Developmental Disability WA, Online Course: Foundations to Understanding Behaviour

Module Five: Health and Pain

Video Transcript

Let's talk about how health and pain are related to behaviour. We know that people with a disability are more likely to experience medical health or pain related problems than people without a disability. When you pair this fact with the communication difficulties often experienced by a person with a disability, often their health problems go unrecognized or are not well understood.

When trying to understand the influences or reasons for behaviour, many strategies and frameworks lead us to look at what the behaviour is and what is happening in the environment. In doing this, we can often miss the most common cause of behaviour or change in regulation, and that is pain, feeling unwell, or undiagnosed health issues.

Some health problems are more common in children with intellectual disability and suggest an increased likelihood of pain. These include things like tooth decay, gastro oesophageal reflux disorder, sometimes known as heart burn, middle ear infections, constipation. In addition to specific health problems that are more likely in children with intellectual disability, some conditions are associated with a wide range of specific health problems, which indicate a very strong need to monitor for possible signs of pain.

Some medical conditions are more common in specific disabilities too. It may be helpful to find out more about their disability when a person is behaving in ways which challenge us. For example, reflux is more common in certain genetic syndromes and disorders, including Cri du chat syndrome, Angelman syndrome, Cornelia de Lange syndrome, as well as in Autism spectrum disorders. We also know that the risk of developing diabetes mellitus, is increased in Prader Willi syndrome, and that seizures are common in children with Cerebral palsy.

Discomfort can also lead to dysregulation and pain. A person doesn't have to be sick or in pain to behave in challenging ways. Behaviour can also be related to physical disability. Where a disability affects mobility, people may be unable to make adjustments to their surroundings, to change what's causing them discomfort. If the causes of discomfort are left unaddressed, they may lead to pain.

Some things which may lead to discomfort include; poor posture and sitting, pressure caused by sitting or lying in one position for too long, rubbing or uncomfortable clothing or feeling itchy. Experiencing pain or poor health can influence all of our coping and overall regulation. Remember the explanation provided by the researcher Stuart Shanker. He talks about how all of our domains of regulation, have an impact on each other. So, if we're unwell, it can impact on our ability to think, socialize and manage our emotions. We need to be aware of how a

person is feeling and their overall health to not only improve their physical wellbeing, but also to help them feel calm, safe, and connected.

There has been some research in the area of pain and discomfort with increased awareness of what type of behaviours can indicate that the person is experiencing pain. You may like to download the guide called, Pain, a guide for parents, produced by Cerebra in the UK.

Researchers have found that pain can be demonstrated by children, or people with complex communication needs; by high activity levels, squirming, shifting back and forth and jerking or fidgeting. Less movement or not moving at all can also be a sign of pain. So can changes in appetite, like lack of interest in food, too much interest in food or changes in sleeping patterns.

This tells us that we should be paying attention to any changes in the person's activity levels or patterns of wellbeing that concern us. Self-injury has long been thought of as being caused by sensory regulation. But what is sensory regulation? The person could be trying to regulate their senses, due to pain. Self-injury is one of the primary signs of pain for people with disability.

The FLACC, pain scale is a useful tool to help guide our awareness of pain for people with complex needs, and especially people with complex communication needs. Just remember that this is a guide. Just because a person doesn't have these specific behaviours, that doesn't mean they're not unwell or in pain. However, this scale can help families to show doctors how behaviour can be a sign that a person has urgent health needs.

Another important practice is having access to effective visual communication tools to help talk about what the person might be experiencing. So remember, before we jump straight to behaviour strategies, think about the person's health. Is the person in pain? Are they feeling unwell, like having a headache or a cold? Are they experiencing dental pain? Are they constipated or having difficulty with their bladder or bowel? Is their diet affecting their health and wellbeing? Are they able to regulate their temperature? Are they having seizures, which sometimes can be hard to recognize? Could they have allergies, or is the medication influencing their overall health?

It is really important to remember that the most common cause of changes in behaviour or regulation is pain or feeling unwell.

End of transcript for module five.