

BINNENGEKOMEN

In deze rubriek wordt naar recent verschenen publicaties verwezen die voor de LVB-sector relevant zijn.

Teeuwen, M. (2012). *Licht Verstandelijk Gehandicapte jongeren, hun wereld en hun plaats in het strafrecht*. Amsterdam: SWP. ISBN 978 90 885 0325 2.

In het jeugdstrafrecht zijn licht verstandelijk gehandicapte jongeren de laatste twee decennia sterk oververtegenwoordigd geraakt, terwijl ze in de vrijwillige hulpverlening ondervertegenwoordigd blijven. Wat is er gebeurd? Welke maatschappelijke veranderingen op sociaal en politiek gebied hebben aan deze opvallende verschuiving bijgedragen? Marigo Teeuwen (UvA) onderzocht 120 reclasseringsdossiers van licht verstandelijk gehandicapte (LVG) jongeren en interviewde jeugdreeclasseringswerkers, vertegenwoordigers van politie, officieren van justitie en kinderrechtshouders. Welke delicten plegen deze jongeren? Welke hulpverlening krijgen zij vóór en na het delict? Waarom komt deze van nature kwetsbare groep steeds meer in contact met justitie, met alle gevolgen van dien. Wat weten de professionals van deze jongeren die tot de minst mondige en meest kwetsbare jongeren behoren? Een belangrijke rol in de verklaring voor de oververtegenwoordiging in het strafrecht speelt de normalisatiegedachte. Maar hoe normaal zijn ze, en zijn LVG- jongeren - en de samenleving - er wel mee geholpen dat ze als normaal worden bejegend?

Wottiez, I., Ras, M., & Oudijk, D. (2012). *IQ met beperkingen. De mate van verstandelijke handicap van zorgvragers in kaart gebracht*. Den Haag: Sociaal en Cultureel Planbureau. ISBN 978 90 377 0602 4

De vraag naar zorg voor verstandelijk gehandicapten (VG-zorg) is de afgelopen jaren flink gegroeid. In eerdere rapportages heeft het Sociaal en Cultureel Planbureau het aantal verstandelijk gehandicapten dat zorg vraagt nader in kaart gebracht. Mede op verzoek van het ministerie van VWS worden de analyses in dit rapport uitgebreid met gegevens over het IQ van verstandelijk gehandicapten met een zorgindicatie. De vraag naar VG-zorg binnen de AWBZ is tussen 1998 en 2009 met gemiddels 7% per jaar gegroeid. Het aantal ernstig verstandelijk gehandicapten (IQ<50) is in deze periode nagenoeg constant gebleven. De groep licht verstandelijk gehandicapten (50<IQ<70) met een zorgvraag groeide in aantal het meest, op enige afstand gevolgd door zwakbegaafden (70<IQ<85). Deze laatste groep groeide relatief gezien het sterkst. Onder beide groepen is de groei recent iets afgezwakt en groeit de vraag onder jongeren (t/m 22 jaar) meer dan onder ouderen. Eerdere conclusies dat vooral de jongeren de groei hebben bepaald zijn hiermee aangescherpt: de groei in de vraag naar VG-zorg is vooral veroorzaakt door de jonge zwakbegaafden en licht verstandelijk gehandicapten.

Branckaer, C., Ghesquière, P., & De Smedt, B. (2011). *Numerical magnitude processing in children with mild intellectual disabilities*. *Research in Developmental Disabilities*, 32, 2853–2859.

The present study investigated numerical magnitude processing in children with mild intellectual disabilities (MID) and examined whether these children have difficulties in the ability to represent numerical magnitudes and/or difficulties in the ability to access numerical magnitudes from formal symbols. We compared the performance of 26 children with MID on a symbolic (digits) and a non-symbolic (dot-arrays) comparison task with the performance of two control groups of typically developing children: one group matched on chronological age and one group matched on mathematical ability level. Findings revealed that children with MID performed more poorly than their typically developing chronological age-matched peers on both the symbolic and non-symbolic comparison tasks, while their performance did not substantially differ from the ability-matched control group. These findings suggest that the development of numerical magnitude representation in

children with MID is marked by a delay. This performance pattern was observed for both symbolic and non-symbolic comparison tasks, although difficulties on the former task were more prominent. Interventions in children with MID should therefore foster both the development of magnitude representations and the connections between symbols and the magnitudes they represent.

Burford, B., & Jahoda, A. (2011). Do video reviews of therapy sessions help people with mild intellectual disabilities describe their perceptions of cognitive behaviour therapy? *Journal of Intellectual Disability Research*, 56, 179–190.

This study examined the potential of a retrospective video reviewing process [Burford Reviewing Process (BRP)] for enabling people with intellectual disabilities to describe their experiences of cognitive behaviour therapy (CBT). It is the first time that the BRP, described in this paper, has been used with people with intellectual disabilities and the aim was to assess the feasibility of the procedure and gain a picture of the information it might yield. Using the BRP, 12 clients reviewed tapes of their fourth and ninth CBT sessions and six reviewed the fourth session only. All reviews were audio recorded for later verbatim transcriptions of clients' comments. Reviews and transcriptions were conducted by non-clinical researchers. Thematic analysis was applied to the transcripts by a researcher who was not CBT-trained. All clients were able to follow the instructions for the BRP. Three broadly based themes encapsulated their responses – how they felt about themselves, how they felt the therapist was helping and how CBT was helping. A fourth theme referred to comments on issues that were currently troubling clients, which were prompted by watching the video but did not refer to actual events on screen. The BRP seems a feasible approach with this client group and gave insights into their feelings and opinions on CBT. Clinical implications of the results and the potential for further developments are discussed.

Kleefman, M., Jansen, D. E. M. C., & Reijneveld, S. A. (2011). The effectiveness of Stepping stones Triple P: the design of a randomised controlled trial on a parenting programme regarding children with mild intellectual disability and psychosocial problems versus care as usual. *BMC Public Health*, 11, 676. Open access: <http://www.biomedcentral.com/1471-2458/11/676>

Children with an intellectual disability are at increased risk of psychosocial problems. This leads to serious restrictions in the daily functioning of the children and to parental stress. Stepping Stones Triple P aims to prevent severe behavioural, emotional and developmental problems in children with a (intellectual) disability by enhancing parenting knowledge and skills, and the self-confidence of parents. This paper aims to describe the design of a study of the effectiveness of parenting counselling using Stepping Stones Triple P compared to Care as Usual. The effects of Stepping Stones Triple P will be studied in a Randomised Controlled Trial. Parents of children aged 5-12 years with an IQ of 50-85 will be recruited from schools. Prior to randomisation, parents complete a screening questionnaire about their child's psychosocial problems and their parenting skills. Subsequently, parents of children with increased levels of psychosocial problems (score on Strengths and Difficulties Questionnaire ≥ 14) will be invited to participate in the intervention study. After obtaining consent, parents will be randomised either to the experimental group (Stepping Stones Triple P) or to Care as Usual. The primary outcome is a change in the child's psychosocial problems according to parents and teachers. The secondary outcome is a change in parenting skills. Data will be collected before the start of the intervention, immediately after the intervention, and six months after. This paper presents an outline of the background and design of a randomised controlled trial to investigate the effectiveness of Stepping Stones Triple P, which aims to decrease psychosocial problems in children with a mild intellectual disability. Stepping Stones Triple P seems promising, but evidence on its effectiveness for this population is still lacking. This study provides evidence about the effects of this intervention in a community-based population of children with a mild intellectual disability.

Matson, J. L., Kozlowski, A. M., Worley, J. A., Shoemaker, M. E., Sipes, M., & Horovitz, M. (2011). What is the evidence for environmental causes of challenging behaviors in persons with intellectual disabilities and autism spectrum disorders? *Research in Developmental Disabilities, 32*, 693–698.

An extensive literature on the causes of challenging behaviors has been developed, primarily in the applied behavior analysis literature. One hundred and seventy-three empirical studies were reviewed where functional assessment serves as the primary method of identifying these causes. Most of the studies were able to identify a clear function or functions. Most commonly established causes were attention, the efforts to acquire tangibles, negative reinforcement in the form of escape from tasks or environments, and sensory stimulation, also described as an alone condition. Examples are provided regarding how these conditions are investigated across studies. Biological and cognitive causes have also been demonstrated. However, to date the empirical literature is limited with the bulk of studies being correlational. Considerably more research is needed, but some causes and methods to identify them are beginning to emerge.

Maulik, P. K., Mascarenhas, M. N., Mathers, C. D., Dua, T., & Saxena, S. (2011). Prevalence of intellectual disability: A meta-analysis of population-based studies. *Research in Developmental Disabilities, 32*, 419–436.

Intellectual disability is an extremely stigmatizing condition and involves utilization of large public health resources, but most data about its burden is based on studies conducted in developed countries. The aim of this meta-analysis was to collate data from published literature and estimate the prevalence of intellectual disability across all such studies. The review includes studies published between 1980 and 2009, and includes data from populations that provided an overall estimate of the prevalence of intellectual disability. Meta-analysis was done using random effects to account for heterogeneity. Sub-group analyses were also done. The prevalence of intellectual disability across all 52 studies included in the meta-analysis was 10.37/1000 population. The estimates varied according to income group of the country of origin, the age-group of the study population, and study design. The highest rates were seen in countries from low- and middle income countries. Studies based on identification of cases by using psychological assessments or scales showed higher prevalence compared to those using standard diagnostic systems and disability instruments. Prevalence was higher among studies based on children/adolescents, compared to those on adults. Higher prevalence in low and middle income group countries is of concern given the limitations in available resources in such countries to manage intellectual disability. The importance of using standardized diagnostic systems to correctly estimate the burden is underlined. The public health and research implications of this meta-analysis have been discussed.

Oeseburg, B., Dijkstra, G., Groothoff, J., Reijneveld, S., & Jansen, D. (2011). A systematic review of the prevalence rates of chronic health conditions in populations of children with intellectual disability was provided. *Intellectual and Developmental Disabilities, 49*, 59-85.

We identified 2,994 relevant studies by searching Medline, Cinahl, and PsycINFO databases from 1996 to 2008. We included the 31 studies that had sufficient methodological quality. The 6 most prevalent chronic health conditions in children with intellectual disability were epilepsy (22.0/100), cerebral palsy (19.8/100), any anxiety disorder (17.1/100), oppositional defiant disorder (12.4/100), Down syndrome (11.0/100), and autistic disorder (10.1/100). The reported prevalence rates of chronic health conditions in this population was much higher than in the general population. However, both the number of studies that were included and the number of chronic health conditions they reported about were limited. There is an urgent need for better evidence on the prevalence of chronic health conditions among children with intellectual disability.

Schuchardt, K., Maehler, C., Hasselhorn, M. (2011). Functional deficits in phonological working memory in children with intellectual disabilities. *Research in Developmental Disabilities, 32*, 1934–1940.

Recent studies indicate that children with intellectual disabilities have functional limitations primarily in the phonological loop of working memory (Baddeley, 1986). These findings are indicative of a specific structural deficit. Building on this research, the present study examines whether it is possible to identify specific phonological subfunctions as causal factors in these qualitative deviations from typical development found in children with intellectual disabilities.

In a three-group design, specific subfunctions of phonological working memory were examined in students of the same mental age (one group of 15-year-olds with mild intellectual disability [IQ 50–69], one group of 10-year-olds with borderline intellectual disability [IQ 70–84], and one group of 7-year-olds of average intelligence [IQ 85–115]). The automatic activation of the subvocal rehearsal process was operationalized by the word-length effect; the size of the phonological store, by a task involving repetition of nonwords of differing syllable length; and accuracy of processing, by both the phonological similarity effect and the quality of acoustic presentation of the nonword repetition task (distorted vs. undistorted item presentation).

The results revealed impairment of the phonological store only in terms of reduced storage capacity, and showed that this deficit increased with length of the item sequences to be remembered. However, this deficit was observed only in children with mild intellectual disability; the performance of children with borderline intellectual disability corresponded with that of a control group of 7-year-olds matched for mental age. The findings are discussed in the context of the two-component model of the phonological loop. They indicate that deficits in storage capacity are associated with deficits in language development and thus seem to be one of the causes of cognitive impairment in individuals with mild intellectual disability

Taber-Doughty, T., Bouck, E., C., Tom, K., Jasper, A. D., Flanagan, S. M., & Bassette, L. (2011). Video Modeling and Prompting: A Comparison of Two Strategies for Teaching Cooking Skills to Students with Mild Intellectual Disabilities. *Education and Training in Autism and Developmental Disabilities, 46*, 499–513.

Self-operated video prompting and video modeling was compared when used by three secondary students with mild intellectual disabilities as they completed novel recipes during cooking activities. Alternating between video systems, students completed twelve recipes within their classroom kitchen. An alternating treatment design with a follow-up and withdrawal probe was used to illustrate the effectiveness of both systems on each student's independent task performance. Results indicated increased independence following video

system use by all three students with video modeling more effective for two students and video prompting more effective for the third. Future directions for research are presented.

Van Luit, J. E. H., & Van der Molen, M. J. (2011). The effectiveness of Korean number naming on insight into numbers in Dutch students with mild intellectual disabilities. *Research in Developmental Disabilities, 32*, 1941–1947.

Children from Asian countries score higher on early years' arithmetic tests than children from Europe or the United States of America. An explanation for these differences may be the way numbers are named. A clear ten-structure like in the Korean language method leads to a better insight into numbers and arithmetic skills. This assumption forms the basis of the current study. Examined is whether an intervention with number naming in the Korean way influences number awareness of students with mild intellectual disabilities (N = 70; mean age: 9;0 years). The results indicate a positive effect of this alternative method of number naming on the insight into numbers up to 20. However, the effect did not generalize to insight into numbers 21–100. The Korean method of number naming seems to be a promising way to teach students with mild intellectual disabilities insight into numbers.

Van Nieuwenhuijzen, M., & Vriens, A. (2011). (Social) Cognitive skills and social information processing in children with mild to borderline intellectual disabilities. *Research in Developmental Disabilities, 33*, 426–434.

The purpose of this study was to examine the unique contributions of (social) cognitive skills such as inhibition, working memory, perspective taking, facial emotion recognition, and interpretation of situations to the variance in social information processing in children with mild to borderline intellectual disabilities. Respondents were 79 children with mild to borderline intellectual disabilities in the age of 8–12 who were given tasks on social cognitive skills and social information processing. The results from the present study show that emotion recognition, interpretation, working memory and inhibition skills predict social information processing skills. It is concluded that especially emotion recognition and interpretation skills are important cognitive skills that predict social information processing, and therefore should be the focus of treatment.

Van Nieuwenhuijzen, M., Vriens, A., Scheemaker, M., Smit, M., & Porton, E. (2011). The development of a diagnostic instrument to measure social information processing in children with mild to borderline intellectual disabilities. *Research in Developmental Disabilities, 32*, 358–370.

A growing interest exists in the measuring of social adaptive functioning in children with mild to borderline intellectual disabilities (MBID), but valid instruments to measure this construct are lacking. The aim of the present study was to develop such an instrument and to examine it on its discriminate validity. In 141 children aged 8–12 years a new test battery was examined in four groups either with MBID, behaviour problems or both, and typically developing peers. The results show that children with either MBID or behaviour problems or both show more hostile intent attributions, set more internal revenge goals, generate more aggressive and fewer assertive responses, feel more confident in inadequate responses and select fewer assertive responses, than their typically developing peers. Children with MBID are characterized by relying on earlier experiences in encoding information, a small response repertoire, positive evaluation of submissive but not assertive responses, and the selection of aggressive responses. In addition, they have more problems with perspective taking, problem recognition, interpretation in general, inhibition, working memory, and emotion recognition, than their typically developing peers. Further, children with MBID and behaviour problems have more difficulties in social information processing when the information in social situations is more complex. It is concluded that the tasks of the test battery can discriminate between groups, and after further development of the material, can be used to obtain information on the competencies and disabilities in social information processing and social cognitive skills, in order to be able to offer adequate treatment to these children.

Westendorp, M., Houwen, S., Hartman, E., & Visscher, C. (2011). Are gross motor skills and sports participation related in children with intellectual disabilities? *Research in Developmental Disabilities, 32*, 1147–1153.

This study compared the specific gross motor skills of 156 children with intellectual disabilities (ID) ($50 \leq IQ \leq 79$) with that of 255 typically developing children, aged 7–12 years. Additionally, the relationship between the specific gross motor skills and organized sports participation was examined in both groups. The Test of Gross Motor Development-2 and a self-report measure were used to assess children's gross motor skills and sports participation, respectively. The children with ID scored significantly lower on almost all specific motor skill items than the typically developing children. Children with mild ID scored lower on the locomotor skills than children with borderline ID. Furthermore, we found in all groups that children with higher object-control scores participated more in organized sports than children with lower object-control scores. Our results support the importance of attention for well-developed gross motor skills in children with borderline and mild ID, especially to object-control skills, which might contribute positively to their sports participation.

Zijlmans, L., Embregts, P. Gerits, L., Bosman, A. & Derksen, J. (2011). Training emotional intelligence related to treatment skills of staff working with clients with intellectual disabilities and challenging behaviour. *Journal of Intellectual Disability Research*, 55, 219-2

Staff working with clients with intellectual disabilities (ID) who display challenging behaviour may contribute to the continuation of this behaviour, because it causes emotional reactions such as anxiety, anger and annoyance, which may prohibit adequate response behaviour. To enhance staff behaviour and treatment skills a training that aimed at improving emotional intelligence (EQ) was developed. The goal of this study was to assess whether an EQ training in combination with a video-feedback training programme improves emotional intelligence of staff working with clients with ID and challenging behaviour. Methods Participants were 60 staff members working with individuals with ID and challenging behaviour. Thirty-four staff members participated in a 4-month training programme and 26 constituted the control group. A pretest–posttest control group design was used. Effectiveness was assessed by using the Dutch version of the Bar-On EQ-i and the judgments of experts on emotional intelligence. Emotional intelligence of the experimental group changed significantly more than that of the control group. Judgments of experts on emotional intelligence indicated that the change of emotional intelligence of the experimental group improved positively. The positive effect of the training programme on emotional intelligence is consistent with previous research on emotional intelligence and suggests that emotional intelligence of staff working with clients with ID and challenging behaviour can be influenced by training.