Trauma and Individuals with Intellectual and Developmental Disabilities

**What is trauma?**

Trauma is understood as experiences or situations that are emotionally painful and distressing. Trauma can overwhelm an individual’s ability to cope, leaving him or her to feel powerless. Adverse childhood experiences (ACEs) describe traumatic experiences in a person’s life occurring before the age of 18.

Examples of traumatic events that can have lasting impact on an individual’s ability to cope and their psychological well-being include: global disasters, unexpected loss, physical, sexual, and emotional abuse, neglect and abandonment, divorce, parental incarceration, substance abuse in the home and gun violence.

People respond to traumatic events differently. The long-term effects of painful experiences can vary, even in the brains of individuals who have experienced the same exact event. Successful navigation through traumatic events occurs most often when the individual has a support system in place; be that personal and/or professional.

**What are developmental disabilities?**

Developmental disabilities are conditions that are typically diagnosed in childhood and limit functioning in thinking, learning, growing, behaving, communicating, feeling, and relating. Developmental disabilities include conditions like autism spectrum disorder, brain injury, cerebral palsy, Down syndrome, fetal alcohol syndrome, intellectual disabilities, and attention-deficit/hyperactivity disorder, and spina bifida.

**Are individuals with developmental disabilities at risk for trauma?**

Individuals with intellectual and developmental disabilities (IDD) experience traumas. The forms of trauma most commonly experienced among people with IDD include:

- Adverse Life Events: poverty, abuse/neglect
- Social: bullying, name-calling, other forms of verbal abuse
- Restraint and Seclusion
- Victimization specifically during violent events and crimes
- Institutionalization including foster care placements
- Abandonment/Isolation
- Loss of parent of caregiver

**How to recognize trauma in an individual with IDD**

Individuals with IDD experience a variety of trauma-based responses similar to those who do not have an IDD. The impact of trauma exposure on individuals may have:

- Cognitive effects: memory problems that may include gaps in time or even gaps in personal history; difficulties acquiring new skills or processing new information; poor verbal communication skills as a result of deficits in language development and abstract reasoning skills.
- Physiological effects: stomachaches and headaches; nightmares or difficulties with sleep; regression of milestones (loss of acquired developmental skills); bed-wetting and soiling.
- Behavioral effects: aggressive externalizing behaviors; acting out in social situations such as screaming or crying excessively; irritable mood, sadness and anxiety; verbally abusive behavior; fearful and avoidant of people or situations.

For an individual, dealing with the ongoing effects of the trauma is often more painful than the original event. Long after the event has passed, the brain may keep alerting the body to escape a danger that no longer exists. Feeling unsafe, the body may respond through:

- Flight: shaking legs, anxiety/shallow breathing, big/darting eyes, fidgety-ness, restlessness, feeling trapped, tense.
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**TIPS AND RESOURCES**

- **Fight**: crying, hands in fists, flexed/tight jaw, grinding teeth, snarl, fight in eyes, glaring, fight in voice, desire to stomp, kick, smash with legs, feelings of anger/rage, homicidal/suicidal feelings, and knotted stomach/nausea.
- **Freeze**: Feeling cold/frozen, numb, sense of stiffness, heaviness, holding breath/restricted breathing, sense of dread, heart pounding, trying to hide (which can be mistaken for non-compliance).

These responses to past traumas in the body may occur due to present triggers such as use of restraints, teasing, parental tones, judgments, labels, sarcasm, rejection, lack of relationships, inappropriate touching, and lack of attention, loss, death, and staff turnover.

**What types of treatments are available?**

People affected by trauma can feel unsafe in their bodies and in their relationships with others. Regaining a sense of safety, creating a new sense of self, and redefining oneself in the context of meaningful relationships are the necessary steps toward recovery.

While there is not an adequate amount of research on how to best adapt current trauma treatments for individuals with IDD, there is promise in a variety of common interventions. Eye Movement Desensitization and Reprocessing (EMDR), Positive Identity Development, Parent-Child Interaction Therapy, Psychodynamic Psychotherapy, and adapted Trauma-focused Cognitive Behavioral Therapy (CBT).

Learning how to relax the body and calm the mind may also help in building stronger coping skills. Yoga, walking outside, sitting quietly, taking calming breaths, mindfulness, and meditation are some examples of common relaxation practices.

**Techniques that may help clinicians deliver effective treatments to individuals with IDD**

- Understand differences in developmental and chronological ages
- Speak slowly and clearly
- Introduce tasks, information, and skills one at a time and avoid compound statements
- Allow time for practicing skills, which may take time before competency is met
- Utilize caregivers in treatment
- Avoid assumptions in comprehension. The individual may say “yes” or nod even when they don’t understand
- Utilize repetition in unique and creative ways
- Increase parent’s education about behavioral issues as well IDD
- Conduct thorough, developmentally appropriate and in-depth assessments

**Resources**

- **National Child Trauma Stress Network**
  Established to improve access to care, treatment, and services for traumatized children and adolescents exposed to traumatic events. [www.nctsn.org](http://www.nctsn.org)

- **Tennessee Disability Pathfinder**
  Provides free information, resources, support, and referrals to Tennesseans with disabilities and their families. Assistance in multiple languages available. (800) 640-4636, [familypathfinder.org](http://familypathfinder.org)

- **University of Tennessee Boling Center for Developmental Disabilities**: (901) 448-6511, toll-free (888) 572-2249, [uthsc.edu/bcdd](http://uthsc.edu/bcdd)

- **Vanderbilt Kennedy Center for Excellence in Developmental Disabilities**: (615) 322-8240, toll-free (866) 936-8852, [vkc.vumc.org](http://vkc.vumc.org)

This tips and resources fact sheet is a product of the University of TN Boling Center for Developmental Disabilities (Chanda Dunn, LCSW) and the Vanderbilt Kennedy Center for Excellence in Developmental Disabilities.