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**GO Boldly.**

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## The Power in Moments of Connection:

Interactions Between Disability Support Workers and Adults With Profound Intellectual and Multiple Disabilities

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## Background

- Little research re: interactions between adults with profound intellectual and multiple disabilities (PIMD) and disability support workers (DSWs)
- Quality of interaction – quality of life
- Based on existing research – interactions low frequency, low quality
- Recommendations based on little evidence

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## DSW's views

- **Interaction with people with PIMD**
  - Can be hard
  - Requires perseverance
  - Is not taught
  - Requires time to learn how to do it
  - Ruled by what the person responds to
  - Is confounded by conflicts (e.g. attachment, age appropriateness, play, role expectations)
    - Forster & Iacono, 2008

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## Research question

- **What happens in interactions between people with PIMD and DSW?**
  - Preliminary study of coding methods
    - > Affective attunement

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## Affect Attunement

- The performance of behaviours that express the *quality of feeling* of shared affect state without imitating the exact behavioural expression of the inner state (Stern, 1985).
- Behavioural modality same or different
- Clear affective emphasis must be present (Jonsson et al., 2001).

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## Parent-infant affective attunement

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## Key Constructs

- **Affect**
  - Categorical
  - Vitality
- **Modality**

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## Types of Affect

- **Categorical**
  - The discrete categories of happiness, sadness, fear, anger, disgust, surprise, interest, and shame, and their combinations.
- **Vitality affects**
  - The forms of feelings involved with the vital processes of life (e.g., breathing, being hungry, or falling asleep). Vitality affects involve dynamic terms such as "surging", "fleeting", and "drawn out", that capture the quality of an experience that is elicited through various motivational states, appetites, and tensions. Essentially vitality affect refers to *how* a behaviour is performed, not *what* behaviour is performed.

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## Properties of Affect Behaviours

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## Processes of Affect Attunement

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## Person with PIMD affective attunement

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### Methodology

- **Participants**
  - 21 dyads of people with PIMD / DSW
- **Video recordings of interactions**
  - 20 minutes recorded – 10 minutes analysed
- **Coding of the recordings**
  - Consensus coding following coding manual

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### Participants with PIMD (n=21)

- Male- 52%
- Age – 24-55, mean = 37
- Epilepsy – 33% no, 33% controlled/monthly, 33% weekly/daily
- Medications for bowel management, reflux, and pain relief
- Vision – limited to little – 67%
- Hearing – reported normal – 86%
- Mobility – 52% unable to help with transfer
- Communication – body language 38%, looking and reaching 52%

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### Adaptive Behaviour Skills (Vineland age equivalence)

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### DSW Participants (n=21)

- Male- 86%
- Age – 31-62, mean= 48
- Education – TAFE 76%
- Time working with people with disabilities – 9mths-30 years – mean = 10 years
- Time working with participant with PIMD – 8mths-16 years – mean = 4 years
- Parenting – 48% grandparents, 10% no children

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### Preliminary results

- **DSWs do use affective attunement**
  - 1-6 incidents per 10 minutes
  - Duration: 2.3 seconds (0.9 – 5.3 seconds)

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### Preliminary results

Person with PIMD	DSW	Matching
• Mid-intensity	• Mid-intensity	• ✓ (68.2%)
• 1-2 sec	• < 1 sec	• ✓ (68.2%)
• Rhythm	• Rhythm	• Somewhat
• Shape	• Shape	• Somewhat
• Postural, facial with some vocal	• Postural, vocal and facial	• Somewhat

**Amodal properties**

- Intensity
- Amodal intensity

**Modality**

- Facial
- Vocal
- Gestural
- Postural

**Affect behaviour**

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### Eliciting behaviour

- Mainly motor efforts and attention behaviours.
- Some behaviours contained emotional affects (e.g. smile or frustration look).
- Little indication of falling, sudden, risk, intentional behaviours, or striving behaviours.

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- Loss
- Sudden
- Fall
- Risk
- Effort
- Attention
- Emotion
- Negative
- Striving
- Effective action

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### Discussion

- Affective attunement occurs between DSWs and people with PIMD
- DSWs respond to vitality affects more than categorical affects

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### Implications

- Intervention to enhance existing behaviour?
- Is affective attunement an indicator of quality of interaction?
- What effect does affective attunement have on person with PIMD?

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