



Review Article

Caregiver-mediated therapy for an adult with visual and intellectual impairment suffering from separation anxiety

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ABSTRACT

Background: Separation anxiety among intellectually disabled (ID) persons with comorbid visual impairment could be rooted in a weak sense of person permanence. Technology-assisted Therapy for Separation Anxiety (TTSA) was used to address this problem.**Aims:** The primary aim was to determine whether technology alone or including caregivers was the best option, and whether TTSA decreased separation anxiety and challenging behaviour. Also, how the caregivers and the client experienced TTSA.**Methods and procedures:** A pre-experimental, quantitative approach (AB₁C₁B₂C₂D) was used for this single-subject study. The frequency of the client's text messages was recorded daily. The variables were monitored with standardised instruments and caregivers rated the intensity and frequency of the client's anxious and challenging behaviour. The social validity was evaluated by means of questionnaires.**Outcomes and results:** There was a significant decrease in the anxious and angry messages sent, and in anxious and challenging behaviour, in the phase in which the caregivers were included, compared with the phase in which technology alone was used. The client and the caregivers were positive about TTSA.**Conclusion and implication:** Technology and the caregivers reactions reduces the anxiety and challenging behaviour. It might also aid the acquisition of the concept of person permanence.

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1. Introduction

Children with ID and a coexisting visual impairment are more predisposed to developmental problems than children with a single impairment (Alimovic, 2013). Intellectual and visual impairment often co-exist, and in such cases it can be expected that the disability will be more severe (Evenhuis, 1995; Evenhuis, Theunissen, Denkers, Verschuure, & Kemme, 2001; Evenhuis, Sjoukes, Koot, & Kooijman, 2009; Van Splunder, Stilma, Bernsen, & Evenhuis, 2006; Warburg, 2001). Developmental and cognitive impairment can severely limit an individual with ID's concept of person permanence (Cassidy, 1999), which can in turn indicate a prognosis of developing separation anxiety (Došen, 2005). The concept of person permanence is acquired when the child or dependant realises that valued persons, though not present in the close vicinity, still exist (Schuengel & Van Ijzendoorn, 2001).

According to the stress-attachment model (Janssen, Schuengel, & Stolk, 2002a; Janssen, Riksen-Walraven, & Van Dijk, 2002b), the ability of persons with ID to manage stressful situations is inadequate and they are therefore much more predisposed to psychopathologies such as anxiety than persons without ID (Greenberg, 1999). Separation anxiety also appears frequently among ID children (Došen, 2005; Emerson & Hatton, 2007). Research has shown that its incidence among persons with ID is four times more prevalent than among persons without ID (Emerson, 2003; Emerson & Hatton, 2007). When measured against the DSM-IV symptom criteria for anxiety disorder, 21.9% of children with a mild to moderate intellectual disability meet the criteria for anxiety disorder (Dekker & Koot, 2003). Nonetheless, studies on the treatment of anxiety disorders focus mainly on phobic disorders among children without an intellectual disability (Došen, 2005). Fortunately, reliable therapy techniques used for treating anxiety in non-ID persons can also be applied to the ID population (Hagopian & Jennett, 2008).

The inability to understand that being separated from emotionally significant persons will be only temporary is often considered to be the origin of challenging behaviour. The idea that persons exist even when they are no longer in view is extremely abstract, and ID and visually impaired children might experience pronounced difficulty learning this concept (Cassidy, 1999). The absence or weak development of the concept of person permanence can cause anxiety (Došen, 2005).

Attachment refers to actively seeking and maintaining immediacy to a trusted figure, and allowing the individual to control behaviour, particularly when he or she is anxious (Bowlby, 1969; Cassidy, 1999). Several studies have shown the significance of developing an attachment relationship with ID clients (De Schipper, Stolk, & Schuengel, 2006; Sterkenburg, Schuengel, & Janssen, 2008). By constructing an attachment relationship with the therapist who provides psychological support, clients are empowered to manage their emotional responses (Bowlby, 1969). Conversely, the absence of an attachment figure can foster distress and psychophysical disequilibrium. Persons with ID are much more prone to insecure attachment relationships (Janssen et al., 2002a,b; Schuengel & Janssen, 2006) than non-intellectually disabled persons and it can be a challenging task for professionals to create and facilitate secure attachment relationships with members of this population (Clegg & Landsdall-Welfare, 1995). Research has shown that the interactional relationship patterns between ID clients and staff members are not well recognised (De Schipper, Stolk, & Schuengel, 2006; Reuzel, Embregts, Bosman, Van Nieuwenhuijzen, & Jahoda, 2013) and caregivers are not focussed on the attachment needs of their clients (De Schipper et al., 2006; De Schipper & Schuengel, 2010).

e-health is an emerging phenomenon (King et al., 2010; Mair et al., 2012), in which health promotion and information are facilitated by computers and other modern technologies. It has an exceptional ability to influence behaviour and encourage lifestyle adjustment via interactivity (Neuhauser & Kreps, 2003). e-health also has the potential to remove the time and space barrier between clients and professionals (Tachakrax, Wang, Istepanian, & Song, 2003). A systematic literature review by Den Brok and Sterkenburg (2014) verified that the use of technology in psychological interventions is increasingly in demand. Persons with ID are offered greater independence when given access to technology (Den Brok & Sterkenburg, 2014). Studies also show that technology can encourage independence and autonomy among students (De Freitas Alves, Monteiro, Rabello, Gasparetto, & De Carvalho, 2009). However, the use of e-health to support persons with ID, more specifically persons with intellectual and visual impairments and separation anxiety, has not been explored. The number of people with ID using mobile technology is tiny compared to persons without ID (Stock, Davies, Wehmeyer, & Palmer, 2008). A study done by Bryan, Friedman, and Carey (2007) established that 58% of the participants with ID had never used a mobile phone and only

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