Parents with a Learning Disability - recent items

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Journal articles

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Social support received by women with intellectual and developmental disabilities during pregnancy and childbirth: An exploratory qualitative study

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Highlights
- Emotional support and social companionship were lacking.
- Available support was not always accessible.
- High levels of social support were not always perceived as beneficial.
- Perceived quality of support was influenced by accessibility, attitudes, autonomy.

Abstract
Objective
This study aims to contribute to the development of a conceptual framework that will inform maternity care improvements for expectant mothers with intellectual and developmental
disabilities (IDD) by exploring the structure, functions, and perceived quality of social support received by women with IDD during pregnancy and childbirth.

**Design/setting**
using a grounded theory approach, we conducted an exploratory study set in Ontario, Canada in 2015.

**Participants**
the sample included four adult women with IDD who had given birth in the last five years.

**Measurements**
data were collected using semi-structured interviews.

**Findings**
the structure of social support received by women with IDD consisted of both formal and informal sources, but few or no friendships. Women with IDD reported high levels of informational and instrumental support and low levels of emotional support and social companionship. However, a high level of available support was not always perceived as beneficial. Emergent core categories suggest that social support is perceived as most effective when three conditions are met: (1) support is accessible, (2) support is provided by individuals expressing positive attitudes towards the pregnancy, and (3) autonomy is valued.

**Key conclusions and implications for practice**
our study confirms and identifies important gaps in the social support received by expectant mothers with IDD. Women with IDD currently lack accessible informational support, emotional support, and social companionship during pregnancy and childbirth. Additional findings regarding the structure and functions of social support are presented, and a preliminary conceptual framework of effective social support during pregnancy and childbirth, as perceived by women with IDD is also proposed. Findings suggest that increasing support accessibility should be a social and clinical priority; however, maternity care providers should be aware of stigmatizing attitudes and respect the autonomy of pregnant women with IDD as they prepare for motherhood.

**Title: The characteristics of local support systems, and the roles of professionals, in supporting families where a mother has an intellectual disability.**

**Citation:** Journal of Applied Research in Intellectual Disabilities, May 2016, vol. 29, no. 3, p. 197-210, 1360-2322 (May 2016)
Author(s): Weiber, Ingrid, Eklund, Mona, Tengland, Per-Anders

Abstract: Background: There might be a need for support for families where the mother has an intellectual disability, in order to counteract the effects of potential parental inadequacy and other detrimental aspects of the family situation. The purpose of this study was to describe how professionals characterized such support and the collaboration required.

Materials and methods: Focus group interviews involving 29 professionals were conducted and analysed using content analysis. Results: Five themes were identified: The roles and activities of the professionals involved; ways in which needs of support are identified; problems in identifying mothers with an intellectual disability; how professionals coordinate their support and work together; and the dilemma concerning legislative actions. Conclusions: By identifying both fruitful and problematic aspects of professional support, the findings may be used to enhance future support. More efficient chains of information and improved inter-sector collaboration between professions may further enhance the support practices.

Source: PsycInfo

Title: Midwives' experiences of caring for women with learning disabilities - A qualitative study.

Citation: Midwifery, May 2016, vol. 36, p. 35-42, 1532-3099 (May 2016)

Author(s): Castell, Emma, Stenfert Kroese, Biza

Abstract: people with learning disabilities (LD) are increasingly likely to become parents and are entitled to have access to the right support to be able to be suitable parents. However, access to such support is affected by limited resources, attitudes towards people with LD becoming parents, and lack of training regarding caring for parents with learning disabilities for midwives. A learning disability (LD) is defined as a significantly reduced ability to understand new or complex information, to learn new skills (impaired intelligence), reduced skills to cope independently with everyday life, has an impact on most areas of a person's life and the difficulties started in early childhood. Little research has explored health professionals' experiences of their support of people with LD during their journey to become parents. Midwives are often the first professionals pregnant women come into contact with
and therefore are key professionals in the support system for parents with LD. The principle objective of the current research is to develop an understanding of midwives' experiences of caring for women with a LD. The study explored midwives' experiences of caring for women with LD using an Interpretative Phenomenological Approach (IPA). Nine qualified midwives employed by a single NHS trust participated in the study. A semi-structured interview schedule was utilised during one-to-one interviews with the midwives. The interview transcripts were analysed using IPA stages. Four superordinate themes were identified. The midwives reported receiving a lack of LD training and faced significant time constraints, which left them feeling that they could not spend the necessary time with the women to meet their pregnancy needs. The midwives felt unsupported in their attempts to deliver adequate midwifery care, speaking about a lack of accessible support for pregnant women with LD. They were left feeling responsible to fill the gaps in service provision. The midwives were dedicated in delivering adequate care to help give women with LD a positive experience of childbearing. They felt a safeguarding process (child protection) was an inevitable part of women with LD's pregnancy experience yet were aware that the right support at the right time could improve parenting capacity. It is recommended that training on working with and providing services for people with LD is made available to qualified and student midwives as well as accessible resources, professional support and supervision. Copyright 2016 Elsevier Ltd. All rights reserved.

Source: Medline