



Helping Canadians with Disability/Chronic Disease Get Physically Active: Tip Sheets for Intermediaries

For Canadians with a disability, regular physical activity may be even more important than it is for the rest of the population. For a person with a disability, an active lifestyle can open doors to increased health, social inclusion and self-empowerment - doors which might otherwise remain closed. Access to physical activity can eliminate the likelihood of acquiring secondary health conditions like diabetes, high blood pressure or heart disease. Being active builds resiliency and can provide an all-important outlet for a person with a disability.

These tip sheets are designed to provide general information in support of Canada's Physical Activity Guidelines, developed by the Canadian Society for Exercise Physiology.

Psychosis and Dissociative Disorders

General Information

This tip sheet is designed to provide some general information about Psychosis and Dissociative Disorders such as Schizophrenia and what is commonly called Multiple Personality Disorder. Psychosis is actually a symptom that can occur with these disorders. Concepts outlined in this paper should not be used as strict definitions or rules applicable to all those effected, but merely as guidelines. Every person is different. Remember, participants themselves are your number one resource when trying to ensure the inclusiveness of your physical activity programs.

In the mental health field we practice the recovery model. Pg. 122 of the Framework for Mental Health reads, *"Recovery is a process in which people living with a mental illness are empowered and supported to be actively engaged in their own journey of wellbeing."* The recovery process builds on individual, family, cultural and community strengths and enables people to enjoy a meaningful life in their community while striving to achieve their full potential. Recovery doesn't mean "cure" although cure is possible for some people.

Facts and Figures

Dissociative disorders may affect individuals of all ages. Some appear after puberty but may occur earlier. Some disorders may be the result of traumatic abuse or brain injuries. Some people respond well to the treatments and medications available and may appear to be functioning quite normally on many days but may show signs and symptoms on other days. In some cases, the side-effects of the medications used to manage symptoms can cause unique problems. A condition called Metabolic Syndrome may occur in which uncontrolled weight gain can happen regardless of healthy eating and lifestyle habits. Other side effects can be slurring of speech, uncontrolled movements such as twitches, and a peculiar foot-dragging shuffle. There are a whole range of other treatments such as counselling and lifestyle changes and stress management tools. Some individuals may appear well but are secretly struggling

and wish not to share their personal health status. You must respect their right to privacy should they choose not to disclose their condition or give current status.

What are Dissociative Disorders?

The causes of dissociative disorders are varied. In some cases, a genetic link has been shown to contribute but toxins and drugs can also be a causative factor. Psychological trauma can be a factor in some cases but can also result from the stigmatization faced by people who may have visible symptoms or side effects. They may have little sense of humour and an inability to focus. They may be easily frustrated or quick-tempered. With Bipolar Disorder, people may experience drastic mood swings with extremely high periods and extremely low periods. During low times, they may be severely depressed. At other times, they may be visibly agitated or appear as if “high”. During these times they may be very animated and impulsive.

Consequences of Dissociative Disorders

People's ability to cope with the daily stressors of life may be greatly impaired by dissociative disorders:

- cognitive (problems with memory, concentration, organization, and comprehension);
- behavioural (depression, irritability, inability to sit still);
- lack of motivation, i.e. an inability to even get out of bed in the morning;
- lack of impulse control and poor decision-making;
- Some individuals may also experience psychosis or delusions as a result of a dissociative disorder. These may take the form of hearing voices or thinking they are somebody or something they are not.

Working with a person who has a Dissociative Disorder

A person with a dissociative disorder may present with a combination of issues. People may have low self esteem and an inability to bounce back from disappointments. They may have difficulty maintaining a regular schedule and lack consistency. They may lack motivation and experience fatigue with little exertion. It is quite common for people to also experience depression as a result of their dissociative disorder.

Understanding a Person with a Dissociative Disorder

People with dissociative disorders may be distant or appear distracted. They may not be aware that their thoughts are incorrect. People may talk to themselves or exhibit repetitive behaviours to calm themselves. You must be understanding and supportive of them. Celebrate the small victories.

Tips for Getting Active - Overcoming Barriers

Involve the person in physical activity goal setting - make sure goals are realistic. It may be helpful to provide some options for goals that they can choose from. Educate about the importance of physical activity to the individual and their family. Know the individual's strengths and limitations - remember that these may vary from day to day. Be patient. Provide positive encouragement and support at all times. Listen to the person and encourage them to communicate their needs to you - they are the experts at what they need, not you!

Teaching and Communication Techniques

The following are ideas for ensuring maximum participation for people with mood disorders, depending on their abilities. You can use these strategies in combination:

- Memory - write instructions down clearly and fully.
- Inattention – patience and gentle encouragement may be needed to keep the participant on track.
- Limited concentration - minimize distractions during the activity, and try to keep things consistent. Be willing to change things up more frequently to maximize attention. Provide frequent breaks and opportunity for rest.
- Physical limitations and fatigue - modify aspects of the activity to match with the person's physical abilities to promote success (i.e. lighter equipment, change size of activity area).
- Emotional - encourage success and mastery during physical activity in order to boost self-esteem, no matter what level (low or high) they may reach. It is important that they do not feel they have failed in any way.
- Social behaviour - use smaller groups, modeling a supportive approach and patience. Provide a structured environment, with frequent milestones as determined by the individual.

Physical Activity Tips and Modifications

Dissociative disorders can be unpredictable and change frequently, so make sure you are always aware of the person's present strengths and weaknesses - concentrate on their abilities in order to promote success and confidence. Keep it simple - especially for people who have challenges with memory and concentration. For example, decrease the number of steps in an activity and limit distractions. Be aware of their limitations and shorten workouts if they are unable to focus and allow some flexibility.

Resources:

National Network for Mental Health - www.nnmh.ca

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