

Exploring the nuances of aging with intellectual disability and hearing loss through the voices of formal caregivers



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Background

- Adults with intellectual disabilities (ID) have a higher prevalence of hearing impairment (HI) than the general population and HI often goes undiagnosed.¹
- Formal caregivers refer for health services, maintain adaptive equipment, and facilitate communication.²
- Training formal caregivers in communication techniques to use when working with people with ID & HI has been shown to improve communication.³
- Caregivers' experiences and perspectives influence individuals' participation in daily life activities.

Study Aim

To explore how caregivers navigate the nuances of care recipients' age-related changes with intellectual disability and hearing impairment.

Methods

Design:

- Qualitative study design
- Semi-structured interviews and observations

Participants:

- Two paid care staff at a continuing care retirement community (CCRC) for adults with IDD
- 81-year old male resident with HI and mild ID
- 67-year old female resident with HI and severe ID

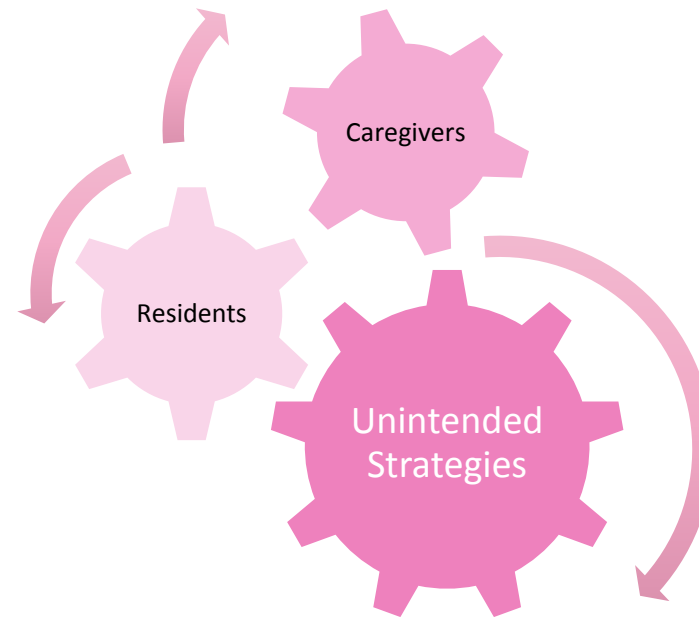
Analysis:

- Descriptive approach used to identify broader concepts in the data

Findings

Caregivers' unintended strategies for communication:

- Trial and error : "I might just crouch down to get eye level so she can hear me better"
- Mannerism and inflection of voice
- Deferring to medical professionals
- Established routines and structures
- Wait and see



Residents' unintended strategies for communication:

- Level of participation in activities
- Timing of behaviors and mood consistency
- Nonverbal body language and positioning
- Maintenance or variation of routines

Discussion

- Unintended strategies are less effective with severely affected, nonverbal, or multiply affected individuals.
- Caregiver training provides intentional strategies to empower staff to refer to healthcare professionals, and raise knowledge and awareness of HI.
- Routines must be in place in order to be effective; many agencies and homes have fewer supportive structures.
- More experienced caregivers have better sensitivity to notice typical or abnormal behaviors in both individuals and the population, but staff turnover is high in IDD field.

Implications

- OT should consider educating care staff about referral, communication strategies, hearing device maintenance, and environmental modifications.
- It is important that the OT analyze tasks and routines at the individual, group and agency levels to promote optimal communication and participation.
- Recognizing unintended strategies of older adults with HI & ID gives insight into their nuanced life experiences.

References

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