



What is Advocacy?



Advocacy in its simplest form, means speaking up to support another person. An advocate is a person who asserts themselves to recommend or support a cause, policy, plan or a person. An Advocate helps protect a person's rights, tries to improve services for that person, and helps to remove barriers to service. Advocacy should be done in a professional manner, and should always show respect to the person you support and to the healthcare provider (Khasnabis et al., 2010).

Types of Advocacy

There are many different types of advocacy.

- **Self-Advocacy** –Enables and supports individuals to speak out for themselves to express their own needs and represent their own interests.
- **Individual Advocacy** -Can be informal and or formal by a person or group of people concentrating their efforts on just one or two individuals (West Virginia University (WVU), 2020).
- **Systems Advocacy** -At local, state, or national agency levels concerned with changing policies, laws or rules which impact how someone lives their life (Brain Injury Resource Center, 1998).
- **Group Advocacy** -Happens when people come together to represent shared interests or goals then work by offering mutual support, skilled development and a common call for change with the intention of developing or changing services.
- **Peer Advocacy** -Is similar to mentorship, as support is provided from those who have experienced a particular condition, diagnosis, etc., such as mental health and disabilities services.
- **Legal Advocacy** -Advocacy and representation by those who are legally qualified advocates.
- **Professional Advocacy** -Is provided by those who are employed to assist individuals such as Social Workers, Support Coordinators, Direct Support Professionals and Medical Professionals.
- **Healthcare Advocacy** -Is aimed at helping individuals to navigate the healthcare system, whether as an inpatient or outpatient, in order to obtain quality care and services.

Advocacy support is often needed to make simple choices and decisions on a daily basis. However, advocacy may also be needed to assist individuals to make major or complex decisions, such as where to live, relationships, finances and healthcare. To support people with disabilities through advocacy activities, effective communication is key. Providers, Direct Support Professionals and Caregivers interact with people from many different backgrounds and walks of life, and need to be able to communicate information clearly, especially when topics are difficult or sensitive.

- Encourage a communication-friendly environment and support people with communication difficulties to express themselves.
- Be familiar with the individual's preferred way to communicate.
- Understand and respect diverse cultures, and be a good role model by communicating respectfully.
- Communicate regularly with various stakeholders in the health, education, livelihood and social sectors, and facilitate dialogue during stakeholder meetings (Khasnabis et al., 2010).

Health Advocacy Training (CHAT)

What is Community & Health Advocacy Training (CHAT)?

CHAT provides health literacy training to adults with disabilities. CHAT has two parts, the first is training for adults with disabilities, and the second is a guide for supporters and families. To learn more please see follow the link to the website <https://cdl.partnership.vcu.edu/health-advocacy-training-chat/>

Participants will learn about:

- How to better communicate health concerns with doctors, healthcare providers, and supporters.
- How to speak up and ask specific questions about their health.
- How to prepare for medical visits and identify health priorities.



App of the Month



The first mobile app of its kind, the United Nations Convention on the Rights of Persons with Disabilities - CRPD app - supports disability advocacy and participation in global governance by providing ready access to the structure and contents of the UN Convention on the Rights of Persons with Disabilities (CRPD), the Optional Protocol, and its States Parties. (App of the Month is not endorsed by DBHDS Office of Integrated Health. User accepts full responsibility for utilization of app).

References

- Anderson, S., & Bigby, C. (2015). *Self-Advocacy as a Means to Positive Identities for People with Intellectual Disability: 'We Just Help Them, Be Them Really'*. <https://www.onlinelibrary.wiley.com/doi/10.1111/jar.12223>
- Brain Injury Resource Center. (1998). *Systems Advocacy*. <http://www.headinjury.com/advosystem.html>
- Khasnabis C. Heinicke Motsch K. Achu K. (2010). *Advocacy and communication*. Community-Based Rehabilitation: CBR Guidelines. Geneva: World Health Organization. <https://www.ncbi.nlm.nih.gov/books/NBK310928/>
- West Virginia University (WVU). (2020). *Types of Advocacy*. West Virginia University Center for Excellence in Disabilities. <https://ced.hsc.wvu.edu/resources/types-of-advocacy/>



ABA Snippets

What to Expect from "Problem Focused" Behavioral Services -

Behavioral services that focus on challenging behavior contain several hallmarks, which can be organized into the following categories: specific, measurable, and attainable treatment goals; functional behavior assessment (FBA); behavior support plan (BSP) development; training of stakeholders; data/progress review and BSP adjustment; and ongoing progress review with stakeholders. Treatment goals serve as a 'north star' for service delivery and anchor for evaluation of treatment progress. Behaviorists conduct a FBA to determine where, when, and why a challenging behavior occurs (Council of Autism Service Providers, 2020). The results of the FBA are used to develop the BSP, with a few key content areas as follows: operational definitions of behaviors and system(s) of measurement, antecedent modifications, replacement behavior components, and consequence interventions (Tarbox et al., 2013). Stakeholder training on the BSP is paramount, with training that incorporates performance feedback and/or behavioral skills training approaches more likely to be successful for performance-based skills, such as BSP implementation (Arco, 2008; Parsons et al., 2012). Data collection and graphical analysis paired with data-driven adjustment of the BSP, additional training for those implementing, and ongoing progress review towards treatment goals with stakeholders round out elemental components for behaviorists to deliver and consumers to expect (CASP, 2020).

References
Arco, L. (2008). Feedback for improving staff training and performance in behavioral treatment programs. *Behavioral Interventions*, 23, 39-64.
Parsons, M.B., Rollyson, J.H., & Reid, D.H. (2012). Evidence-based staff training: A guide for practitioners. *Behavior Analysis in Practice*, 5(2), 2-11.
Tarbox, J., Najdowski, A.C., Bergstrom, R., Wilke, A., Bishop, M., Kenzer, A., Dixon, D. (2013). Randomized evaluation of a web-based tool for designing function-based behavioral intervention plans. *Research in Autism Spectrum Disorders*, 7, 1509-1517.
The Council of Autism Service Providers (2020). *Applied behavior analysis treatment of autism spectrum disorder: practice guidelines for healthcare funders and managers*. <https://casproviders.org/asd-guidelines/>

Dental Facts and Tips

The Gag Reflex is the reaction caused when the body wants to defend itself from swallowing anything foreign entering the mouth. Gagging is a normal reflex, which can be triggered during a dental visit. In a study done to determine the correlation with dental visits and gag reflex, nearly half of the 478 participants gagged at least once during their dental visit; and 7.5% of those participants almost always or always gagged (Randall et al, 2014). Related fear and fear of pain can be caused from dental visits resulting in sensitive gag reflex for those receiving services. Some tips in assisting with a sensitive gag reflex during a dental appointment include psychological approaches such as relaxation techniques, distraction and desensitization, topical and oral medications, nitrous oxide or anesthesia (Silver, 2019). Gagging is a normal reaction of the body. Those who have a hypersensitive gag reflex should seek assistance to discover what will be the best way to control the reflex, so it does not interfere with medical needs or well-being.

Desensitization (also known as behavior modification technique), may be the most successful approach for those with fears and anxieties. Some behavior modification techniques, which can help either before or during dental appointments, include preparing the individual for upcoming appointments with a positive outlook and encouragement, and having the dental staff give step-by-step instructions throughout the appointment.

For more information regarding dental facts, tips or dental service inquiries please email the DBHDS Dental Team at dentalteam@dbhds.virginia.gov

References
Randall, C., Shulman, G., Crout, R., & McNeil, D. (2014, May 1). Gagging and Its Associations with Dental Care-Related Fear, Fear of Pain and Beliefs About Treatment. Retrieved from <https://doi.org/10.14219/jada.2013.50>
Silver, N. (2019, September 20). What Is a Gag Reflex and Can You Stop It? Retrieved from <https://www.healthline.com/health/dental-and-oral-health/gag-reflex#takeaway>

Wellness Corner

Stop the spread of Germs:

- Stay at least 6 feet (about 2 arms' length) from other people.
- Cover your cough or sneeze with a tissue, then throw the tissue in the trash and wash your hands.
- When in public, wear a mask over your nose and mouth.
- Do not touch your eyes, nose, and mouth.
- Clean and disinfect frequently touched objects and surfaces.
- Stay home when you are sick, except to get medical care.
- Wash your hands often with soap and water for at least 20 seconds.

References
Centers for Disease Control and Prevention (CDC). (2020). Stop the spread of germs. Retrieved from <https://www.cdc.gov/coronavirus/2019-nCoV/downloads/stop-the-spread-of-germs.pdf>

Coronavirus/COVID-19

The COVID-19 pandemic is a rapidly evolving situation. The following links will help you stay up-to-date with the latest information.

To submit COVID-19 questions (for response in an upcoming DBHDS FAQ), please email

stephanie.waite@dbhds.virginia.gov

Latest Resources for CSB's & Other Licensed Providers:
DBHDS – Frequently Asked Questions [08/17/2020]

<http://www.dbhds.virginia.gov/assets/doc/El/dbhds-covid-19-8.17.20.pdf>

Department of Behavioral Health & Developmental Services,
COVID-19 website <http://www.dbhds.virginia.gov/covid19>

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