact on school performance and adult functioning.

- Less likely to graduate from high school
 - More likely to be suspended
- More likely to be involved with juvenile justice
- Less likely to succeed in college
- More likely to be unemployed

NCLD: The State of Learning Disabilities.



Prevalence & Intervention

- ▶ 1 in 5 children have learning and attention issues (NCLD)
- 5-15% of school age children struggle with learning disabilities (APA)
- 80% of youth with learning disabilities have dyslexia (APA)
- ▶ 1/3 of people with learning disabilities are also estimated to have attention-deficit-hyperactivity disorder (APA)
- Early intervention and screening
- Supportive and inclusive classrooms
- Focus on social and emotional learning

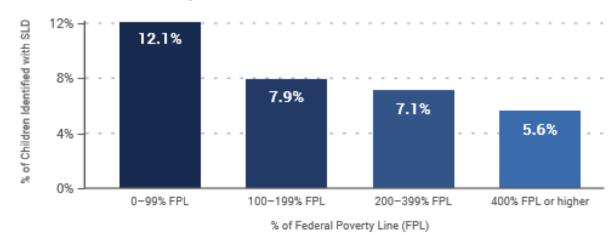


Disparities

DISPARITIES IN SPECIAL EDUCATION IDENTIFICATION

Learning and attention issues affect children from all income levels and across all races and ethnicities. Yet low-income children, students of color and English language learners are more likely to be identified as having specific learning disabilities (SLD). Bias plays a key role in over- and underrepresentation.

SLD Identification by Income Level



https://www.ncld.org/resear ch/state-of-learningdisabilities/



Attention Deficit Hyperactivity Disorder (ADHD)

- Inattention
- Hyperactivity
- Impulsivity

- Get distracted easily and forget things
- Switch too quickly from one activity to next
- Have trouble with directions
- Have trouble finishing tasks
- Lose things
- Fidget and run around a lot
- Touch and play with everything they see
- ► Blurt out inappropriate comments
- ▶ Have trouble controlling their emotions



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- Usually diagnosed by the time the child enters elementary school
- Impacts quality of functioning in school, socially, and at work
- Children may require special education classes
- Many adolescents may struggle with relationships and antisocial behavior
- Often associated with learning disabilities, anxiety disorders and depression



Prevalence

- ▶ 8.4% of children; 2.5% of adults (APA)
- More common with boys; females more likely to present inattentive features
- Less frequent in African American and Latino populations
- Risk factors: genes, cigarettes, drug or alcohol abuse during pregnancy, exposure to environmental toxins during pregnancy, exposure to lead or similar toxins at early age, low birth weight, brain injuries



Treatment

- Medication
- In school: alternative classroom set up and behavior management
- Parenting skills training
- Psychotherapy and psychosocial interventions



Building on Strengths



https://www.youtube.com/watch?v=KbYSNww979g

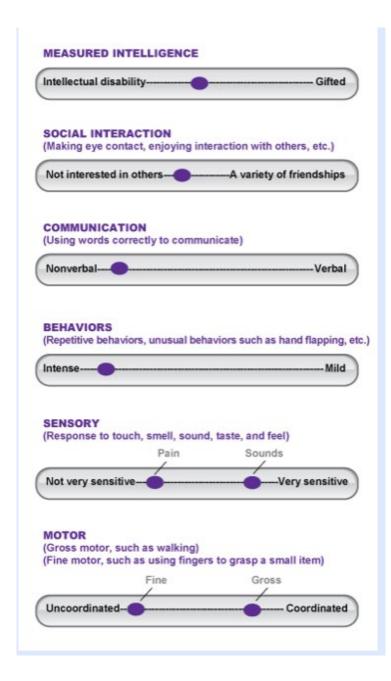


Autism Spectrum Disorder

A developmental disorder: Symptoms usually appear in the first two years of life

- Impaired social interaction
- Difficulty in communication
- Tendency to have a restricted range of interest and engage in repetitive behavior





Roughly 1/3 children with ASD are identified with impaired intellectual functioning

Etiology:

- Unknown
- Risk factors: siblings with ASD, older parents, certain genetic conditions, very low birth weight

Prevalence:

- 1 in 59 children in 2014
 (1 in 150 children in 2000)
- 4 times more boys

https://www.cdc.gov/ncbddd/autism/signs.html



Treatment Strategies

Early screening and intervention are critical

- Behavior and communication therapies
- Educational programs
- Family therapies
- Other therapies
- Medications



Living with Trauma

Trauma results from an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or life threatening and that has lasting adverse effects on the individual's functioning and mental, physical, social, emotional or spiritual well-being.

SAMHSA 2014



Stress Response: Flight, Fight or Freeze

Increased:

- Hypervigilance, arousal, paranoia
- Perceptual and information processing distortions
- > Pain tolerance
- Emotional blunting
- Aggression and irritability

Decreased:

- Memory processing and retrieval
- Reality testing
- Body and emotional awareness
- > Immune response



Re-Traumatization

A situation, attitude, interaction, or environment that replicates the events or dynamics of the original trauma and triggers the overwhelming feelings and reactions associated with them



Post Traumatic Stress Disorder (PTSD)

Symptoms last <u>longer than a month</u> after event

- Intrusive re-experiencing of the trauma, avoiding trauma reminders (triggers), and persistent state of alert
- Related emotional and behavioral problems
- Co-occurs with other disorders (anxiety, ADHD, oppositional defiant disorder)
- Treatment approaches: Cognitive behavior therapy, neurofeedback, EMDR, yoga

Estimated prevalence in children and youth: 15-43% experience trauma © 3-15% of girls and 1-6% of boys develop PTSD

National Center for PTSD: https://www.ptsd.va.gov/understand/common/common_children_teeasp



Impact of Trauma

Behavioral Effects	Cognitive Effects	Social Effects
Risk takingActing outRule breaking	 Attention Memory Executive functions Verbal abilities Skills development Language Group work Problem solve Transition 	 Impulsivity Aggression Deviance Withdrawal Challenged relationships



Trauma-Informed Approach: Guiding Principles

Create Safe & Inclusive Environment

Transparency/Predictability

Choice/Empowerment

Participation/Collaboration



Resources & References

American Psychiatric Association (APA): Specific Learning Disorder https://www.psychiatry.org/patients-families/specific-learning-disorder/what-is-specific-learning-disorder

Learning Disabilities Association of America https://ldaamerica.org/

National Center for Learning Disabilities (NCLD) https://www.ncld.org/

National Institute of Mental Health: Attention Deficit/Hyperactivity Disorder https://www.nimh.nih.gov/health/topics/attention-deficit-hyperactivity-disorder-adhd/index.shtml

American Psychiatric Association (APA): ADHD https://www.psychiatry.org/patients-families/adhd/what-is-adhd

Interacting with Autism http://www.interactingwithautism.com/

National Institute of Mental Health: Autism Spectrum Disorder https://www.nimh.nih.gov/health/topics/autism-spectrum-disorders-asd/index.shtml



Resources

APA: What is Posttraumatic Stress Disorder? https://www.psychiatry.org/patients-families/ptsd/what-is-ptsd

SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach. 2014. https://store.samhsa.gov/system/files/sma14-4884.pdf

National Child Traumatic Stress Network http://www.nctsn.org/

ACT for Youth: Trauma Informed Approach
http://www.actforyouth.net/sexual_health/community/capp/trauma.cfm