behave yourself. you are being watched

People with intellectual disability have exactly the same needs as the rest of us – to be loved and cared for, and to give love to others. So who are they learning from, and how do we help them deal with their frustrations? JACQUELINE AMOS explains how she applies Buddhist principles in her work as a psychologist.

One way of receiving love from significant others is to mimic their behaviors – it's a lesson that most of us learn. If our significant others are kind and caring, then this is how we learn to behave. If they are angry and self-cherishing, then this is the behavior we adopt – at least initially until we work out that there are other ways to behave. But people with intellectual disability do not have well-developed cognitive skills and cannot always work out these differences for themselves.

In my early career as a psychologist I worked with adults with intellectual disability who had issues with anger: most of them had experienced a lifetime of institutionalization. Many of these adults had learned that carers in these institutions would not or could not respond to emotions such as sadness, boredom, frustration, or fear, unless they were presented as angry outbursts. Often these angry outbursts were responded to by staff in the form of behavior modification programs that did not look beyond the presenting behavior

I knew in my heart that their anger was harmful to them in a very significant way. I had a vague notion of karma based on what little I knew about Buddhism as well as the Christian notion, i.e. as you sow so shall you reap.

And then I met Venerable Pende Hawter in 1993. He told me about the work he was doing as director of Karuna Hospice Service in Brisbane [see page 30] and the weekly Dharma classes he taught at the Brisbane branch of Chenrezig Institute (now Langri Tampa Centre).

I began to attend Ven. Pende's Dharma classes and signed up for the training course for hospice volunteers. I couldn't help noticing how much class time Pende devoted to karma and anger. This reinforced my feeling that working with people with disability to help them transform their anger was important and worthwhile. In those early days I was still relying on the cognitive therapy techniques available in contemporary psychology to help these clients.

My more recent work with adolescent clients with an intellectual disability tends to draw from the ancient techniques of mind transformation within the Tibetan Buddhist traditions. Initially I only applied these techniques to my own daily life and reaped the benefits on a personal level. Then over the past couple of years I began to think, why not introduce these ideas to the people I am trying to help? They struggle with the same challenge of trying to change their habits to have a happier life, why not introduce them to the same techniques such as removing yourself from the object that evokes anger, as an initial step towards patience, breathing in white light and breathing out your

anger as black smoke, and also tracing back in a sequence to identify the thoughts that cause the anger to arise. The only challenge for me was to break the information down into steps that each client could understand in order to experience some success. Of course this differs depending on the capacity of each client.

Most people with a mild or moderate intellectual disability have a keen sense of injustice: that is, they know when there is one set of rules for their behavior and another for everyone else. Because I am able to work with families, I have the opportunity to introduce these techniques to all family members, in the name of consistency. In this way, there's more likelihood that my clients will experience not only their own, but their significant others' attempts – and success – at transforming anger into patience.

Jane was a 13-year-old girl with a mild disability who also had a speech impediment. She was referred to me by her parents for "behavior intervention" because she had some serious outbursts where she became verbally and physically aggressive towards other members of the family. I met with the family on a few occasions and managed to determine that she was not the only member who had issues with anger. I began by introducing the idea that if she was hurt by what another family member said to her that there was an alternative to fighting back and creating more suffering for herself and others. She began by removing herself from the hurtful situation to her bedroom where she enjoyed listening to music. She then worked on changing her thoughts about the hurtful situation and not reacting. At the same time her parents learned to have more patience and began breaking down tasks and information to a level that she could understand and work with rather than reacting in anger when she wouldn't attempt a task that was too difficult. Because she was younger and therefore her behavior was less entrenched she became a role model for her parents. They began to admire her ability to remain calm.

It was then that I knew that I was on the right track.

Jacqueline Amos, BA (Psych), has graduate diplomas in Applied Science (Applied Child Psychology) and Family Therapy. She is a senior psychologist in the Dept. of Human Services, Victoria, Australia, and is currently living in Taos, New Mexico with her husband, Paddy Ryan, Information Services manager in the FPMT International Office.



