

BRSS TACS

Bringing Recovery Supports to Scale

TECHNICAL ASSISTANCE CENTER STRATEGY

Increasing Access to Treatment and Recovery Supports for People with Disabilities Affecting Reasoning, Memory, or Learning

This content is part of a set of informational sheets about improving access to recovery supports. Related topics include mobility limitations; disabilities affecting reasoning, memory or learning; deafness or hearing loss; and blindness or vision loss.

More than 16 million people, or 5 percent of the population, have some form of disability affecting reasoning, memory, or learning.¹ Many people are born with these disabilities, while others acquire them as a result of injury or illness. It is not uncommon for individuals with disabilities in this category to live with serious mental illness or substance use disorders. In fact, people with disabilities affecting reasoning, memory, or learning are at elevated risk for behavioral health conditions.²

The most common types of disabilities affecting reasoning, memory, or learning are:

Intellectual Disability (ID): Intellectual disability is characterized by significant limitations in both intellectual functioning and in adaptive behavior, which affects many everyday social and practical skills.³ ID can range from mild to profound and can have many different causes, including unknown causes. Fetal alcohol syndrome, Down syndrome, and Fragile X syndrome are three commonly known intellectual disabilities. People with mild or borderline ID often go undiagnosed.⁴

Learning Disability (LD): Learning disabilities are neurological conditions that interfere with the ability to store, process, or produce information. Learning disabilities can affect individuals' reading, writing, math, organization, memory, and attention,⁵ but are not the same as intellectual disabilities. People with LD are typically of average or above average intelligence.⁶ One researcher has estimated that 40–60 percent of individuals in substance use disorder treatment may be impacted by a learning disability.⁷

Traumatic Brain Injury (TBI): A traumatic brain injury is an injury that disrupts the normal function of the brain and can be caused by a bump, blow, or jolt to the head or a penetrating head injury.⁸ Explosive blasts can also cause TBI.⁹ According to the American Speech-Language-Hearing Association between 3.2 and 5.3 million people (1.1–1.7 percent of the U.S. population) live with long-term disabilities that result from TBI.¹⁰ U.S. military personnel experience TBI at higher rates than civilian populations.¹¹ Researchers have identified the following links between substance use disorder and TBI:

- A history of substance misuse is a risk factor for TBI.
- Alcohol use at the time of injury is a common occurrence with TBI.

- Prior TBI is common among individuals in treatment for substance use disorder.
- Substance use is linked to poorer outcomes of TBI.
- Substance use is linked to recurrent TBI.¹²

Use Clear Language

During behavioral health treatment and recovery services, we often use a variety of abstract and conceptual terms. In addition, written materials may use language that individuals with disabilities affecting reasoning, memory, or learning find difficult to understand. These individuals may need additional explanation and time to fully understand ideas such as higher power, the 12-steps, grandiosity, or abstinence. In order to accommodate this, check with the individual as to whether they would like to go over the materials.

Simplifying language is one effective approach to ensuring that everybody can access the support that they need. This can also be helpful for many people without disabilities, as the average adult in the United States reads at a seventh- to eighth-grade level.¹³ The internet offers software tools that will check text and offer suggestions for improving readability.

Try these other strategies for simplification:

- Use shorter words with fewer syllables.
- Remove unnecessary words.
- Write like you speak.
- Keep sentences and paragraphs short.

Share Written Materials in Advance

If written materials are going to be referenced during a group meeting, it may be helpful to check to see if the individual would like to set aside a time before the meeting to go through materials with someone who can clarify and explain the content as needed. An individual may also benefit from having someone read the text out loud. Additionally, providing the agenda for group meetings in advance for someone with an attention related disability can be very helpful.

Real-World Example



The fourth step of most 12-step programs reads, “Made a searching and fearless moral inventory.” This is a suggestion that links several abstractions into a behavior that is not familiar to most people. Contrast the statement with one modified for easier understanding: “Made a list of good and bad things about myself.”

The Alta California Regional Center for Developmental Services produced a side-by-side comparison of the original 12 steps and a [simplified version](#).¹⁴

Use More Pictures

The idea of a picture being worth a thousand words is relevant in the world of recovery. For example, the word “unmanageability” is common in 12-step terminology but requires some explanation. A picture of a disheveled person who has just crashed his car and is handcuffed can convey the concept of “unmanageability” clearly even to individuals who may struggle with understanding the word. Picture cards are also sometimes used as memory aids during therapy sessions for people experiencing mental illness.

[Looking at Treatment of Alcoholism](#)¹⁵ is a publication originally developed for the deaf community and useful for people with disabilities that affect reasoning, memory, or learning. The publication primarily uses drawings and a little text to convey comprehensive information about intervention, assessment, 12-step mutual aid organizations, and the processes of treatment and recovery.

Use a Talking Stick

People with disabilities that affect reasoning, memory, or learning (as well as those with hearing difficulties) sometimes complain about not being able to follow discussions during group meetings. Acronyms, abbreviations, slang, multiple speakers, and background noise can limit accuracy in understanding. Some groups have effectively adopted the Native American concept of a talking stick or speaker’s staff—only the person holding the stick is permitted to speak during a given period of time.¹⁶

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Please share your thoughts, feedback, and questions about this publication by emailing BRSSSTACS@c4innovates.com. Your feedback will help SAMHSA develop future products.

Notes

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