

Learning Disability Specialist Library

Evidence Bulletin 010 – January 2008

The LDSL brings together and makes available best current evidence to support decision makers in supporting people with learning disabilities.

Key articles which add important new knowledge to the field are presented here with links to extended summaries on the LDSL site.

Get **LDSL Evidence Bulletin**: <http://www.library.nhs.uk/learningdisabilities/>

- **What length of stay in long-stay hospitals for people with intellectual disabilities might predispose to H. pylori infection?**

Studies have reported high prevalence of *Helicobacter pylori* infection amongst people with intellectual disabilities, and particularly those who live, or have lived in long stay hospitals. This study set out to test residents of such hospitals, to ascertain the rate of infection, and to see whether this varied by length of stay. The researchers obtained blood samples from 36 people, and 59% of these proved positive for *H. Pylori* infection.

When looking at whether length of stay in hospital might be a predisposing factor to infection, they found that of the nineteen people who had been in hospital for longer than four years, sixteen had evidence of *H. pylori* infection (84%). Of the seventeen people who had been in hospital for less than four years, four (24%) had evidence of *H. Pylori*.

The authors suggest therefore that infection with *H. pylori* is much more likely among people who have spent more than 4 years in a hospital for people with intellectual disability in the UK. Most long-stay residents have now been resettled in community settings, and they suggest that because of the risks associated with *H. Pylori* infection, which can in some cases lead to gastric cancer, that clinicians may wish to consider testing people who have lived in long stay intellectual disability hospitals for significant periods of time, where upper gastrointestinal pathology is proven or suspected.

Helicobacter pylori Infection in Five Inpatient Units for People with Intellectual Disability and Psychiatric Disorder, Clarke et al in Journal of Applied Research in Intellectual Disabilities 21 (1), 95–98.

LDSL Summary

<http://www.library.nhs.uk/learningdisabilities/viewResource.aspx?resID=277307&code=66c901408ee8223fd2b31c7bc468e674>

This document is produced by the Learning Disability Specialist Library. The National Library for Health is not responsible or liable for, directly or indirectly, ANY form of damage whatsoever resulting from the use/misuse of information contained in or implied by this document.

- **Are services for people with learning disabilities from minority ethnic communities in the North West of England responsive?**

Previous studies have suggested that people with learning disabilities from minority ethnic communities are disadvantaged, often with high support needs, and yet with low uptake of services, as services can fail to take into account people's ethnic, cultural or religious needs.

This study looked at services in the North West of England, looking at the range, appropriateness and responsiveness of services there. It was completed before the publication of Learning Difficulties and Ethnicity: A Framework for Action (Valuing People 2004).

The researchers sent postal questionnaires, with fixed choice and open ended questions to 98 learning disability service commissioners, service providers and other non-service provision organizations.

Responses showed a general perception that people from the Pakistani community have a good uptake of service use. Other communities were poorly represented in service uptake.

Findings suggest that improvements in service provision for people with learning disabilities from minority ethnic communities can still be made. Legislation, organizational culture and focused service provision, along with employing staff who can communicate with people who do not speak English all result in significant uptake of services.

Respondents detailed evidence of a number of policies and projects often initiated following feedback from service users and individual staff members. The authors found a common response from providers was to report that new services were being developed.

They suggest that monitoring and evaluation is sporadic, and they recommend routine collection of information about people from minority ethnic communities.

Responsive services for people with learning disabilities from minority ethnic communities
Caton et al, in British Journal of Learning Disabilities 35 (4), 229–235.

LDSL Summary

<http://www.library.nhs.uk/learningdisabilities/viewResource.aspx?resID=277308&code=fb0b523713b8abbfd0e9afea950ac87a>

- **What factors impact on the effective use of Information and Communication Technology equipment in day services for people with intellectual disabilities?**

Information and Communication Technology is a vital part of modern life. Access to and use of this technology is increasingly important to ensure full participation in 21st century society. This study looked at the introduction of ICT equipment in a number of day services for adults with intellectual disabilities, to investigate what factors impacted on its effective use. The study themed first-order (e.g. time and money) and second-order factors (e.g. beliefs of staff members). The study used a qualitative approach, visiting nine day service sites over a period of 6 months to observe ICT-related practice and to talk with staff members working with adults with intellectual disabilities. The day services were all similarly equipped with modern ICT equipment which included computers, digital cameras, and Internet connections.

First order factors reported by staff were training and budget. Training not surprisingly was significantly important, including the content of the training and its relevance to staff, but also the practicalities of attending, and managing staff cover to allow people to attend. Organizational culture and beliefs about the suitability of technology for older or less able service users were important second-order factors brought out by staff. It was interesting that despite very similar levels of equipment, support and training, the authors were able to identify three very different levels of ICT use within the organisation, categorised as 'Early sites' (n = 3) where there was very little or no use of ICT, 'Established sites' (n = 3) where there was regular, creative and enthusiastic use of ICT and 'Emergent sites' (n = 2) which fell between these two points with some regular use.

The authors conclude that simply providing the equipment, no matter how state-of-the-art, and training will not be sufficient to ensure effective use. The beliefs of staff and the organizational culture of the services in which the ICT equipment has been placed will play a significant role in how the equipment is used. They point out that this is in line with the impact of staff beliefs and attitudes on a whole range of activities in day services for people with intellectual disabilities. They discuss their findings within the framework of activity theory, and suggest that services need to develop a shared vision of ICT use drawing upon the successful model of working developed at the 'Established' sites.

Resources, Staff Beliefs and Organizational Culture: Factors in the Use of Information and Communication Technology for Adults with Intellectual Disabilities, Parsons et al in *Journal of Applied Research in Intellectual Disabilities* 21 (1), 19–33.

LDSL Summary

<http://www.library.nhs.uk/learningdisabilities/viewResource.aspx?resID=277309&code=734b05571b6965bdd7f0d38daec21511>

You can receive the **LDSL Evidence Bulletin** by registering at <http://www.library.nhs.uk/learningdisabilities/>